

Statistical bulletin

Coronavirus and shielding of clinically extremely vulnerable people in England: 9 July to 16 July 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.

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1 . Main points

- Approximately two-thirds (68%) of clinically extremely vulnerable (CEV) people who normally worked (prior to receiving shielding advice) are comfortable going back to work outside the home if protective measures are in place.
- 6% of CEV people who normally worked are planning not to return to work in the next four months.
- Between 9 and 16 July, 65% of CEV people reported receiving no visitors except for support with personal care; this is a [statistically significant](#) decrease from 77% between 24 and 30 June, reflecting the guidance which advises CEV people that they can form a support bubble with another household.
- An estimated 328,000 CEV people (15%) live in a household with children aged under 16 years; 3% (68,000 CEV people) reported that living in this type of household has had an impact on their ability to shield.

Statistician's comment

"As the advice for clinically extremely vulnerable (CEV) people to shield was paused from 1 August 2020, those who previously worked are planning what happens next. Before being advised to shield, almost a third of CEV people worked.

"Most are planning on returning to work or continuing to work from home in the next four months but around 1 in 20 CEV people are planning not to return to work. Of those who said they would return to work outside the home, 68% reported they felt comfortable doing so, if either they or their employer put protective measures in place."

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

Follow the Public Services Analysis team on Twitter: [@HughStick](#)

2 . Indicators of clinically extremely vulnerable people following shielding guidance

In England, 2.2 million people were identified as being clinically extremely vulnerable (CEV) to severe impact from the coronavirus (COVID-19). These people were advised to shield from others, until 31 July 2020, to protect themselves from the virus. The guidance for CEV people has changed over time. An update on 6 July 2020 advised that CEV people could form a support bubble with another household and be in open spaces for exercise and other reasons. These data were collected from 9 to 16 July, just after this update was released. More information on identifying this group of people, shielding guidance and collecting the data can be found in the [Glossary](#) and [Measuring the data](#) sections.

The latest data, collected from 9 July to 16 July 2020, show that 60% reported completely following shielding guidance (an estimated 1,333,000 people). This is a [statistically significant](#) decrease compared with data collected from 9 June to 18 June 2020, where 63% reported completely following shielding guidance, but it is not a statistically significant increase on 58% (24 June to 30 June 2020).

The percentage who reported not leaving the house since receiving shielding advice or only leaving the house for exercise in the previous seven days was 48%. This is lower than the percentage that reported completely following shielding guidance (60%) because when the data were collected, guidance advised that CEV people could leave the house to meet with others as well as exercising.

There has also been a [statistically significant](#) decrease in the percentage of CEV people receiving no visitors (except for support with personal care), from 77% (24 June to 30 June 2020) to 65% (9 July to 16 July 2020). This decrease reflects the guidance update on 6 July 2020, which advised CEV people that they can form a support bubble with another household. This means that a CEV person could have visitors and still be completely following guidance. More data on support bubbles are included in [Measuring the data](#).

Table 1: Indicators of clinically extremely vulnerable people following shielding advice
England, 9 July to 16 July 2020

	14 May to 19 May	28 May to 3 June	9 June to 18 June	24 June to 30 June	9 July to 16 July
Percentage that report completely following shielding advice	63	62	63	58	60
Percentage that report either not leaving the house at all or leaving the house only for exercise	65	67	64	60	48
Percentage receiving no visitors, except for support with personal care	86	87	83	77	65

Source: Office for National Statistics – Shielding Behavioural Survey

Notes

1. The guidance for CEV people changed on 1 June 2020 and advised that CEV people could leave the house once a day into open space, as long as they could keep two metres from others not shielding alongside them. This change occurred mid collection of 28 May to 3 June 2020 data. For more information, see [Measuring the data](#). [Back to table](#)
2. On 6 July 2020, the guidance for CEV people was updated and advised that CEV people could leave the house and be in open space with others, for exercise and other reasons. See [Measuring the data](#) for more information. [Back to table](#)
3. These data were collected after the introduction of support bubbles on 6 July 2020, which advised CEV people they could form a bubble with another household. See [Measuring the data](#) for more information. [Back to table](#)

