# Student Loans Company asks students to get ready to apply

News story

Students in England should prepare to apply for student finance


The Student Loans Company (SLC) is urging full-time, undergraduate students in England to get ready to apply for student finance ahead of the application service launching in early March.

So far this year, SLC has funded over 1 million students and anticipates an increase in applications for academic year 21/22. To help students to get ready to apply, SLC is asking them to register their interest by inviting them to sign up to our Apply Now mailing list.

SLC will also host its annual Student Money Week event from 1-5 March 2021, to support students with their applications. Throughout the week, students and their parents and partners will be able to take part in a series of online Q&A sessions and Facebook events. These will be hosted by SLC's team of expert customer advisors and will cover topics such as eligibility, how to provide supporting evidence for your application, and extra support available for disabled students and students who have an adult or child dependant.

In the run up to Student Money Week new and continuing students can access SLC's dedicated Funding Your Future web page which provides tips to help with the application process and all the latest student finance information, including a short film.

SLC Director of Operations, Derek Ross said: "We are anticipating a rise in application numbers this year, that's why we are encouraging new and returning students to get their applications for finance in as early as possible. This is the case even if they are not sure what course they will study or even which college or university they will attend. We hope students get ready to apply by signing up to our Apply Now mailing list and making a date with Student Money Week. By doing so, they can get on with planning for their future knowing that their student finance is taken care of."

5 student finance facts

- You can apply for Tuition Fee Loans to cover your fees and Maintenance Loans to help with living costs. You can use the student finance calculator to find out how much you could be entitled to.
- Extra support may be available if you have a disability or a child or adult dependant who relies on you financially.
- You do not start repaying your student loan until the April after you finish or leave your course and you are earning over the repayment threshold.
- What you repay is based on what you earn, not what you have borrowed.
- You can get all the latest information about student finance by following Student Finance England on Facebook and Twitter.

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# £18.5 million to tackle long COVID through research

- 4 research studies funded to better understand and address the longer-term effects of COVID on physical and mental health
- Approximately 1 in 10 people with COVID-19 continue to experience symptoms beyond 12 weeks
- Government funding for the projects approved in partnership with the National Institute for Health Research (NIHR) and UK Research and Innovation (UKRI)

People experiencing the longer-term effects of long COVID will benefit from £18.5 million to fund research projects to help better understand the causes, symptoms and treatment of the condition.

The funding will be given to 4 studies to identify the causes of long COVID and effective therapies to treat people who experience chronic symptoms of the disease.

The projects were chosen following a UK-wide call to find ambitious and comprehensive research programmes to help address the physical and mental health effects of COVID-19 in those experiencing longer-term symptoms but who do not require admittance into hospital.

Long COVID can present with clusters of symptoms that are often overlapping and/or fluctuating. A systematic review has highlighted 55 different long-term effects but common symptoms of long COVID include breathlessness, headaches, cough, fatigue and cognitive impairment or ‘brain fog’. There is also emerging evidence that some people experience organ damage.

Approximately 1 in 10 people with COVID-19 continue to experience symptoms and impaired quality of life beyond 12 weeks (‘long COVID’).

Health and Social Care Secretary, Matt Hancock said:

> I am acutely aware of the lasting and debilitating impact long COVID can have on people of all ages, irrespective of the extent of the initial symptoms.
>
> Fatigue, headaches and breathlessness can affect people for months after their COVID-19 infection regardless of whether they required hospital admission initially.
>
> In order to effectively help these individuals we need to better understand long COVID and identify therapeutics that can help recovery. This funding will kick-start 4 ambitious projects to do just that.

Amy, 27, has been experiencing ongoing breathing problems after first contracting COVID-19 3 months ago. She said:

> I expected to be fully recovered within 2 weeks, but I actually isolated for 3 weeks because I just didn’t feel comfortable going out. I was still really poorly.
>
> At my age, I didn’t expect to suffer symptoms for more than just a few days. Feeling that poorly for that long, hearing all the horror stories and things, I wondered if I would actually go back to normal.
>
> I exercise a lot and it was really scary thinking that I might not actually get back to that again. It’s quite shocking to me actually that 3 months on I’m still not really myself.

