

Civil news: changes to mortgage debt in eligibility calculations



An important change to the eligibility criteria is happening with the removal of the mortgage cap as part of the means test for civil legal aid.

Recent legislation has removed the existing cap on the amount of mortgage debt that can be deducted from a property's value, so that all mortgage debt will be deducted.

This means that more individuals will pass the financial eligibility criteria for civil legal aid.

We are in the process of implementing the necessary changes made to the regulations to make sure that claimants with a mortgage over a specific value are not disadvantaged in applying for legal aid.

Legal Aid Agency (LAA) Chief Executive, Jane Harbottle said:

The LAA is working to implement these important changes as quickly as possible and I would like to acknowledge this work to support families experiencing difficult circumstances.

This change, together with specific compensation schemes being excluded from our calculations for legal aid will help to widen access to justice in civil cases of law.

Forms update

The changes to eligibility regulations have been reflected in the civil legal aid application forms.

Previous versions of the application forms will continue to be accepted until 31 March 2021.

However, the previous forms will still refer to the mortgage cap and providers must ensure that the correct regulations are applied in the calculation of an individual's means and therefore the full mortgage/secured

loan must be deducted.

Please make use of the new forms as soon as possible.

Further information

[Civil news: amendments to legal aid eligibility criteria](#)

[Civil legal aid: means testing](#)

Published 28 January 2021

Last updated 28 January 2021 [+ show all updates](#)

1. 28 January 2021

Edit to remove the section on CCMS contingency arrangements now that the change has been made to operational software.

2. 28 January 2021

First published.

[Latest findings from COVID-19 study published: January 2021](#)

- Over 167,600 volunteers tested in England between 6 and 22 of January 2021 as part of one of the most significant COVID-19 studies
- Final findings from Imperial College London and Ipsos MORI show infections remained very high throughout this period with 1 in 64 people infected
- Everyone must continue to stay at home, not have contact with others unless absolutely necessary and follow the rules to protect the NHS and save lives

The final findings from the [eighth report of REACT](#), one of the country's largest studies into COVID-19 infections in England, have been published today by Imperial College London and Ipsos MORI.

The latest REACT study provides a snapshot of the levels of infection in the general population between 6 and 22 January. The findings show infections in England have flattened but are at the highest level recorded by a REACT

study, with the indication of a decline at the end of the reporting period.

The NHS is under significant pressure in England with over 37,000 people in hospital with the virus, twice as many as the first peak in April. 4,076 people are on ventilators, more than at any time in the pandemic. Everyone must play their part by staying at home to help reduce infections, protect the NHS and save lives.

Levels of infections varied across the regions and was highest in London, with 1 in 35 people infected, and highest nationally among those aged 18 to 24.

The main findings from the eighth REACT study for the period 6 to 22 January show:

- national prevalence was 1.57%, or 157 per 10,000 people infected
- national R is estimated at 0.98 with a range of 0.92 to 1.04
- regional prevalence was highest in London at 2.83%
- East of England at 1.78%
- West Midlands at 1.66%
- South East at 1.61%
- North West at 1.38%
- North East at 1.22%
- East Midlands at 1.16%
- Yorkshire and the Humber 0.80%
- South West at 0.87%
- prevalence increased nationally in all adult age groups and was highest in 18 to 24 year olds at 2.44%. Prevalence in the over 65s is 0.93%
- large household size, living in a deprived neighbourhood, and black and Asian ethnicity were more likely to test positive compared to smaller households, less deprived neighbourhoods and other ethnicities
- healthcare and care home workers, and other key workers were more likely to test positive compared to other workers

While the levels of infections are lower in Yorkshire and the Humber and the South West compared to other regions, they are still high.

Health and Social Care Secretary Matt Hancock said:

These findings are a stark reminder of the need to remain vigilant.

Infection rates this high will continue to put a strain on our NHS and add to the significant pressures dedicated health and care staff are already facing.

We must bring infections right down so I urge everyone to play their part to help save lives. You must stay at home unless absolutely necessary, follow social distancing rules and minimise contact with others.

Professor Paul Elliott, director of the programme at Imperial, said:

The number of people infected with the virus is at the highest level that we've recorded since we began testing last May.

We're not seeing the sharp drop in infections that happened under the first lockdown and if infections aren't brought down significantly, hospitals won't be able to cope with the number of people that need critical care. We all need to stay at home wherever possible and help bring the virus under control and protect our already over-stretched health system.

While the vaccine programme continues to expand to protect as many people as possible, with over 6.8 million people vaccinated, we do not know whether being vaccinated stops someone from passing the virus on to others. It will also be some time before the impact of the vaccination programme reduces pressures on hospitals.

It is critical everyone continues to follow the rules, stays at home, reduces contact with others and maintains social distancing – remembering hands, face, space.