More about coronavirus

- Find the latest on [coronavirus \(COVID-19\) in the UK](#).
- 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 . Employment plans and working outside the home for clinically extremely vulnerable people

Approximately 623,000 (28%) clinically extremely vulnerable (CEV) people were working before receiving shielding guidance. Of those who previously worked, 11% (estimated 70,000) continued working outside the home during the week of 9 July to 16 July, compared with 37% (estimated 227,000) who worked from home. Over half of CEV people (52%, estimated 325,000) who worked before lockdown had either stopped working, been furloughed or were on the Self-Employment Income Support scheme.

When CEV people who worked before lockdown were asked about their plans for working over the next four months, the responses varied. Half of the CEV people (50%, estimated 313,000) who worked prior to receiving shielding advice said they would be continuing or returning to work outside the home, compared with 21% (estimated 130,000) who said they would be continuing to work from home. An estimated 141,000 (23%) did not know what their plans were and 6% said they would not return to work (estimated 38,000).

Approximately one-third (196,000, 32%) of CEV people who normally work said they were not at all comfortable with working outside the home, compared with 24% (estimated 151,000) who were completely comfortable and 44% (estimated 276,000) who were comfortable if either they or their employer could put protective measures in place.

Most of those who were planning to return to work outside the home were comfortable doing so if they or their employer could put protective measures in place (an estimated 120,000).

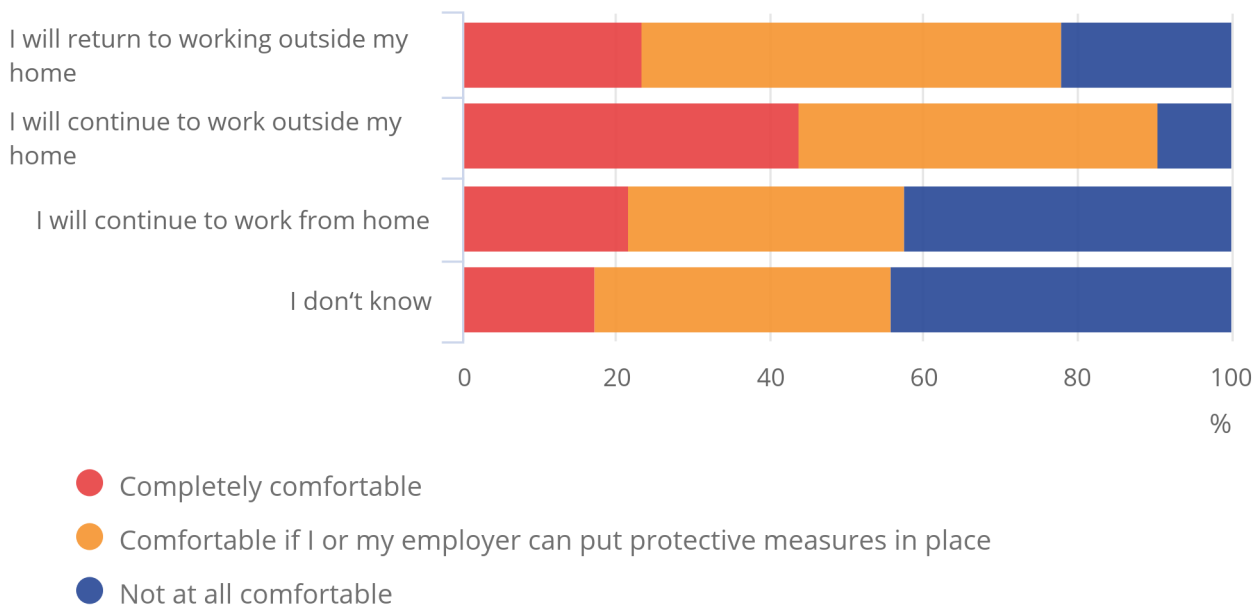
Of the CEV people not comfortable working outside the home, 5% (estimated 9,000) reported that they were already working outside the home and another 24% (estimated 48,000) plan on returning to a workplace in the next four months. Approximately one-third do not know their future work plans (32%, estimated 62,000) and an estimated 55,000 (28%) plan to continue to work from home. Around 1 in 10 (11%, an estimated 22,000) CEV people who are not at all comfortable with working outside the home said they would not be returning to work.