Chief Medical Officer for England and Head of the NIHR, Professor Chris Whitty said:

> Good research is absolutely pivotal in understanding, diagnosing and then treating any illness, to ease symptoms and ultimately improve lives.
>
> This research, jointly funded through the NIHR and UKRI, will increase our knowledge of how and why the virus causes some people to suffer long-term effects following a COVID-19 infection – and will be an important tool in developing more effective treatments for patients.

Health Minister, Lord Bethell said:

> The UK is at the forefront of scientific research and innovation when it comes to the treatment of COVID-19. This work is vital in helping us to build on our knowledge and improve the treatment of the longer-term impacts of the virus.
>
> This research will make the best use of available evidence to help us identify the causes, the consequences and most importantly the best treatments to help people recover from COVID-19 in the long term.

An independent panel of research experts and patients with long COVID recommended the following 4 studies for funding, at a cost of approximately £18.5 million:

- REACT long COVID (REACT-LC): led by Professor Paul Elliott, Imperial College London – £5.4 million over 3 years. The study will involve people in the community who have taken part in the REACT study of the virus that causes COVID-19. Data will be analysed to find common factors to examine why some people get long COVID and others do not. The biological studies will help us understand what causes persistent symptoms and may point to possible treatments
- Therapies for long COVID in non-hospitalised individuals: from symptoms, patient-reported outcomes and immunology to targeted therapies (The TLC Study): led by Dr Shamil Haroon and Professor Melanie Calvert, University of Birmingham – £2.3 million over 2 years. The study will identify which treatments are most likely to benefit people with particular symptoms of long COVID and test supportive treatments to improve their quality of life
- Characterisation, determinants, mechanisms and consequences of the long-term effects of COVID-19: providing the evidence base for health care services: led by Professor Nishi Chaturvedi, University College London – £9.6 million over 3 years. The study will use data from more than 60,000 people to help define long COVID and improve diagnosis. It will also explain why some people get the condition, the typical effects on a person’s health and ability to work, and the factors that affect recovery to inform the development of treatments offered to patients
- Non-hospitalised children and young people with long COVID (The CLoCk Study): Professor Sir Terence Stephenson, UCL Great Ormond Street Institute of Child Health – £1.4 million over 3 years. The study will teach us more about long COVID among children, how it can be diagnosed and how to treat it

Professor Fiona Watt, Executive Chair of the Medical Research Council, part of UKRI, said:

> There is increasing medical evidence and patient testimony showing that a significant minority of people who contract COVID suffer chronic symptoms for months after initially falling ill, irrespective of whether they were hospitalised. These 4 large-scale projects will work with affected individuals to better understand

and address these debilitating long-term impacts.

Patients with long COVID and members of the public were involved throughout the process of deciding which research proposals to fund.

The government, through the NIHR and UKRI, is also jointly funding major studies to characterise acute and longer term disease in hospitalised patients.

The Post-HOSPitalisation COVID-19 study (PHOSP-COVID) was backed by £8.4 million in funding and looks into the long-term physical and mental health implications of COVID-19 to support the development of new measures to treat NHS patients with coronavirus.

Both funders will continue to consider research proposals on long COVID.

NHS England launched new specialist long COVID NHS clinics across the country, providing assessment for adults, children and young people alike. These clinics will play an invaluable role by helping medical experts assess, diagnose and treat thousands of people suffering with the debilitating long-term health implications of this virus.

There are now 69 specialist clinics operating across the country, supported with £10 million funding, with more due to open shortly.

The National Institute for Clinical Excellence (NICE) has issued official guidance on best practice for recognising, investigating and rehabilitating patients with long COVID.

## Background information

For interviews with any of the funded researchers, please contact the NIHR press office on 020 3328 6730 or pressoffice@nihr.ac.uk.

Patients and the public were part of the expert group that determined the scope of the funding call, reviewed the proposals put forward by researchers, and sat on the committee that determined which research projects should be recommended for funding.

A video of interviews with the lead researchers and Amy, a person with long COVID, is available for use by the media. The video is available through the NIHR press office.

Footage is available on request from the NIHR press office.

An image of Monique, a person with long COVID, is available on request from pressoffice@nihr.ac.uk.

