

w/c 19<sup>th</sup> October 2020

Produced by Health Evidence Matters

## Public Health England

### Vaccine update: issue 312, October 2020, flu special edition

Latest developments in vaccines, vaccination policies and procedures for immunisation practitioners.

[Details](#)

### Weekly national flu and COVID-19 surveillance reports published

Main points from report for week 42 are that flu activity, including GP consultations & hospital admissions remains low; COVID-19 hospital & ICU admission rates continue to increase; hospitalisation rates for COVID-19 were 5.55 /100,000 in week 41 vs. 3.60 /100,000 previous week.

[Details](#)

### Cost effectiveness analysis: health economic studies

This guidance aims to explain how to use a cost effectiveness analysis to evaluate digital health products.

[Details](#)

### Public Health Matters: We must re-energise our response to increasing drug-related deaths

The Office for National Statistics (ONS) has published its annual drug misuse deaths report, which shows that there were 4,115 deaths last year due to drug poisoning. This blog looks at some of the report's main findings and the actions we're taking to prevent future drug-related deaths.

[Details](#)

### Public Health Matters: Restarting public health programmes for school-aged children

Public health programmes are essential in promoting and protecting the health of school-aged children. This blog sets out the principles to consider when supporting the restart of programmes safely and effectively during the COVID-19 pandemic.

[Details](#)

## Department of Health and Social Care

A reminder that all government articles on Covid-19 can be found at: <https://www.gov.uk/coronavirus>

### Clinically extremely vulnerable receive updated advice tailored to local COVID alert levels

Clinically extremely vulnerable people in England will receive new guidance to help them reduce their risk from coronavirus, tailored to where they live. These additional precautions ensure an extra layer of protection specifically adapted to people's locations and level of risk.

[Details](#)

### **Government response: consultation on changes to the Human Medicines Regulations to support the rollout of COVID-19 and flu vaccines**

The government will be proceeding with the changes proposed in the consultation, aside from three key changes, including clarifying that the new national protocol should include, where appropriate, the requirements for the supervision of an additional experienced vaccinator.

More detailed guidance will be available in due course, which will further address some of the more detailed points raised. The Department of Health and Social Care will be laying legislation which brings the proposed changes to the Human Medicines Regulations into force soon.

[Details](#)

### **Local COVID-19 alert level update: 15 October 2020**

As of 00.01 Saturday 17th October, the following areas will move from a medium to high local COVID alert level: London; Elmbridge; Essex; Barrow-in-Furness; York; North East Derbyshire; Erewash; Chesterfield. The measures will be reviewed every 14 days.

[Details](#)

### **Government Office for Science**

#### **Specific Learning Difficulties: current understanding, support systems, and technology-led interventions**

A series of rapid evidence reviews exploring current research and technology applicable to learners with Specific Learning Difficulties (SpLDs).

[Details](#)

#### **The R number and growth rate in the UK**

The latest reproduction number (R) and growth rate of coronavirus (COVID-19) in the UK.

Last updated on Friday 16 October 2020.

Latest R number range for the UK

1.3-1.5

Latest growth rate range for the UK

+4% to +7%

[Details](#)

### **NHS England**

#### **Embedding green social prescribing across systems to improve mental health and wellbeing**

NHS England has written to integrated care systems (ICSs) and sustainability and transformation partnerships (STPs) leads, asking them to submit an expression of interest for a project which aims to improve people's mental health through green social prescribing.

[Details](#)

#### **Advancing mental health equalities strategy**

This strategy summarises the core actions that we all need to take to bridge the gaps for communities fairing worse than others in mental health services. It is also an important element of the overall NHS plans to accelerate action to address health inequalities in the next stage of responding to COVID-19.

[Details](#)

## Research and analysis from academic journals – non-coronavirus-related

### **BMJ Open: Understanding pathways to inequalities in child mental health: a counterfactual mediation analysis in two national birth cohorts in the UK and Denmark**

Social inequalities in child mental health are partially explained by perinatal factors in the UK and Denmark. Maternal mental health partially explained inequalities in the UK but not in Denmark.

[Full text](#)

### **BMJ Open: Adherence to lipid-lowering guidelines for secondary prevention and potential reduction in CVD events in Swedish primary care: a cross-sectional study**

Of 37,120 pts, 18% reached target LDL-C  $\leq 1.8$  mmol/L and 32% were not on statin treatment. Based on individual risks, estimated number of CVD events in the study group over 5 years was 9209. If all patients achieved LDL-C  $\leq 1.8$  mmol/L, the number of events could be reduced by 18%.

