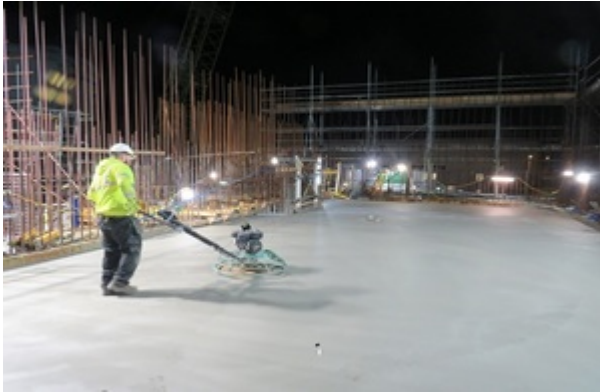


Significant milestone reached with concrete 'mega pour'

News story

Work on Dounreay's newest radioactive waste store went up a storey last week, with the completion of a 'mega' concrete pour.



The first floor slab in the new radioactive waste store is now complete

The construction project was one of the first to re-start work on 22 June, following the easing of lock down restrictions. The 60-strong team has had to learn COVID-19 compliant ways of working, sometimes in close proximity with each other, to keep themselves and their colleagues safe on site. Since then they have poured 1,500 tonnes of concrete and the building walls have now risen to above the first floor level.

Last week the team embarked on the biggest concrete pour of the project so far, working for 9 hours to lay the floor slab in the crane maintenance bay (CMB) on the first floor of the building, with 27 lorries delivering 425 tonnes of concrete. An overnight shift completed the job in the early hours of the morning.

Dounreay Project Manager Dave Busby said that casting the CMB floor slab was a significant construction milestone as it will allow the team to install the 170 tonne CMB shield door early next year.

He added:

The team has overcome considerable obstacles this year, being COVID-19 compliant as they continue to work through the pandemic.

Dounreay awarded the contract to construct the new intermediate level waste store to GRAHAM Construction Ltd. Work started in 2018 and is expected to take around 3 years to complete. It will hold drums of waste in safe long

term storage in accordance with Scottish Government policy.

Dounreay is Scotland's largest nuclear decommissioning project and is widely recognised as one of Europe's most complex nuclear closure programmes. The work is being delivered by DSRL, a company owned by Cavendish Dounreay Partnership, on behalf of the Nuclear Decommissioning Authority.

Published 30 December 2020

November 2020 Price Paid Data



Image credit: Alexey Federenko/Shutterstock.com

This release contains updates to the releases we've made this year, as well as introducing the first release of data for November 2020.

As we will be adding to the November data in future releases, we would not recommend using it in isolation as an indication of market or HM Land Registry activity. However, when the full dataset is viewed alongside the data we've previously published, it adds to the overall picture of market activity.

There is a time difference between the sale of a property and its registration at HM Land Registry.

In the dataset you can find the date of sale for each property, its full address and sale price, its category (residential or commercial) and type (detached, semi-detached, terraced, flat or maisonette and other), whether or not it is new build and whether it is freehold or leasehold.

Published 30 December 2020

Last updated 30 December 2020 [+ show all updates](#)

1. 30 December 2020

First published.

Statement from the UK Chief Medical Officers on the prioritisation of first doses of COVID-19 vaccines

Press release

Joint clinical advice from the 4 UK Chief Medical Officers on the prioritisation of first doses of the coronavirus (COVID-19) vaccines.



It is excellent news that the Medicines and Healthcare products Regulatory Agency (MHRA) has today authorised the AstraZeneca (Oxford) vaccine for deployment across the UK.

The MHRA authorisation includes conditions that the AstraZeneca (Oxford) vaccine should be administered in 2 doses, with the second dose given between 4 and 12 weeks after the first. The MHRA has also clarified that for the Pfizer/BioNTech vaccine, the interval between doses must be at least 3 weeks. For both vaccines, data provided to MHRA demonstrate that while efficacy is optimised when a second dose is administered, both offer considerable protection after a single dose, at least in the short term. For both vaccines the second dose completes the course and is likely to be important for longer term protection.