Kelly Beaver, Managing Director – Public Affairs at Ipsos MORI, said:

In the latest REACT snapshot across round 8 we continue to see very high levels of COVID-19 at a national level, which continues to be worrying. While we do see the suggestion of a downturn in the last few days of the study, which is encouraging, this is only tentative.

REACT continues to provide a powerful look across England at prevalence and spread of the pandemic and I thank all of the over 160,000 people who have taken part in this round for helping us provide this insight to government.

This report is the latest from the REACT study which was commissioned by the Department of Health and Social Care (DHSC) and carried out by a world-class team of scientists, clinicians and researchers at Imperial College London, Imperial College Healthcare NHS Trust and Ipsos MORI.

Over 167,000 randomly selected people over the age of 5 from across England volunteered to provide nose and throat swabs for this REACT report. These were tested for antigens indicating the presence of the virus to show whether someone is currently infected with COVID-19.

The study does not go out to the same participants in each round but selects new, randomly selected participants each time.

By randomly selecting participants, the study captures both those who display symptoms and those who do not, providing a greater insight into the levels of infection across the country. REACT does not run continuously but provides a timely two-week snapshot of prevalence in England at that specific time.

In line with government guidance those with positive test results and their household will be asked to self-isolate and referred to NHS Test and Trace for contact tracing.

The [pre-print report embargoed to 0.01 Thursday 28 January 2020 can be downloaded here](#) (Claim ID: ZBDHaZPdKkgKRtpB, claim passcode: 6KcEg43cRevfpKEn)

See [more information on the Real-time Assessment of Community Transmission \(REACT\) programme of work](#).

This study falls under pillar 4 of the COVID-19 National Testing Programme, which focuses on mass surveillance in the general population.

The report was commissioned by DHSC and carried out by a world-class team of scientists, clinicians and researchers at Imperial College London, Imperial College Healthcare NHS Trust and Ipsos MORI.

See [more information on the Real-time Assessment of Community Transmission \(REACT\) programme of work](#).

Large-scale coronavirus vaccine manufacturing begins in Scotland

- Valneva begins large-scale vaccine manufacturing at its Livingston site in West Lothian
- up to 60 million jabs due to be manufactured by the end of 2021 if the vaccine is approved
- UK government investment will support 100 new jobs at the site, a doubling of the workforce

This follows a multi-million-pound joint investment in the facility by the UK government last year as part of an agreement in principle to secure early access to Valneva's vaccine by the end of 2021. 60 million doses have already been secured for the UK, with an option to acquire a further 130 million if the vaccine is proven to be safe, effective and suitable.

This investment will now support 100 new highly-skilled jobs for scientists and technicians at the Livingston facility – doubling the workforce, putting Scotland at the forefront of the UK's fight against COVID-19, and boosting the UK's resilience in dealing with current and future pandemics by establishing a permanent vaccine manufacturing base.

Valneva's coronavirus vaccine candidate is currently in phase I/II trials and will still need to meet the necessary safety and effectiveness standards and receive regulatory approval before it is rolled out at the end of the year.

However, if it is approved, manufacturing at risk now will mean that the UK can roll the vaccine out across the country quicker.

Business Secretary Kwasi Kwarteng said:

Thanks to the UK Vaccine Taskforce, we have ordered up to 60 million jabs of Valneva's promising vaccine if it proves to be safe, effective and suitable in its clinical trials this year.

By starting manufacturing, we will have a running start at rolling these out as quickly as possible to protect the British public if it receives regulatory approval.

This facility in Scotland, backed by millions from the Government, will help us beat coronavirus and boost our resilience against future pandemics.

The new facility establishes a permanent UK capability to manufacture inactivated viral vaccines – one of the most proven, widely used types which is also used for flu, polio and rabies jabs.

If the vaccine proves successful and receives regulatory approval following a rigorous assessment of available data, the Livingston facility will have the capacity to produce up to 250 million doses annually for shipment across the UK and around the world.

Scottish Secretary, Alister Jack said:

It's incredibly exciting that a potential new COVID-19 vaccine will be manufactured right here in Scotland, at the Valneva plant in Livingston.

This big step forward is a testament to the talent and hard work of all the Valneva staff who have worked so far to get to this stage.

The UK government has invested millions into developing the Valneva vaccine, which is also supporting hundreds of highly skilled jobs in Scotland.

Chief Executive Officer of Valneva Thomas Lingelbach said:

We are extremely pleased to have achieved these 2 important milestones in such a short period of time. Our team in Scotland have done an amazing job to get manufacturing started so quickly.

I would like to thank the UK Vaccines Taskforce and National Institute for Health Research who have played vital roles in the rapid recruitment and enrolment of the volunteers for the clinical study. We believe that our vaccine, assuming successful

development, can make a major contribution in the UK and beyond.