Figure 1: More than 40% of clinically extremely vulnerable people who plan to continue to work from home are not at all comfortable with working outside the house

Percentage of clinically extremely vulnerable people by their work plans and how comfortable they feel working outside their home, England, 9 July to 16 July 2020

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Percentage of clinically extremely vulnerable people by their work plans and how comfortable they feel working outside their home, England, 9 July to 16 July 2020



Source: Office for National Statistics - Shielding Behavioural Survey

Notes:

1. The response "I will not return to work" was not included in this chart because of low sample sizes.

4 . Clinically extremely vulnerable people living with children

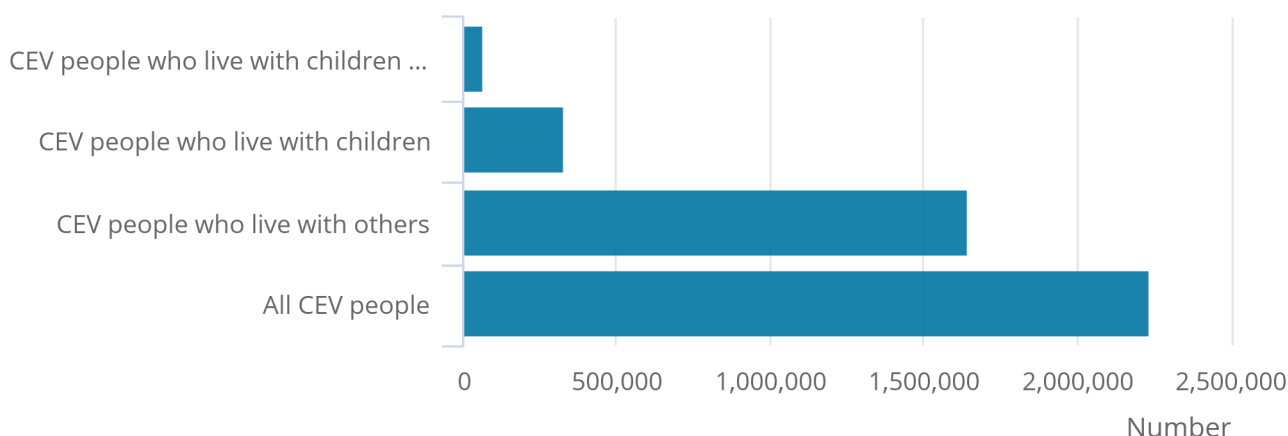
Approximately three-quarters (74%, 1,645,000) of clinically extremely vulnerable (CEV) people live with other people. An estimated 328,000 (15%) CEV people live with children aged under 16 years. Of the CEV people who live with children, 21% (an estimated 68,000) reported that living with children was having an impact on their ability to shield.

Figure 2: Most clinically extremely vulnerable people live in households with no children

Number of clinically extremely vulnerable people by living arrangement and whether living with children has impacted their ability to shield, England, 9 July to 16 July 2020

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Number of clinically extremely vulnerable people by living arrangement and whether living with children has impacted their ability to shield, England, 9 July to 16 July 2020



Source: Office for National Statistics - Shielding Behavioural Survey

5. Clinically extremely vulnerable people, visitors and support bubbles

The change in guidance on 6 July 2020 advised clinically extremely vulnerable (CEV) people that they could form a support bubble with another single adult household; see [Measuring the data](#) for more information. Before the 6 July 2020, CEV people were advised to only receive visitors for support with personal care.

When asked about visitors received in the previous seven days, 14% received visitors for support with personal care; this could have been a nurse, support worker, family member or someone else. Approximately one-third (35%) of CEV people also received at least one visitor for purposes other than personal care. The most common reasons for visitors were visits from neighbours, friends or family (80% of all who received a visitor) followed by receiving shopping (25% of all who received a visitor).