## Annex A: study summaries and researcher quotes

## 1. REACT long COVID (REACT-LC), led by Professor Paul Elliott, Imperial College London – £5.4 million over 3 years

This project aims to characterise and better understand the genetic, biological, social and environmental signatures and pathways of long COVID. It will also identify factors affecting why some people experience long-term health effects of COVID-19, while others do not.

To date, most research on long COVID has been in hospitalised patients. The researchers will survey 120,000 people in the community who have taken part in the REACT study. Over 30,000 participants from REACT who tested positive for COVID-19, plus 90,000 who tested negative, will be invited to take part. Participants will be sent a survey about their health, symptoms and experiences. Participants with long COVID will be asked to join a panel to provide regular updates; while 60 will be invited for in-depth interviews. The researchers will develop a set of patient-reported outcomes that reflect the symptoms most important to people living with long COVID in the community.

Researchers will also invite up to 8,000 people with positive tests, including at least 4,000 with long COVID, for health tests and samples to test for genetic and other biological markers. This will help researchers understand mechanisms causing persistent symptoms and may point to possible treatments.

Professor Paul Elliott, Chair in Epidemiology and Public Health Medicine at Imperial College London, said:

> Over the past 12 months, the acute impacts of COVID-19 have led to large numbers of hospitalisations and deaths, but the longer-term impact of the disease remains unclear. Growing evidence suggests that even after recovery, many patients will go on to experience symptoms that persist for months, impacting on their everyday lives.
>
> By tapping into the huge pool of participants who have already provided vital insights as part of the REACT studies, we hope to be able to learn more about the biological basis of ‘long COVID’ and why some people may be more at risk.
>
> This type of large-scale research, which has the potential to provide crucial insights and even possible treatments for long COVID, is only made possible with the help and support of members of the public.

Professor Sir Mark Caulfield, Chief Scientist at Genomics England said:

> Genomics England are delighted to be partnering the REACT study and Imperial College to understand the role of genomics and other

> biomarkers in long COVID. Our work has already revealed gene regions that affect severe COVID.
>
> Now, through this very welcome NIHR funding, we may provide new insights into how we can address the longer-term impact of this pandemic

## 2. Therapies for long COVID in non-hospitalised individuals: from symptoms, patient-reported outcomes and immunology to targeted therapies (The TLC Study), led by Dr Shamil Haroon and Professor Melanie Calvert, University of Birmingham – £2.3 million over 2 years

This project aims to identify which treatments are most likely to benefit people with particular symptoms of long COVID and test supportive treatments to improve their quality of life.

The researchers will identify around 2,000 patients with long COVID from GP records. Study participants will be invited to use a digital platform to report long COVID symptoms and quality of life.

A subgroup of around 300 patients will receive blood and other biological tests to understand the immunology of long COVID and will wear a device that will measure their heart rate, oxygen saturation, step count and sleep quality.

The researchers will review evidence for long-COVID treatments, including drugs or supportive interventions (for example, for mental health or tiredness). Working with patients, doctors and other experts, the researchers will recommend treatments that should be tested in long-COVID patients and co-produce a targeted intervention for long COVID, tailored to individual patient need.

This will be delivered remotely in the community, via the Atom5TM app, providing critical support and information to empower patients in self-managing long COVID. In addition, they will provide tailored resources to support symptom management and nurse-led support for those with the severest symptoms.

The researchers will also use the digital platform to assess whether the treatments and supportive interventions reduce symptoms, improve quality of life, and are good value for money.

Co-Principal Investigator Dr Shamil Haroon, Clinical Lecturer in Primary Care at the University of Birmingham, said:

> Individuals with long COVID frequently report experiencing diverse physical and psychological symptoms beyond 12 weeks that can be extremely debilitating.

> People living with long COVID have indicated that they feel abandoned and dismissed by healthcare providers, and receive limited or conflicting advice.
>
> Meanwhile, neither the biological or immunological mechanisms of long COVID, nor the rationale for why certain people are more susceptible to these effects, are yet clear, limiting development of therapies. It’s essential we act quickly to address these issues.

