There are broadly three levels of vulnerability that we should consider:

**Shielding (extremely vulnerable group)**

This is the group of about 1.5 million people nationally who have been written to and advised to avoid all contact for three months. People falling into this extremely vulnerable group include:

1. Solid organ transplant recipients.
2. People with specific cancers:
   * people with cancer who are undergoing active chemotherapy
   * people with lung cancer who are undergoing radical radiotherapy
   * people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
   * people having immunotherapy or other continuing antibody treatments for cancer
   * people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
   * people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD.
4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
5. People on immunosuppression therapies sufficient to significantly increase risk of infection.
6. Women who are pregnant with significant heart disease, congenital or acquired.

These people should be known to us via the local hubs that were established on Monday and are eligible for national support as well as any local support that may be available.

**Increased vulnerability**

Nationally this group isn’t really being talked about any more because the guidance for them is no longer different for the general population. Until “lock down” began formally, guidance for vulnerable groups suggested self-isolating where possible, whereas for everyone else the recommendation was social distancing. Since lock down, effectively self-isolation now applies to everyone. However the groups that could still be categorised as being more vulnerable include:

1. Those with long term conditions such as heart disease, lung disease, diabetes, asthma and cancer.
2. People undergoing treatment for autoimmune health conditions such as HIV and AIDS, rheumatoid arthritis, multiple sclerosis and inflammatory bowel disease.
3. Pregnant women.
4. People over the age of 70.

It is reasonable to assume that these groups are still increasingly vulnerable and that extra care should be taken to maintain hygiene and physical distancing when working with them if possible – though this is for their protection, not for the protection of staff. Where staff members fall into one of these categories measures should already be in place to enable them to work safely.

**General population**

While not at any increased risk, there is still a degree of risk to the general population. However the national policy of self-isolation and social distancing that applies to everyone is mainly there to reduce the spread of the virus through the community to protect those with most or increased vulnerability. It remains the case that the vast majority of people who contract the virus will experience a relatively mild illness.