

Statistical bulletin

Coronavirus and clinically extremely vulnerable people in England: 22 February to 27 February 2021

Analysis of clinically extremely vulnerable people in England during the coronavirus (COVID-19) pandemic, including their behaviours and mental and physical well-being.

Contact:
Anna Fok
publicservicesanalysis@ons.gov.
uk
+44 (0)1633 651752

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1 . Main points

- The COVID High Risk Group Insights Study was compiled in response to policy questions on whether the population who had been advised to shield were following shielding guidance and the impact on their life and behaviours.
- It was produced, run and analysed in a collaboration between the Department for Health and Social Care (DHSC), NHS Digital (NHS-D) and the Office for National Statistics (ONS).
- Of those who were aware of the government advice to shield, 55% reported completely following the guidance; a further 39% reported following the guidance quite closely.
- The majority (81%) of clinically extremely vulnerable people had left their home in the last seven days, when asked between 22 and 27 February 2021; this has increased compared with Wave 1 (76%, 18 to 30 January 2021).
- At the time of the survey, the majority (94%) of clinically extremely vulnerable people reported that they had received at least one dose of the COVID-19 vaccine and 4% had reportedly received both doses.

Statistician's comment

“It is encouraging to see that such a high percentage of clinically extremely vulnerable people have received at least one dose of a COVID-19 vaccine.

“Though compliance with the guidance given to the 2.2 million people identified as clinically extremely vulnerable through the shielded patients list remains high, we have seen an increase in those leaving their house for reasons advised as potentially risky, such as going to a shop or pharmacy and working outside of the house.

“Decreasing infection rates across most of England, coupled with the rollout of the vaccination programmes, may explain why some clinically extremely vulnerable people now feel more confident working outside of their home. We will continue to monitor the attitudes and behaviours of the vulnerable in the coming months.”

Tim Gibbs, Public Services Analysis Team, Office for National Statistics

Follow the Public Services Analysis team on Twitter: [@HughStick](https://twitter.com/HughStick)

2 . Indicators of clinically extremely vulnerable people following shielding guidance

In England, at the time of sampling (one week prior to data collection), 2.2 million people were identified as being clinically extremely vulnerable (CEV) to severe impact from the coronavirus (COVID-19). From 15 February, an additional 1.5 million people in England were identified as CEV through the COVID-19 population risk assessment. These individuals were excluded from this wave as they had not been identified at the time of sampling.

In previous national lockdowns, CEV people were advised to shield from others to protect themselves from the virus. The guidance for CEV people to shield was reintroduced on 6 January 2021. These data were collected from 22 to 27 February. More information on identifying this group of people, [shielding guidance](#) and collecting the data can be found in [Glossary](#) and [Measuring the data](#) sections.

The data show that of CEV people who reported being aware of the guidance, 55% reported completely following shielding guidance (representing an estimated 1.2 million people). A further 39% of CEV people reported following shielding guidance quite closely.

Approximately one-fifth (19%) of CEV people reported not leaving the house in the last seven days, despite guidance advising that CEV people could leave the house to exercise and attend essential medical appointments. This is significantly lower than the previous month, where 24% of CEV people had not left the house in the last seven days (COVID High Risk Group Insights Study, 18 to 30 January 2021). This suggests more people were leaving the house.

Table 1: Indicators of clinically extremely vulnerable people following shielding advice
England, 22 February to 27 February 2021

Indicators of following guidance	18 to 30 January	22 to 27 February
Those who report completely following shielding advice ²	59	55
Those who report following shielding advice quite closely ²	36	39
Those who report not leaving the house at all in the last seven days	24	19
Of those who have left home in the last seven days, those who report leaving the house to socialise ³	4	3
Those receiving no visitors, except for support with personal care, in the last seven days	77	88

Source: Office for National Statistics – COVID High Risk Group Insights Study

Notes

1. In February 2021 there were additions made to the Shielded Patient List where a further 1.5 million people were advised to shield. The sample for this wave of the COVID High Risk Group Insights Study does not reflect the behaviour of the additional clinically extremely vulnerable people.
2. Only those who were aware of the guidance to shield were asked about their compliance to the guidance.
3. Social visits may be from people in their support bubble. This means that a CEV person could have had visitors and still be completely following guidance. More information on support bubbles can be found in Glossary.