Co-Principal Investigator Professor Melanie Calvert, Professor of Outcomes Methodology and NIHR Senior Investigator at the University of Birmingham, added:

> It is clear that a large number of individuals that have had COVID-19 experience long-term effects on their health and well-being.
>
> Our study aims to reduce their symptom burden and improve quality of life. Ultimately, people want to be able to enjoy life again and spend time with their friends and family.
>
> It is clear that there is an urgent need for research to help explain the causes that drive the longer-term health effects of COVID-19 so that we can optimise patient care.
>
> Our digital trial platform in primary care will not only facilitate research exploring the underlying cause of long COVID, but also the evaluation and co-production of suitable interventions.

## 3. Characterisation, determinants, mechanisms and consequences of the long-term effects of COVID-19: providing the evidence base for health care services, led by Professor Nishi Chaturvedi, University College London – £9.6 million over 3 years

This project aims to provide an evidence base for healthcare services to define what long COVID is and improve diagnosis. It will address why some people get the condition, the typical effects on a person’s health and ability to work, and the factors which affect recovery. It will also look at how best to ensure patients are able to access the right treatment and support through health services.

The researchers will use data from more than 60,000 people drawn from a combination of national anonymised primary care electronic health records and longitudinal studies of people of all ages across the country. From these studies, people reporting long COVID and comparator groups, will be asked to wear a wristband measuring exercise ability, breathing and heart rate. Participants will also complete online questionnaires on mental health and cognitive function. They will also be invited to a clinic for non-invasive

imaging to look at potential damage to vital organs, such as the brain, lungs and heart.

Findings will be shared with bodies involved in clinical guidelines (NICE, as collaborators in this project), with government (via the Chief Scientific Advisor), with the public via social media and other outputs, and the scientific community via research publications.

Professor Nishi Chaturvedi, Professor of Clinical Epidemiology at University College London (UCL), said:

> By taking a whole-population perspective, including hard-to-reach groups, we hope to understand the enduring consequences of COVID and inform best practice for all of us.

## 4. Non-hospitalised children and young people with long COVID (The CLoCk Study), Professor Sir Terence Stephenson, UCL Great Ormond Street Institute of Child Health – £1.4 million over 3 years

This research project aims to characterise symptoms typical of long COVID in non-hospitalised children and young people. It will also assess risk factors, prevalence and how long it lasts. This research will establish a medical diagnosis and operational definition of the condition, and look at how it might be treated.

The researchers aim to enrol 6,000 children and young people in the study, in 2 equal-size cohorts – consisting of 3,000 who have had a positive COVID-19 test, and 3,000 who have not. Participants will be asked whether they still have physical or mental problems at 3, 6, 12 and 24 months afterwards infection. Comparisons will then be made between the 2 cohorts. Carers and children and young people taking part will be involved in co-production of this study, and encouraged to complete surveys.

Results will be published, used to inform NHS services and health policy – and made available to participants. The study will provide data to help doctors to diagnose long COVID, establish how common it is, risk factors, and how long it goes on for.

Professor Sir Terence Stephenson, Nuffield Professor of Child Health at the UCL Great Ormond Street Institute of Child Health and Honorary Consultant Paediatrician at University College Hospital & Great Ormond Street Hospital, said:

> We are delighted to have been awarded £1.36 million by NIHR to study long COVID in 11 to 17 year olds.
>
> It is really important in science to ‘believe what you hear, not hear what you believe’, so we plan to ask 3,000 children and young

> people to tell us about the impact of COVID infection on their health over the next 2 years. We will also ask 3,000 young people who tested negative for COVID the same questions.
>
> That will help us tease out whether ongoing problems are due to COVID infection or due to COVID lockdown, social isolation, and disruption of schools and friendships.

## Annex B: further quotes

Dr Kiren Collison, NHS England Chair of the Long Covid Taskforce said:

> Long COVID can be a debilitating condition leaving people with a range of physical and psychological symptoms, which is why the NHS takes the condition incredibly seriously and has invested £10 million to launch 69 specialised clinics across the country to offer assessment and rehabilitation for the thousands of people who continue to suffer with long-term effects of coronavirus. This is a very new disease and as we're all still learning about this condition, further research about treatment options is hugely welcomed.