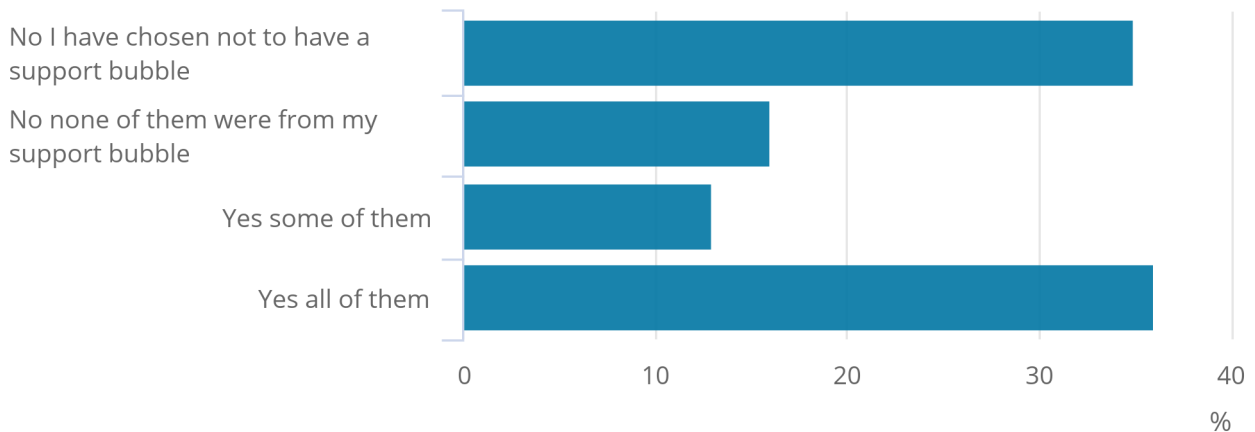
Of those who received at least one visitor unrelated to personal care in the previous seven days (estimated 783,000), 36% only had visitors who were in their support bubble. An additional 13% of CEV people who had at least one visitor in the previous seven days had some visitors who were in their support bubble but also some who were not in their support bubble. An estimated 276,000 (35%) CEV people who have received a visitor in the previous seven days, have chosen not to form a support bubble with another household.

Figure 3: Most clinically extremely vulnerable people received visitors only within their support bubble or they chose not to have a support bubble at all

Percentage of clinically extremely vulnerable people by whether visitors received were in their support bubble (where the visit was not related to their personal care) England, 9 July to 16 July 2020

Figure 3: Most clinically extremely vulnerable people received visitors only within their support bubble or they chose not to have a support bubble at all

Percentage of clinically extremely vulnerable people by whether visitors received were in their support bubble (where the visit was not related to their personal care) England, 9 July to 16 July 2020



Source: Office for National Statistics – Shielding Behavioural Survey

6 . Shielding of clinically extremely vulnerable people data

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

Dataset | Released 5 August 2020

Data on clinically extremely vulnerable (CEV) people in England during the coronavirus (COVID-19) pandemic from the Shielding Behavioural Survey. Includes information on their behaviours and well-being since receiving shielding guidance.

7 . Glossary

Clinically extremely vulnerable

Clinically extremely vulnerable (CEV) refers to members of the public who have been identified by health professionals as being CEV to severe complications of the coronavirus (COVID-19). The CEV individuals were identified based on the severity, history and treatment levels of their condition(s). 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.

Shielding

Shielding is a voluntary action that requires the individual to stay in their home or garden, except for leaving their household once a day into open space and ensuring they keep two metres apart from others not shielding alongside them, with no visitors (except from a nurse, support or care worker). The CEV person should try to access services, like food and prescription delivery services, to minimise their need to leave their home. Those identified as CEV were advised to shield until the end of July 2020. The full guidance can be viewed in [Guidance on shielding and protecting people who are CEV from COVID-19](#).