More about coronavirus

- Find the latest on [coronavirus \(COVID-19\) in the UK](#).
- [Explore the latest coronavirus data](#) from the ONS and other sources.
- All ONS analysis, summarised in our [coronavirus roundup](#).
- View [all coronavirus data](#).
- Find out how we are [working safely in our studies and surveys](#).

3 . Reasons for clinically extremely vulnerable people leaving their homes

When asked between 22 to 27 February, 81% of clinically extremely vulnerable (CEV) people reported leaving their home in the last seven days, compared with 92% of the [general adult population of England](#).¹ There are recommended exceptions on leaving the home within the guidance for CEV people such as to exercise and to attend medical appointments.

Of CEV people who had left their home in the last seven days, the most common reasons for leaving the house were for exercise (63%), to go to the shops or pharmacy (45%) or to attend medical appointments (39%).

Of CEV people who had left home in the last seven days, a small number (3%) reported they had gone out to socialise. The guidance to CEV people states that they can still meet with their support bubble. More information on support bubbles can be found in [Glossary](#).

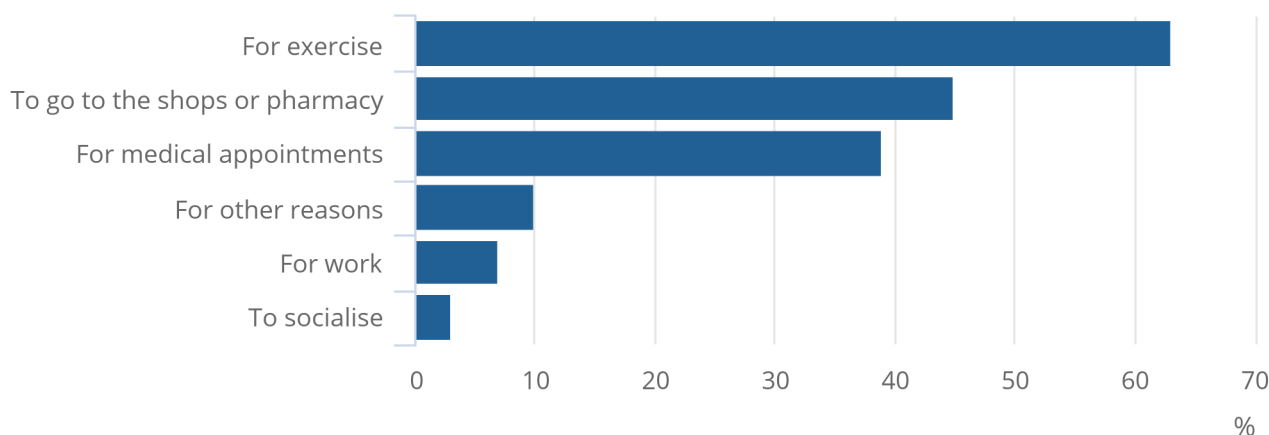
Of CEV people who had left home in the last seven days, 7% had left the house to go to work.

Figure 1: Almost half (45%) of clinically extremely vulnerable people who had left their home went to the shops or pharmacy despite being strongly advised not to

Reasons mentioned for leaving home by clinically extremely vulnerable people who had left home in the last seven days, England, 22 February to 27 February 2021

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Reasons mentioned for leaving home by clinically extremely vulnerable people who had left home in the last seven days, England, 22 February to 27 February 2021



Source: Office for National Statistics - COVID High Risk Group Insights Study

Notes:

1. Respondents were able to choose multiple reasons for leaving their home, so percentages may not sum to 100.

While over half of all CEV adults are retired (55%), almost a quarter (23%) of CEV people reported they currently work. Of CEV people who currently work, 37% reported they work outside the home at some point in a typical week. This is significantly higher than the percentage of CEV people who reported working outside the home the previous month at 24%.