[Full text](#)

### **Cochrane Database of Systematic Reviews: Blood pressure targets for the treatment of people with hypertension and cardiovascular disease**

Review of 6 RCTs (n=9484) concludes there is probably little to no difference in total mortality and cardiovascular mortality between people with hypertension and cardiovascular disease treated to a lower compared to a standard blood pressure target.

[Full text](#)

### **The Lancet: Efficacy, immunogenicity, and safety of a plant-derived, quadrivalent, virus-like particle influenza vaccine in adults (18–64 years) and older adults ( $\geq 65$ years): two multicentre, randomised phase 3 trials**

These efficacy studies are the first large-scale studies of any plant-derived human vaccine. Together, they show that the plant-derived QVLP vaccine can provide substantial protection against respiratory illness and influenza-like illness caused by influenza viruses in adults. QVLP vaccine was well tolerated and no major safety signal arose in participants who received QVLP vaccine across the two studies.

[Full text](#)

### **Lancet GBD Resource Centre**

Find the latest GBD Study Articles from across the Lancet family of journals, including GBD cause and risk. Summaries, related infographics, videos, and commentary.

[Details](#)

## Research and analysis from academic journals and preprints – coronavirus-related

### **CDSR: Quarantine alone or in combination with other public health measures to control COVID-19: a rapid review**

Cochrane SR (51 studies) notes current evidence is limited because most studies are mathematical modelling studies that make different assumptions on important model parameters. Findings consistently indicate quarantine is important in reducing incidence and mortality during pandemic.

[Full text](#)

### **CDSR: Universal screening for SARS-CoV-2 infection: a rapid review**

The evidence base for the effectiveness of screening comes from two mathematical modelling studies and is limited by their assumptions. Low-certainty evidence suggests that screening at travel hubs may

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slightly slow the importation of infected cases.

[Full text](#)

### **Cochrane Database of Systematic Reviews: Travel-related control measures to contain the COVID-19 pandemic: a rapid review**

Review (36 studies) notes that with much of evidence derived from modelling studies, notably for travel restrictions reducing cross-border travel and quarantine of travellers, there is lack of 'real-life' evidence for many of these measures and certainty of evidence is very low.

It suggests nevertheless, that broadly, travel restrictions may limit the spread of disease across national borders. It notes that entry and exit symptom screening measures on their own are not likely to be effective in detecting a meaningful proportion of cases to prevent seeding new cases within the protected region; but combined with subsequent quarantine, observation and PCR testing, the effectiveness is likely to improve.

[Full text](#)

### **The Lancet Infectious Diseases: Safety and immunogenicity of an inactivated SARS-CoV-2 vaccine, BBIBP-CorV: a randomised, double-blind, placebo-controlled, phase 1/2 trial**

This research found humoral responses against SARS-CoV-2 were induced in all recipients of an inactivated SARS-CoV-2 vaccine (BBIBP-CorV) on day 42, with higher neutralising antibody titres seen in the group receiving 4 µg on days 0 and 21 or days 0 and 28.

A related Comment notes that by September 2020, there were 39 candidate Covid-19 vaccines being tested in clinical trials and over 200 candidates in preclinical development. This was the first study of an inactivated SARS-CoV-2 vaccine to include participants older than 60 years. The vaccine was similarly immunogenic in older (>60) and younger adults, with less adverse events in the older age group.

The levels of neutralising antibody titres and adverse events reported here are similar to those reported for another β-propiolactone inactivated aluminium-adjuvanted whole-virion SARS-CoV-2 vaccine, and the commentators suggest this indicates the reproducibility of clinical results of similar vaccine modes produced by different manufacturers.

A phase 3 trial of the BBIBP-CorV vaccine is currently underway in Abu Dhabi, United Arab Emirates.

[Full text](#)

### **British Journal of Clinical Pharmacology: COVID-19 vaccines: the importance of transparency and fact-based education**

Editorial notes when one or more of 160+ vaccines for SARS-CoV-2 currently under development are shown to be sufficiently safe and effective, transparency becomes more relevant for public trust when confronted with this unprecedented paradigm in vaccine development.

[Full text](#)

### **The Lancet Public Health: COVID-19 in New Zealand and the impact of the national response: a descriptive epidemiological study**

New Zealand's response resulted in low relative burden of disease, low levels of population disease disparities, and the initial achievement of COVID-19 elimination.