The Joint Committee on Vaccination and Immunisation (JCVI) has subsequently recommended that as many people on the JCVI priority list as possible should sequentially be offered a first vaccine dose as the initial priority. They have advised that the second dose of the Pfizer/BioNTech vaccine may be given between 3 to 12 weeks following the first dose, and that the second dose of the AstraZeneca (Oxford) vaccine may be given between 4 to 12 weeks following the first dose. The clinical risk priority order for deployment of the vaccines remains unchanged and applies to both vaccines. Both are very effective vaccines.

The 4 UK Chief Medical Officers agree with the JCVI that at this stage of the

pandemic [prioritising the first doses of vaccine for as many people as possible on the priority list](#) will protect the greatest number of at risk people overall in the shortest possible time and will have the greatest impact on reducing mortality, severe disease and hospitalisations and in protecting the NHS and equivalent health services. Operationally this will mean that second doses of both vaccines will be administered towards the end of the recommended vaccine dosing schedule of 12 weeks. This will maximise the number of people getting vaccine and therefore receiving protection in the next 12 weeks.

Based on JCVI's expert advice, it is our joint clinical advice that delivery plans should prioritise delivering first vaccine doses to as many people on the JCVI Phase 1 priority list in the shortest possible timeframe. This will allow the administration of second doses to be completed over the longer timeframes in line with conditions set out by the independent regulator, the MHRA and advice from the JCVI. This will maximise the impact of the vaccine programme in its primary aims of reducing mortality and hospitalisations and protecting the NHS and equivalent health services.

The JCVI has also amended its previous highly precautionary advice on COVID-19 vaccines and pregnancy or breastfeeding. Vaccination with either vaccine in pregnancy should be considered where the risk of exposure SARS-CoV2 infection is high and cannot be avoided, or where the woman has underlying conditions that place her at very high risk of serious complications of COVID-19, and the risks and benefits of vaccination should be discussed. Those who are trying to become pregnant do not need to avoid pregnancy after vaccination, and breastfeeding women may be offered vaccination with either vaccine following consideration of the woman's clinical need for immunisation against COVID-19. The UK Chief Medical Officers agree with this advice.

Published 30 December 2020

[United Kingdom and Cameroon secure Economic Partnership Agreement](#)

Press release

The deal allows businesses to trade freely as they do now, without any additional barriers or tariffs



The United Kingdom and Cameroon have today secured an Economic Partnership Agreement (EPA) that ensures mutual continuity of trade.

An agreement has been reached to roll over current EU-Cameroon trading arrangements from 1 January 2021.

The deal allows businesses to trade freely as they do now, without any additional barriers or tariffs, and provides a foundation to extend our trading relationship in future.

Total UK trade with Cameroon amounted to £200 million in 2019.

Top goods imports to the UK from Cameroon in 2019 were in fruit and nuts, mostly bananas (£27 million) and wood and wood products (£25 million). The UK market accounts for 12% of total exports of bananas from Cameroon and this agreement will maintain tariff-free market access to the UK. It also guarantees continued market access for UK exporters, who sold £51m in goods to Cameroon in 2019.

Minister for International Trade Ranil Jayawardena said:

The United Kingdom is committed to supporting developing countries by encouraging growth through trade. The preferential terms for their key exports, such as bananas, will support jobs and economic development in Cameroon, and make sure British consumers get the products they want.

Notes to Editors

Published 30 December 2020

Letter to the health and care sector about the UK–EU Trade and Co-operation Agreement

This letter is written by Health Minister Edward Argar MP, on behalf of the Department of Health and Social Care.

It tells industry and the health and social care sector what the UK–EU Trade and Co-operation Agreement means for health and social care. It reinforces that this does not remove any of the requirements to act now to prepare for new customs and border arrangements when the UK leaves the single market and customs union.