Of CEV people who usually work outside the home at some point in a typical week, almost two thirds (63%) reported that they were comfortable about working outside home, despite [shielding guidance](#) advising CEV people to work from home, or if this is not possible, to not attend work. This has increased from the previous month, with 53% of CEV people who normally worked outside the home reported to being comfortable working outside their home (COVID High Risk Group Insights Study, 18 to 30 January 2021).²

Notes for: Reasons for clinically extremely vulnerable people leaving their homes

1. Estimates for the general population are calculated from the Opinions and Lifestyle Survey (COVID-19 module) for adults in Great Britain, between 17 February and 21 February 2021.
2. The question about working outside the home changed from “Do you currently work outside the home?” (COVID High Risk Group Insights Study, 18 to 30 January 2021) to “Thinking of a typical week, what proportion of your work takes place outside your home?” (COVID High Risk Group Insights Study, 22 to 27 February 2021).

4 . Clinically extremely vulnerable people and the COVID-19 vaccination

At the time of asking (between 22 and 27 February 2021), clinically extremely vulnerable (CEV) people had begun to receive or be offered the coronavirus (COVID-19) vaccine. For more information on the COVID-19 vaccine please see [Glossary](#).

Overall, 94% of the CEV population reported having had one or two COVID-19 vaccine doses. In comparison, 34% of the [general adult population of England](#) have received at least one dose of the vaccine.¹ Of the CEV population who have received at least one dose of the COVID-19 vaccine, one in twenty had received both doses of the vaccine; this is 4% of all CEV people.

The percentage of CEV people reporting having had one or two COVID-19 vaccine doses at the time of asking (22 and 27 February 2021) has increased compared to the previous month (18 to 30 January 2021) when approximately 35% of CEV people had received one or two doses of the vaccine.

Of the CEV population who had received at least one dose of the vaccine, those aged 75 years and over were more likely to have received two COVID-19 vaccine doses (11%) compared with an average of 5% across all age groups. This is expected, because those aged 75 years and over are in the top priority groups for receiving the COVID-19 vaccine.

Almost three quarters (71%) of CEV people who had received at least one dose of the vaccine, had received the vaccination within the four weeks prior to being surveyed. For those who had received two doses, they reported their most recent vaccination.

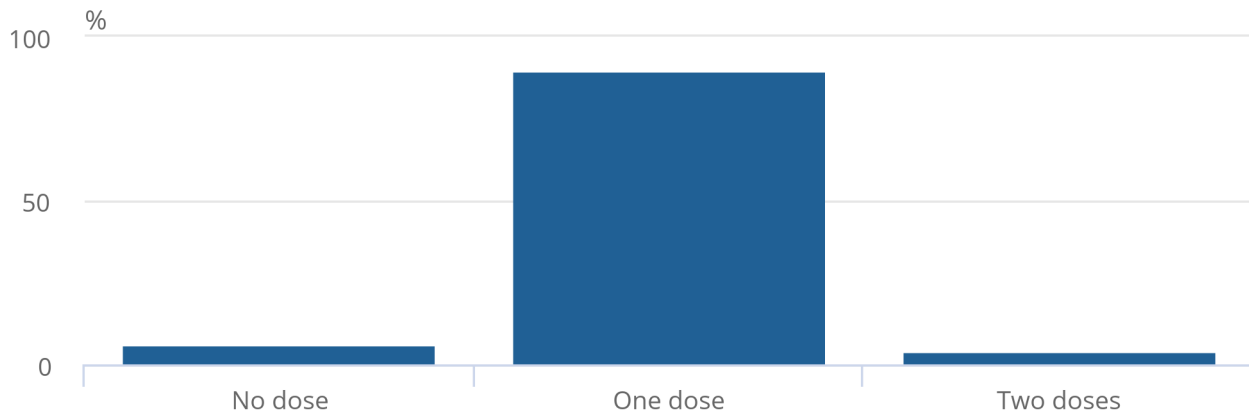
Of CEV people who were aware of the advice to shield, 55% reported following guidance completely. For those who were aware of the advice to shield and reported following the guidance completely, there was no [statistically significant](#) difference in complete guidance adherence in those who had received one dose of the vaccine (55%) compared to two doses of vaccine (59%).

Figure 2: Approximately one in twenty (4%) of all clinically extremely vulnerable people have had both doses of coronavirus (COVID-19) vaccine

Percentage of coronavirus (COVID-19) vaccinations doses received, England, 22 February to 27 February 2021

Figure 2: Approximately one in twenty (4%) of all clinically extremely vulnerable people have had both doses of coronavirus (COVID-19) vaccine

Percentage of coronavirus (COVID-19) vaccinations doses received, England, 22 February to 27 February 2021



Source: Office for National Statistics – COVID High Risk Group Insights Study

Notes:

1. This is not an official estimate of clinically extremely vulnerable people who have had a vaccine. For NHS statistics of vaccinations given, see [NHS Covid-19 Vaccinations](#).