Monique, 32, has long COVID and was involved in the process of deciding which research to fund. She said:

> As a relatively young, fit and healthy person I have been surprised to suffer from the debilitating effects of long COVID.
>
> I was very keen to participate in the funding process of long-COVID research and hope the work from these studies will lead to furthering understanding and treatment for this new disease.
>
> The impact of long COVID is being felt on a global scale and will influence times to come. It is crucial that more funding for research continues in this area.

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# Nearest testing site now on average under 2 miles away

NHS Test and Trace has maintained its strong start to the year, reaching more than 270,000 people in the latest reporting week with over 2.9 million people

tested.

The service continues to reach a high proportion of cases and contacts, with people able to receive a test result more quickly and conveniently. The median distance that people will have travelled for a test is now just 1.9 miles, a record for the service compared with 5.1 miles as recently as September.

Of those who took their tests in-person at either a local or regional test centre or mobile testing unit, nearly all (96.1%) received their results the following day, while the median turnaround time for home test kits was 35 hours.

NHS Test and Trace has successfully reached 86.9% of cases, and 93.6% of their contacts, making a real impact in breaking chains of transmission. Since NHS Test and Trace launched, 90.0% of close contacts for whom communication details were provided have been reached.

Between 4 February and 10 February, 90.1% (155,206) of the contacts identified were reached within 3 days of the confirmed case. The median time taken for contacts to be reached after the positive case which identified them reported symptoms was 78 hours.

The NHS COVID-19 app has now been updated with the capability to alert users in postcode district areas where there is a variant of concern. This provides additional messaging to users, such as their eligibility for surge testing, and where to find more information.

NHS Test and Trace's test site network continues to expand. With more than 850 test sites in operation, including 484 local test sites, people are travelling a shorter distance than ever before to get a test.

Health Minister Lord Bethell said:

> This week NHS Test and Trace has reached 86.9% positive cases and 93.6% contacts of those cases, leading to 270,865 people being told to isolate. Week after week these results continue to have a significant impact and, through the service's consistent performances we are seeing that our efforts are helping to halt the spread of the virus.
>
> The number of rapid tests conducted across the country has continued to increase, ensuring NHS Test and Trace can identify people who are infectious, but not showing symptoms. Around one in 3 people with COVID-19 are asymptomatic which means every positive rapid test helps us break a chain of transmission we wouldn't have otherwise identified. We must ensure the service continues to evolve in order to continue breaking these links in the chain.

Interim Executive Chair of the National Institute for Health Protection Baroness Dido Harding said:

> NHS Test and Trace has maintained a strong start to the year and is delivering consistent outputs to ensure the service continues to reach a high proportion of cases and contacts quickly and conveniently. The continued development of the service has been crucial to achieving this.
>
> I am incredibly grateful to everyone involved in NHS Test and Trace who are working non-stop to help us combat the spread of the virus.

## Testing

As of 16 February, more than 79 million tests have been processed in the UK in total since testing began, more than any other comparable European country. In total, almost 22.3 million people have now been tested at least once since NHS Test and Trace was launched – that equates to more than a third of all people in England.

In the latest reporting week, 2,400,724 rapid lateral flow device (LFD) tests were conducted, which is 18 times higher than mid-December, with 10,490,011 conducted in total since first introduced. Of the LFD tests conducted in the latest week, 7,548 LFD tests returned a positive result and 81,342 positive results have been reported since they were introduced.

The number of LFD stats has been increasing across all regions for the past 6 weeks, with most in this reporting week conducted in the South West followed by the North West.

Pillar 1 test results made available within 24 hours has increased to 97.4%, compared with last week's percentage of 96.6%. 96.7% of satellite tests were received within 3 days after the day they were taken, compared with 96.0% the previous week.

## Tracing

So far, more than 8.8 million cases and contacts have been reached and told to self-isolate by contact tracers.

Tracing performance has remained high with 86.9% of cases and 93.6% of contacts reached last week. The proportion of contacts reached within 24 hours once identified as a contact was consistent with the previous week at 97.9%.

105,764 positive cases were transferred to contact tracers between 4 and 10 February, with 91,920 reached and told to self-isolate.