[Full text](#)

[Comment Lessons from New Zealand's COVID-19 outbreak response](#)

### **The Lancet Digital Health: Epidemiological changes on the Isle of Wight after the launch of the NHS Test and Trace programme: a preliminary analysis**

Results show that the epidemic on the Isle of Wight was controlled quickly and effectively after the launch of Test and Trace. 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 text](#)

[Comment: Towards better contact-tracing in the UK](#)

### **The Lancet: Scientific consensus on the COVID-19 pandemic: we need to act now**

Still think herd immunity is a good idea? A letter from leading experts sets out in detail why it is unethical, impossible, and an all round bad idea

[Full text](#)

### **The Lancet: SARS-CoV-2 immunity: review and applications to phase 3 vaccine candidates**

Review discusses what is currently known about human humoral and cellular immune responses to severe acute respiratory syndrome coronavirus 2 and relates this knowledge to the COVID-19 vaccines currently in phase 3 clinical trials.

[Full text](#)

### **The Lancet Infectious Diseases: Genomic evidence for reinfection with SARS-CoV-2: a case study**

Finding of case study (25 yr old man in US) suggest the patient was infected on two separate occasions by a genetically distinct virus; thus previous exposure might not guarantee total immunity in all cases and all individuals should continue to take identical precautions.

[Full text](#)

[Commentary](#)

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

This Viewpoint emphasises 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 text](#)

### **NIHR: Living with Covid**

This rapid and dynamic review draws on the lived experience of patients and expert consensus as well as published evidence 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. Long Covid, the name commonly used to explain lasting effects of covid-19, may actually be four different syndromes

[Details](#)

### **NIHR: Brain and nerve complications are more common than expected in younger patients with severe COVID-19**

Expert commentary is provided for a study which found, that of 125 cases of confirmed or probable COVID-19 infection and psychiatric or neurological symptoms. 62% had a stroke (most of whom were <60 years) and 31% had an altered mental state.

[Full text](#)

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### **JECH: It depends on how you ask: measuring bias in population surveys of compliance with COVID-19 public health guidance**

Estimates of compliance with COVID-19 guidance vary substantially with how the question is asked. Standard tracking surveys tend to pose questions in ways that lead to higher estimates than alternative approaches. Experimental tests of these surveys offer public health officials greater insight into the range of likely compliance estimates to better inform policy and communications.

[Full text](#)

### **JECH: Excess mortality in England and Wales during the first wave of the COVID-19 pandemic**

Between 7 March and 8 May 2020, there were 47 243 (95% CI: 46 671 to 47 815) excess deaths in England and Wales, of which 9948 (95% CI: 9376 to 10 520) were not associated with COVID-19. Overall excess mortality rates varied from 49 per 100 000 (95% CI: 49 to 50) in the South West to 102 per 100 000 (95% CI: 102 to 103) in London. Non-COVID-19 associated excess mortality rates ranged from -1 per 100 000 (95% CI: -1 to 0) in Wales (i.e., mortality rates were no higher than expected) to 26 per 100 000 (95% CI: 25 to 26) in the West Midlands.

[Full text](#)

### **BMJ Editorial: Neuropsychiatric complications of covid-19**

Highlights the neuropsychiatric complications of covid-19 and highlights neuropsychiatric symptoms to be aware of in people with long-COVID

[Full text](#)

### **BMJ Editorial: Covid-19 exposes NHS fault lines in England**

Editorial notes actions taken to prevent NHS being overwhelmed in 1st wave, serves as salutary reminder of longstanding challenges; namely covid-19 affected some communities more than others, underlined neglect of social care and showed organisation of NHS is not fit for purpose.

[Full text](#)

### **The BMJ Interview: Tim Spector on how data can arm us against covid-19**

The epidemiologist and popular science author whose symptom tracker app has revealed some vital information about the virus talks about opportunities to use data better—and how he thinks the UK's leadership failed in the pandemic

[Full text](#)

### **BMJ news: Covid-19: Leading doctors argue against local lockdowns**

**Newly released documents** reveal that SAGE recommended on 21 September that an immediate circuit breaker was the best way to control cases, arguing against a policy of increased restrictions in local areas to control the covid-19 pandemic

[Full text](#)

### **BMJ news: Covid-19: England's test and trace system records worst weekly performance since launch**

The system only reached 62.6% of close contacts of people who tested positive for covid-19 in the week ending 7 October, down from 69.5% the previous week. This is the lowest percentage since the service launched, and below the 80% that the government's SAGE estimates is required for the system to work.

The data show a stark contrast between cases handled by local public health protection teams—which reached 97.7% of contacts and asked them to self-isolate in the week to 7 October—and cases handled either online or by call centres, which reached only 57.6% of close contacts.