Notes for: Clinically extremely vulnerable people and the COVID-19 vaccination

1. Estimates for the general population are calculated from the Opinions and Lifestyle Survey (COVID-19 module) for adults in Great Britain, between 17 February and 21 February 2021.

5 . Clinically extremely vulnerable people data

[Coronavirus and clinically extremely vulnerable people in England](#)

Dataset | Released 29 March 2021

Clinically extremely vulnerable (CEV) people in England during the coronavirus (COVID-19) pandemic from the COVID High Risk Group Insights Study. Includes information on their behaviours and well-being since receiving shielding guidance.

6 . Glossary

Clinically extremely vulnerable

People who are identified as clinically extremely vulnerable (CEV) are at very high risk of severe illness from the coronavirus (COVID-19). Up to 16 February 2021, CEV people were identified either because of a pre-existing condition or based on the clinical judgement of their clinician or GP that they are at higher risk of serious illness if they catch COVID-19. From 16 February 2021, individuals can still be identified as CEV by these routes, but also by COVID-19 population risk assessment. More information can be found in [Guidance on shielding and protecting people who are CEV from COVID-19](#). The NHS identified approximately 2.2 million people as being CEV.

In February 2021, there were additions made to the Shielded Patient List following the COVID-19 population risk assessment, where a further 1.5 million people were advised to shield. The sample for this wave of the COVID High Risk Group Insights Study does not reflect the behaviour of the additional CEV people, as the sample was drawn before these people were added.

Lockdown

From 23 March 2020, the UK was placed under lockdown measures, with schools shut, non-essential shops closed, and the population asked to work from home where possible and to only leave their houses for exercise and essentials. These measures began to be eased from mid-May 2020. Clinically extremely vulnerable (CEV) people were advised to shield from the start of this lockdown. Shielding was paused on 31 July 2020 for most of the country, with only a few local areas continuing to have shielding advice in place until 5 October 2020.

From 5 January 2021, the UK government announced a further national lockdown for [England](#) and on 6 January 2021 shielding guidance was reissued to all CEV people.

Shielding

Shielding is a voluntary action in which the individual stays in their home or garden as much as possible, except for leaving their household to attend essential medical appointments or for exercise. Further shielding guidance includes:

- clinically extremely vulnerable (CEV) people can meet one person outdoors from another household for exercise
- try to stay two metres away from others within their household, especially if they display symptoms of the virus or have been advised to self-isolate
- CEV people can still meet with their support bubble
- the CEV person should try to access services to minimise their need to leave their home, such as food and prescription delivery services

The full guidance can be viewed in [Guidance on shielding and protecting people who are CEV from COVID-19](#).

Support bubbles

A support bubble is a group of two households that join together and can then act as one household. People need to meet certain eligibility criteria to form a support bubble. Individuals that are eligible to form a support bubble include those who live alone (even if carers visit to provide support) and those who are the only adult in their household who does not need continuous care as a result of a disability. The full guidance can be viewed in [Making a support bubble with another household](#).

Vaccination for COVID-19

Vaccinations against coronavirus (COVID-19) were initially prioritised for the people most at risk to COVID-19, including healthcare workers, those in certain age groups and those who are clinically extremely vulnerable. The vaccine is given as an injection and requires two doses; the second dose is given between 3 and 12 weeks after the initial injection. At the time of this survey, the approved vaccines in the UK were Pfizer/BioNTech, AstraZeneca (also known as the Oxford vaccine) and Moderna vaccine. For more information on vaccines see [Coronavirus \(COVID-19\) vaccine](#).

It is possible to have taken part in clinical trials for the development of COVID-19 vaccines. In some trials, participants may have received more than two doses of the vaccine. We do not ask whether a respondent received their vaccine as part of a clinical trial.

7 . Measuring the data

Survey information

The COVID High Risk Group Insights Study was compiled rapidly in response to policy questions on whether the population who had been advised to shield were following shielding guidance and other information. It was produced, run and analysed in a collaboration between the Department for Health and Social Care (DHSC), NHS Digital (NHS-D) and the Office for National Statistics (ONS).