In total during the week of 4 to 10 February, 270,865 people who had either tested positive or been identified as a recent close contact were reached and told to self-isolate, people who might otherwise have gone on to unknowingly spread the virus.

More than 300 local authorities have joined forces with NHS Test and Trace to

launch local tracing partnerships, combining specialist local expertise with the data and resources of NHS Test and Trace. These partnerships enable NHS Test and Trace to go further in supporting people who have tested positive for COVID-19 and tracing their recent contacts.

## Background information

The weekly statistics from the 37th week of NHS Test and Trace (England) show in the most recent reporting week (4 to 10 February):

- the proportion of contacts reached by tracing service has remained consistent at 93.6%
- 86.9% of people who tested positive and were transferred to the contact-tracing system were reached and asked to provide information about their contacts, compared with 87.3% the previous week
- 96.5% of contacts where communication details were given were reached and told to self-isolate
- 96.1% of in-person test results were received the next day after the test was taken, compared with 97.6% of tests the previous week
- 97.4% of pillar 1 test results were made available within 24 hours, compared with 96.6% the previous week
- 85.4% of in-person test results were received within 24 hours after the test was taken, compared with 86.3% the previous week
- 96.7% of satellite test results were received within 3 days after the day they were taken, compared with 96.0%% the previous week

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# Bradford murderer has sentence increased

A man who murdered a woman and buried her body has had his sentence increased following intervention from the Solicitor General, Rt Hon Michael Ellis QC MP.

Dale Tarbox, 40, had known the victim, Susan Howells, 51, for a number of years before the murder took place. Susan, who was physically disabled and used a Zimmer frame, went to stay with Tarbox and his partner in January 2019.

Following an argument, Tarbox murdered Susan at his home in Bradford on 19 February 2019. He attempted to burn her body, before hiding it in a wheelie bin in his cellar.

Tarbox made sure the property was secure and then moved with his partner to a caravan site in Doncaster. He later returned to the Bradford address with an accomplice, transported the body to Doncaster and buried it behind his caravan.

Susan Howells was declared missing in August 2019, but police found that Tarbox and his partner had been collecting her benefit money. When officers attended the caravan site they found Susan's remains in a shallow grave behind Tarbox's caravan. They also found the wheelie bin in Tarbox's caravan, which contained an incinerator and human hair.

Tarbox was sentenced to life imprisonment with a minimum term of 16 years on 10 December 2020 at Leeds Crown Court. Following a referral to the Court of Appeal by the Solicitor General, on 18 February the sentence was found to be unduly lenient and has been increased to life imprisonment with a minimum term of 18 years.

Commenting on the increase, the Solicitor General said:

> Tarbox murdered a vulnerable victim and showed no remorse for his despicable actions. No sentence can repair the damage he caused, but I hope the Court of Appeal's decision today gives some closure to the victim's family.

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# Next steps announced for management of marine non-licensable activities in Studland Bay Marine Conservation Zone

News story

Between 28 October and 15 December 2020 the Marine Management Organisation (MMO) held a call for evidence seeking views on the draft Studland Bay Marine Conservation Zone (MCZ) marine non-licensable activity assessment.

Approximately 500 responses were received through online surveys or by email, providing valuable information to inform the MMO's decisions on management to

ensure the necessary level of protection for the features of Studland Bay MCZ.

The MMO has reviewed all information received and are proposing the next steps for the management of Studland Bay MCZ:

- For mooring, powerboating, sailing, diving and snorkelling, no further restrictions will be implemented at this stage.
- For anchoring, management measures may be required to avoid negative impacts on the site. The MMO will be holding a series of stakeholder events in March 2021 to develop suitable management measures.

All stakeholders who responded to the Studland Bay MCZ call for evidence will be contacted about how they can participate in the planned engagement events. Stakeholder feedback from these events will be crucial for the MMO to develop an approach that ensures the necessary level of environmental protection while minimising impacts on people's use of the sea. If you are interested in getting involved please contact conservation@marinemanagement.org.uk to register your interest.

For more information about the MMO's work in Studland Bay MCZ, including the draft assessment, a summary of the call for evidence and frequently asked questions, please visit the dedicated pages on GOV.UK.

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