[Full text](#)

### **BMJ news: The NHS Check study to assess effect of Covid-19 on wellbeing of NHS staff in England**

This King's College Hospital research project has received £530 000 in government funding and will be extended to the staff of 18 other trusts. It also hopes to assess support systems and effects on NHS workers from ethnic minority backgrounds.

[Full text](#)

### **BMJ news: Pandemic preparedness: Government must release 2016 report, says information commissioner**

The Information Commissioner's Office has ordered the government to release an unpublished report on Exercise Cygnus, a 2016 exercise to test the UK's preparedness for a flu pandemic.

[Full text](#)

### **BMJ Opinion: Covid-19: Better contact tracing could help save lives and the economy**

Insights on how to improve contact tracing from a community pilot project

[Full text](#)

### **BMJ Opinion: Scientific divisions on covid-19: not what they might seem**

It is not whether we should open up or lock down. Rather, it is how we can break the chain of transmission, argue Martin McKee and David Stuckler

[Full text](#)

### **NIHR Centre for Engagement and Dissemination**

#### **Themed review: Living with Covid19**

The ongoing health impacts of Covid19 bringing together different types of evidence (data driven, expert opinion and lived experience) to tie together what we currently know about the long-term effects of Covid or 'Long Covid'

[Details](#)

### **MRC Biostatistics Unit**

#### **New results of real-time tracking of COVID-19**

Around 47,000 Covid-19 infections are occurring each day across England, with daily deaths expected to hit 240 to 690 by 26 October, according to new predictions this week by the Medical Research Council (MRC) biostatistics unit at Cambridge University on how fast the epidemic is growing across the country. It estimates cases are doubling in under seven days, with a "substantial proportion" of those being asymptomatic.

[Details](#)

### **Office for National Statistics (ONS)**

#### **Deaths involving COVID-19 (published 13<sup>th</sup> October)**

There were 321 deaths involving the coronavirus (COVID-19) in England and Wales in the week ending 2 October 2020, the highest weekly figure since the week ending 10 July 2020.

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However, this remains far below numbers seen earlier in the pandemic, and accounts for just 3.2% of all deaths in the latest week.

By region, the highest number of COVID-19 deaths was reported in the North West (106 deaths), followed by the North East (40).

The total number of deaths across England and Wales in the week ending 2 October 2020 was 9,945 (above the five-year average for the seventh time in the past eight weeks).

Since the start of the pandemic, there have been 53,187 COVID-19 deaths registered in England and Wales, up to 2 October 2020 (29,300 men and 23,887 women).

[Details](#)

### **Local lockdowns affect feelings of freedom and independence (published 16<sup>th</sup> October)**

[Respondents were asked in which ways the coronavirus is affecting their life](#), 67% of adults in local lockdown areas reported a lack of freedom and independence as their main concern, compared to 56% of those who are not currently in lockdown.

[Details](#)

### **Ethnic background contrasts in deaths involving COVID-19 (published 16<sup>th</sup> October)**

A substantial proportion of the [differences in COVID-19 mortality for people of ethnic minority backgrounds](#) can be explained by demographic, geographical and socioeconomic factors, modelling has found.

After adjustments for those factors, males in all ethnic minority groups other than Chinese retained a higher rate of COVID-19 mortality; for females, all other than Bangladeshi, Chinese and Mixed ethnic groups retained a raised rate of COVID-19 mortality following adjustments.

[Details](#)

### **COVID-19 Infection Survey (published 17<sup>th</sup> October)**

The estimated number of people testing positive for the coronavirus (COVID-19) has continued to increase rapidly in recent weeks.

An estimated 336,500 people within the community population in England had COVID-19 during the most recent week, from 2 to 8 October 2020, equating to around 1 in 160 people, or 0.62% of the population.

Between 2 and 8 October 2020, we estimate there were 5.11 new COVID-19 infections for every 10,000 people per day in the community population in England, equating to around 27,900 new cases per day. These figures do not include people staying in hospitals, care homes or other institutional settings.

[Details](#)

### **The Official History of Britain: our story in numbers as told by the Office for National Statistics**

This publication celebrates the richness and detail of ONS and Census statistics down the years. A stocking-filler for statistics lovers

[Details](#)

### **Samaritans**

#### **Pushed from pillar to post: improving the availability and quality of support after self-harm in England**

This report finds that there is no consistently effective support available to people who self-harm. The research identified four key support needs for people who self-harm, which are seen as essential to providing effective care: distraction from immediate self-harm urges; emotional relief in times of stress; developing alternative coping strategies; and addressing the underlying reasons for self-harm. The

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report makes several recommendations for how the needs of people who self-harm can be met more effectively.