This survey was specifically designed to obtain information on the people advised by the government to shield from the coronavirus (COVID-19). As with all surveys, the estimates included in this bulletin have an associated margin of error. The ONS experts were consulted on questionnaire design. The survey respondents were selected using implicit stratification from a list of those identified as clinically extremely vulnerable (CEV) and were contacted by telephone.

This is the second bulletin in this series, with the survey in its current format and using the current data collection methodology.

Estimates for Wave 2

The second wave of data was collected between 22 February and 27 February 2021. The sample size was 1,441 out of 2.2 million CEV people (as of 7 January 2021) and survey weighting was used to weight the sample estimates to provide estimates for the population of CEV people. The estimates were weighted, adjusting for:

- sex
- age group

All answers are self-reported. Family members or carers may respond on behalf of those they care for where appropriate, for example, those unable to answer themselves.

Identifying the clinically extremely vulnerable

At the start of the coronavirus pandemic, some members of the public were identified as being at high risk of severe illness from COVID-19. This list has been updated continually, but the number identified as CEV remained stable at 2.2 million people until February 2021, when a further 1.5 million people were identified as CEV. More information can be found in [Guidance on shielding and protecting people who are CEV from COVID-19](#).

Those identified as being CEV were sent a letter and initially advised to shield until at least the end of June 2020; this was then extended to 31 July 2020. Between 1 August 2020 and 4 January 2021, CEV people received advice to shield if they lived in certain areas (for example, Leicester) because of the tier system. Shielding guidance was reintroduced on 6 January following a third national lockdown announcement. The [following guidance \(PDF, 186KB\)](#) was also received, stating that shielding is a voluntary action:

"Whilst you are strongly advised to follow these extra precautionary shielding measures to help keep yourself safe, this remains advice, not the law. You must, however, follow the lockdown rules that apply to everyone."

Differences between shielding and other stay at home guidance

Shielding differs from [guidance for self-isolation](#) (self-quarantine because either a person or someone in their household displays symptoms or receives a positive COVID-19 test result) and [guidance for social distancing](#) (measures everyone should be taking to avoid social interaction with other households). Shielding encourages the individual to stay in their house or garden with no visitors (except a nurse or support or care worker or, if they are eligible, their support bubble). More information is available in [Glossary](#).

8 . Strengths and limitations

The main strengths of the COVID High Risk Group Insights Study include:

- it allows for timely production of data and statistics that can respond quickly to changing needs, as the questions included are reviewed for each wave
- robust methods are adopted for the survey's sampling and weighting strategies to limit the impact of bias
- quality assurance procedures are undertaken throughout the analysis stages to minimise the risk of error

The main limitations of the COVID High Risk Group Insights Study include:

- in the case of those who are unable to answer the survey themselves, other people (for example, family member or carer) can answer on their behalf; in this wave of the survey, those responding on behalf of the clinically extremely vulnerable (CEV) person were not asked about well-being and attitudes
- as with all surveys these estimates have an associated margin of error, as they are based on a sample of CEV people, which is weighted to be representative of the whole CEV population

9 . Related links

[Coronavirus \(COVID-19\) latest data and analysis](#)

Webpage | Updated as and when data become available

Latest data and analysis on the coronavirus (COVID-19) in the UK and its effect on the economy and society.

[Coronavirus \(COVID-19\) roundup](#)

Blog | Updated as and when data become available

Catch up on the latest data and analysis related to the coronavirus pandemic and its impact on our economy and society.

[Coronavirus and shielding of clinically extremely vulnerable people in England](#)

Bulletin | Released 5 August 2020

Analysis of clinically extremely vulnerable people (the shielding population) in England during the coronavirus (COVID-19) pandemic, including their behaviours and mental and physical well-being.

[Coronavirus and the social impacts on disabled people in Great Britain](#)

Article | Released 11 November 2020

Indicators from the Opinions and Lifestyle Survey on the social impact of the coronavirus (COVID-19) pandemic on disabled people in Great Britain. This release uses two waves of survey results covering 24 September to 4 October 2020 and includes indicators broken down by impairment type. Insights from qualitative research commissioned by the Cabinet Office Disability Unit and conducted by Policy Lab with disabled people help illustrate how the survey indicators can be experienced by disabled people in day-to-day life.