Prior to the guidance issued on 1 June 2020, CEV people were advised to stay in their home or garden at all times. The guidance on shielding was updated from 6 July 2020. Prior to this, CEV people were advised to practise social distancing with people they lived with (when they were not shielding as a household).

8 . Measuring the data

Survey information

The Shielding Behavioural Survey was compiled rapidly in response to policy questions on whether the population who had been advised to shield were actually following shielding guidance and other information. It was produced, run and analysed in a collaboration between the Department for Health and Social Care (DHSC), Department for Work and Pensions (DWP), Government Digital Service (GDS) 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. 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 (from the National Shielding Helpline).

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

Estimates for Wave 6

Data from Wave 6 are used to update the [Indicators of clinically extremely vulnerable people following shielding guidance](#). The sample size was 4,081 out of 2,237,225, and survey weighting was used to weight the sample estimates to provide estimates for the population of CEV people. The estimates were weighted by taking the following into account:

- gender
- age group
- whether the respondent was registered and receiving support, registered and not receiving support, or not registered

The sixth wave of data were collected between 9 July and 16 July 2020. All answers are self-reported. Carers may respond on behalf of those they care for where appropriate, for example, for minors and those unable to answer themselves.

Identifying the clinically extremely vulnerable

At the start of the coronavirus pandemic, some members of the public were identified by health professionals as being CEV to severe complications of COVID-19. This list has been updated continually, but the number identified as CEV has remained stable at 2.2 million people. The CEV individuals were identified based on the severity, history and treatment levels of their condition(s). 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. The following guidance was also received, stating that shielding is a voluntary action:

"Shielding is for your personal protection. It's your choice to decide whether to follow the measures we advise. For example, if you have a terminal illness, or have been given a prognosis of less than 6 months to live, or have some other special circumstances, you may decide not to undertake shielding. This will be a deeply personal decision. We advise calling your GP or specialist to discuss this." (Guidance has since been updated).

Differences between shielding and other Stay at home guidance

Shielding differs from [guidance for self-isolation](#) (self-quarantine because of displaying symptoms or someone in the household displaying symptoms) and [guidance for social distancing](#) (measures everyone should be taking to avoid social interaction with other households). Shielding requires the individual to stay in their house or garden with no visitors (except a nurse or support or care worker). More information is available in the [Glossary](#).

Changes to the shielding guidance from 1 June 2020

The data collected from 28 May to 3 June 2020 (in Table 1) were conducted over a period where government guidance for individuals shielding changed. The updated guidance for those clinically extremely vulnerable (CEV) people who were shielding was released during the data collection for Wave 3 (28 May to 3 June 2020). Despite the changes in guidance, the results remained consistent with previous data collection.

Changes to the shielding guidance from 6 July 2020

Since these data were collected, the guidance for the shielding population has been updated. CEV people who live alone have been advised they can begin to form a support bubble with one other household as well as meeting up to six people outdoors (while maintaining social distancing). These data were collected after this update in guidance and this should be taken into consideration when analysing data relating to visits (included in Table 1).

Changes to the shielding guidance from 1 August 2020

The national advice given to CEV people to shield will be paused from 1 August 2020. This advice will be subject to review, especially in the instances of local lockdowns.

9 . Strengths and limitations

The main strengths of the Shielding Behavioural Survey 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 Shielding Behavioural Survey include:

- the survey asks whether the respondent received a letter or text advising them to shield; if the respondent did not receive a letter or text, they are asked exactly the same questions as those who did despite not knowing they were advised to shield
- in the case of minors or those who are unable to answer the survey themselves, other people can answer on their behalf; this is mainly a limitation on questions relating to well-being and mental health

10 . 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 the social impacts on Great Britain](#)

Bulletin | Weekly

Indicators from the Opinions and Lifestyle Survey (OPN) to understand the impact of the coronavirus pandemic on people, households and communities in Great Britain.

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

Article | Released 11 June 2020

Indicators from the OPN on the social impact of the coronavirus pandemic on disabled people in Great Britain. This release uses two waves of survey results covering 14 May to 24 May 2020 and includes indicators broken down by impairment type.