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Dear Colleague

CONFIDENTIAL: UPDATE ON HIGHEST RISK LIST

I am very grateful for all you have done for patients on the Highest Risk List (previously known as the 'Shielding List'). As you will be aware, we indicated in the Strategic Framework update in February 2022 that we were considering whether people need to continue to be on a Highest Risk List given the strong evidence that people's risk from COVID-19 has changed as result of the vaccination programme, new treatments and ongoing guidance on precautionary measures. I shared the same message with those on the Highest Risk List in my letter of March 2022, and assured them I would let them know about any changes, and share the evidence used to make those decisions.

1. The current position of the highest risk group

With more people initially considered at highest risk getting significant protection from Covid-19 through vaccination, combined with the significant detrimental impact of ongoing isolation on people's physical and mental health, we do not expect nor want a widespread return to shielding in the future. This has been true even with the emergence of the Omicron variant and high case numbers.

As at 22 April 2022, almost 97% of those eligible on the Highest Risk List have received one dose of the vaccine, almost 96% have received two doses, and 91% have received a third dose and/or booster dose. 90% of those identified as severely immunosuppressed have received their third dose, and 38% have already received the spring booster.

Since summer 2021, I have advised everyone on the Highest Risk List to follow the same advice as the rest of the population in Scotland, unless advised otherwise by their GP or clinician.

**From the Chief Medical
Officer
Professor Sir Gregor Smith**

25th April 2022

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Addresses

For action

Chief Executives, NHS Boards
Medical Directors, NHS Boards
Primary Care Leads, NHS Boards
Directors of Nursing & Midwifery,
NHS Boards
Chief Officers of Integration
Authorities
Directors of Public Health
General Practitioners
Practice Nurses
Operational Leads
Shielding Co-ordinators
Mental Health Leads Network
Allied Health Professional Leads
Network

For information

Chairs, NHS Boards
Infectious Disease Consultants
Consultant Physicians
Chief Executive, Public Health
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We are no longer using the Highest Risk List to prioritise people for vaccination and instead we are using a number of different data sources to identify people according to JCVI criteria. Likewise, we have not used the Highest Risk List to identify people who meet the criteria for new treatments such as antivirals and monoclonal antibodies.

The situation has changed significantly since we created the Shielding List in March 2020, not least in terms of the more extensive and more accurate data Public Health Scotland can now access to identify people according to specific criteria, which was not available to us in March 2020. At that time, we used what little was known about the virus to identify groups of people we reasonably believed to be at highest risk of poor outcomes if they caught the virus. The evidence now is that many of the groups and individuals originally considered to be at higher risk do not need to be considered as such any longer. Even those with a weakened immune system are responding to the vaccine with the recommended additional doses, but we recognise that some immunosuppressed or immunocompromised people do still have a higher risk than the rest of the population.

2. Ending the Highest Risk List

We will shortly be letting people know that the HRL will end as of 31 May 2022. Instead, we have worked with Public Health Scotland to stand up a process to identify people for vaccination priority, new treatments, or additional advice, as and when needed, based on current and up-to-date data. This is likely to focus more on people who are immunosuppressed or immunocompromised. For the reasons outlined, the time is now right to end the Highest Risk List.

It's important to be clear that this decision does not mean the people who remain at highest risk will not be prioritised for vaccination, or that they will not be able to access treatments if they do catch the virus.

This announcement is planned for Wednesday 27 April. We are letting you know in advance and **in confidence** so you can consider any implications such as the need for more person-centred advice and ongoing support for people have been on the List. Some may be worried about the implications of ending the list, alongside the move from regulations to guidance.

As the list will end on 31 May 2022, I ask that you stop referring people for addition to the list **with immediate effect**. PHS will perform a final update to the list on 28 April 2022, and I will write to everyone who is on the list to advise the list is ending and provide the evidence for that decision. Anyone who is referred for addition from 28 April 2022 **will not** be added and therefore will not receive communications about the List.

3. Communicating this decision

Following the announcement on 27 April, I will write to everyone on the list to:

- tell them we are ending the list;
- outline the evidence the decision is based on;

- reassure them they will still get vaccinations and treatment they are entitled to in future;
- signpost where people can get further support including for mental health and wellbeing.

Additional communications will issue via the SMS service and be available online.

As you know, I have written directly to everyone on the Highest Risk List throughout the pandemic, and the recent PHS survey published on 30 March evaluating the Shielding Programme has shown that those letters have made a difference and people have felt supported. My final letter will therefore be user-tested to make sure it provides the right reassurance and advice, and my aim is that it will be with everyone within two weeks of this announcement.

4. The evidence

We will also publish a review paper on 27 April 2022 which gathers and explains the evidence relating to people on the Highest Risk List and their current risk following vaccination. This document will be available to help those who are on the Highest Risk List to understand their risk and the decision to end the List, and also to help discussions with their clinicians and GPs. We have sought feedback on this paper from colleagues in primary and secondary care, who have agreed this is a useful document.

Many of the findings in the paper are already covered elsewhere in this letter, but the main points are:

- The vaccination programme has been effective in providing protection even to those with a suppressed or weakened immune system;
- Many people on the List are now at no higher risk now from Covid-19 than they would be from other infections and illnesses before the pandemic;
- The number of Covid-related deaths has dropped from a high of 19% in January 2021 to 2% in December 2021 and January 2022;
- It is highly unlikely we will return to a position where we would ask anyone to shield in future.

The full paper will be available online from Wednesday 27 April 2022, at <https://www.gov.scot/isbn/9781802017311>

5. Support for mental health and wellbeing

We know from PHS surveys and our user research that many people on the Highest Risk List have been negatively impacted in terms of their mental and physical health and wellbeing and quality of life. The latest PHS survey published on 30 March 2022 found that 81% of people said they were still making decisions which were influenced by fear of Covid-19 and 36% reported they were still trying to minimise all physical contact with others. 90% said they would remain worried about being at highest risk for some time. Some people on the Highest Risk List will therefore need time and in some cases support to resume day to day interactions and activities as they adapt to a more normal way of life.

The full findings of the survey are available at [COVID-19 shielding programme \(Scotland\) impact and experience survey – part two \(publichealthscotland.scot\)](https://www.gov.scot/publications/covid-19-shielding-programme-scotland-impact-and-experience-survey-part-two/publications/covid-19-shielding-programme-scotland-impact-and-experience-survey-part-two)

The report includes recommendations about supporting the ongoing needs of people who have been on the Highest Risk List which will require a range of support across your areas of practice, as well as wider public and third sector support in order to recover, rehabilitate and reconnect; and, ensure prevention of any further exacerbation of physical and mental health impacts.

I am writing in confidence and advance of the announcement of this decision in order that you can provide immediate advice and support to people impacted, and so that we can discuss longer term support that may be needed by some people who remain more worried or cautious. We will also be liaising with local authorities and wider third sector partners including medical charities in order that they can also provide advice and support.

Colleagues from our COVID Highest Risk teams would therefore welcome an opportunity to discuss with your networks the review of evidence which informed this decision as well as the findings of the PHS survey which indicate how people have been impacted and what might help them to adapt to a more normal way of life again. They will be in touch about potential dates as soon as possible. My aim is that we can work together to help people who have been on the Highest Risk List to recover, reconnect, and benefit from the lifting of restrictions along with everyone else.

Thank you again for all you have done, and continue to do.

Yours sincerely

Gregor Smith

Professor Sir Gregor Smith
Chief Medical Officer