[Details](#)

### **Voluntary Community and Social Enterprise (VCSE) Health and Wellbeing Alliance**

#### **Reducing health inequalities for people living with frailty: a resource for commissioners, service providers and health, care and support staff**

This resource aims to share practical recommendations and examples of how commissioners, service providers and health, care and support staff can overcome barriers to health care for people at greater risk of frailty, including people experiencing deprivation, people who are homeless, people experiencing substance misuse, people with learning disabilities, LGBT people, people with mental health needs, people from Gypsy and Traveller communities, and vulnerable migrants. It offers insights on how services can work in collaborative, holistic and inclusive ways to reduce health inequalities for people living with frailty, and offer individuals the support needed to manage the condition in the long term.

[Details](#)

### **House of Commons Library**

#### **Coronavirus: adult social care key issues and sources**

This briefing aims to provide a high-level overview of policy in relation to adult social care since the start of the coronavirus outbreak in early 2020, including the development of key UK government guidance. It also provides information on some key issues that have been raised during the course of the outbreak, including statistics on deaths in care homes, funding for adult social care, and testing for care home staff and residents.

[Details](#)

### **Local Government Information Unit**

#### **Power down to level up: resilient place-shaping for a post-Covid age**

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 policy success is best measured.

[Details](#)

### **Local Government Association**

#### **Fragmented funding: the complex local authority funding landscape**

This report looks at how the local government funding landscape has developed in recent years, with a focus on the characteristics of grants coming from central government. It finds that councils in England have seen their core funding from central government reduce by £15 billion in the past decade. It also finds that, in recent years, they have seen a rise in the number of short-term, ring-fenced, small grants they receive annually from government departments and agencies.

[Details](#)

## **Royal College of Obstetricians and Gynaecologists**

### **Flu vaccination for pregnant women essential this winter**

In a joint statement, the Royal College of Obstetricians and Gynaecologists and Royal College of Midwives are urging all pregnant women to take up the offer of a free flu vaccination, stating that the flu vaccination is safe in any pregnancy trimester and during lactation.

[Details](#)

## **Nuffield Trust**

### **How will Brexit affect the UK's response to coronavirus?**

As the European Council meets to review the state of negotiations on the future EU-UK partnership, 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.

[Details](#)

### **Lockdown loneliness and anxiety across the generations**

With three-tiered Covid-19 restrictions in place and a possible 'circuit breaker' short lockdown in the news, the chart of the week looks at how the last national lockdown affected individual wellbeing, describing the stark differences across generations on how stressed, anxious and lonely that people felt, with young people faring worst.

[Details](#)

## **National Voices**

### **Stories of shielding: life in the pandemic for those with health and care needs**

When lockdown began, Local 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. Contributors also discuss 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 the needs of this group of people are addressed.

[Details](#)

## **Covid Recovery Commission**

### **Levelling up communities**

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 in the post-Covid-19 world than it was before.

[Details](#)

### **International Longevity Centre UK (ILC-UK)**

#### **Health equals wealth: the global longevity dividend**

This report (launched ahead of the G20 Finance Ministers' meeting) looks at the significant, and growing, economic contributions of older people across the G20. It argues that leveraging the economic contributions of older people will be instrumental in the global post-pandemic recovery, and that addressing health barriers to spending, working, caring and volunteering for longer can unlock a significant 'longevity dividend'. The analysis finds that countries that spend more on health as a proportion of GDP see higher employment participation, volunteering, and spending by older people. Furthermore, increasing preventive health spending by just 0.1 per cent is associated with a 9 per cent increase in annual spending by people aged 60 and over.

[Details](#)

### **British Heart Foundation**

#### **Heart failure: a blueprint for change**

This report reveals that prior to lockdown, UK hospital admissions for heart failure had risen by nearly a third over the past five years to more than 100,000 per year. It suggests that this could partly be due to missed opportunities to diagnose and treat people with the condition before they become more unwell and need to be admitted to hospital. It concludes that disjointed and unequal care, probably exacerbated by the Covid-19 pandemic, is leading to more people dying with heart failure.

[Details](#)

### **The Health Foundation**

#### **The bigger picture: learning from two decades of changing NHS care in England**

This report looks back at how NHS care in England has changed over the past two decades. It finds a disconnect between the way services have developed and the changing health needs of the population. It finds that, while the volume of health care delivered grew substantially, growth varied significantly across different services.

[Details](#)

### **Care Quality Commission (CQC)**

#### **State of Care**

The annual assessment of the state of health and social care in England warns the pandemic has highlighted the long-standing need for reform, investment and workforce planning in adult social care.

[Details](#)