UK Health Secretary Matt Hancock said:

We've already secured 60 million doses of the Valneva vaccine which, if approved, will be another vital tool in our fight against this virus. > The start of manufacturing in West Lothian today puts Scottish expertise right at the heart of the UK vaccine programme.

Set to deliver millions more jabs across all four nations, this is yet another fantastic example of the strength of our Union, as we work together as one United Kingdom to tackle the virus.

Interim Chair of the UK government's Vaccines Taskforce Clive Dix said:

I am thrilled that manufacturing has begun in Livingston as a result of the excellent work being done by Valneva in conjunction with the Vaccines Taskforce.

If approved this new vaccine will be a crucial part of our efforts to tackle coronavirus – not just in the UK but around the world.

Through the Vaccines Taskforce, the UK has secured early access to 367 million doses of seven of the most promising vaccines so far. To date, the UK government has invested over £230 million into manufacturing a successful vaccine.

The UK was the first country in the world to procure, authorise and then deploy both the Oxford/AstraZeneca and Pfizer/BioNTech vaccines.

Production of the Oxford University/AstraZeneca vaccine started last autumn where the bulk of the vaccine for the UK is being made in Oxfordshire and Staffordshire, with filling into vials taking place in North Wales.

In total, more than 7.1 million people across the UK have now had a least one dose of the vaccine.

[First Virtual Justice Network to be set up for Honiara Courts](#)

New ICT equipment will enable participating agencies to use resourcing more

efficiently, helping to reduce growing caseloads and deliver law and justice services more broadly to people across the country. In the event that Honiara is locked down due to a COVID-19 outbreak, the digital network would be even more important, allowing agencies to continue their work without disruption.

The establishment of the country's first virtual justice network is being jointly funded by the Australian and British Governments, following a joint request from the Ministry of Justice and Legal Affairs (MJLA) and the Ministry of Police, National Security and Correctional Services (MPNSCS).

Welcoming the initiative, MJLA Permanent Secretary Dr Paul Mae said the primary aim of the virtual justice network was to put in place the infrastructure that would allow the courts and justice agencies to continue to function during a lockdown in Honiara.

He added:

Faced with preparing for the COVID-19 pandemic, there was a consensus in the sector that the best and fastest solution would be to set up equip each agency to be able to take part in court hearings remotely.

Given the constraints on the government's finances at this time, it is the positive response of the Governments of Australia and the United Kingdom that has made this possible.

The equipment being provided including computers, large screens, cameras, microphones, and speakers, was formally handed over to the agencies at the Solomon Islands Government Information Communication Technology Services on Thursday 28 January 2021.

SIG ICT Services will be responsible for installing the equipment in the participating agencies over the coming weeks. This includes the RSIPF Rove Watch house, the Correctional Services, the Office of the Director of Public Prosecutions, and Police Prosecutions Department, as well as the Public Solicitor's Office and the Attorney General's Chambers.

Last year, the High Court was able to host the final session of the 2020 Court of Appeal remotely after Australia's Justice Program provided the equipment necessary to establish the Court's virtual capability.

Speaking at the Opening of the Solomon Islands 2021 Legal Year last week, the Chief Justice, Sir Albert Palmer, said this had greatly assisted in the court in the efficient discharge of judicial and legal duties, including being able to convene meetings, workshops, conferences and court hearings on a digital platform.

He said:

The assistance has been timely and substantive in allowing much

needed court services, trainings and scheduled activities to proceed in a very restricted environment as a result of the adverse effects of the Covid-19 pandemic.

Australia recognised the importance of keeping the courts and justice agencies functioning despite the restrictions caused by COVID-19, the Australian High Commission Dr Lachlan Strahan said.

He further added:

As Australia has found, this virus is unpredictable, so we were happy to support the justice sector's forward thinking to support the rule of law and facilitate Solomon Islanders access to justice in the face of the pandemic.

The challenges facing justice systems in so many countries – especially growing caseloads and resource constraints – mean that we have to find more efficient ways of doing things. Being able to operate virtually is one part of addressing these challenges even in normal times. It has become even more important in these COVID times.

British High Commissioner to the Solomon Islands and Nauru, Dr. Brian Jones said the UK recognises that responding to the pandemic requires a global approach, including supporting countries to deliver essential services and keep vital institutions such as the courts open.

Dr Brian said:

This pandemic is not just a medical crisis, but its dire impact continues to extend to all areas of life. The UK is therefore very pleased to be able to support the Solomon Islands Justice Sector to establish the capacity to operate remotely at this time.

[Minx and Vision report published](#)

News story

Fatal collision between 2 motor yachts in Île Sainte-Marguerite, near Cannes, France.



Our report into a collision between the motor yacht Vision and the anchored motor yacht Minx resulting in the loss of 1 life on 25 May 2019, is now published.

The report contains details of what happened, actions taken and recommendations made: [read more](#).

Published 28 January 2021