ADULT SOCIAL CARE COVID-19 VACCINE Q&A

Date: 15/01/2021

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Priority groups for vaccination

How are social care workers and older care residents being prioritised for the vaccines?

The Joint Committee on Vaccination and Immunisation (JCVI), which has advised on the roll out of the COVID-19 vaccination has set out 9 priority groups. Priority 1 comprises 'residents in a care home for older adults and their carers'. Priority Group 2 includes people over 80 years of age and frontline health and social care workers.

Which 'frontline social care workers' are included in priority group 2 to receive the COVID vaccine?

Priority group 2 covers:

All frontline social care workers directly working with people clinically vulnerable to COVID-19 who need care and support irrespective of where they work. This includes social care workers providing care in people's own homes, day centres, care homes for working age adults or supported housing; whether they care for clinically vulnerable adults or children; or who they are employed by, whether private companies, charities, local authorities or the NHS. It also includes ancillary workers employed in a social care setting including kitchen staff, housekeeping or domestic workers, drivers, and transport managers.

Local authorities will be responsible for working with providers of frontline social care services to identify eligible care workers, including those employed as personal assistants to people clinically vulnerable to COVID-19.

The official definition is in the <u>Green Book</u> (page 11), which includes a non-comprehensive list.

When will the different groups receive their vaccines? Will vaccine delivery to those in different priority cohorts be happening in parallel?

We are working hard to vaccinate people as quickly and safely as possible.

The national vaccination programme is working to offer a first vaccination to all residents and staff in care homes for older people by the 24th January 2021. All eligible frontline social care workers, including those who work in community-based services, should have been offered their first vaccination appointment by 15th February. They will be contacted when it's their turn to get the vaccine, and will receive a letter about how they should access their vaccination.

The NHS Covid Vaccination Programme is following JCVI guidance on priority groups, however, in order to deploy the vaccines as quickly and as efficiently as possible, there may be overlap between the groups.

The UK Vaccine Delivery

What about agency workers and private hospitals?

All frontline health and care staff directly working with people clinically vulnerable to Covid-19 will be eligible for vaccination within priority groups 1 and 2, regardless of their employer (see above).

Are unpaid carers included in priority group 2?

The Joint Committee on Vaccination and Immunisation (JCVI) has confirmed that unpaid carers are included in priority group 6 but, of course, many carers will be in earlier priority groups.

Guidance to support unpaid carers to access vaccination is being developed with stakeholders and will be published in early February.

How will Personal Assistants be identified and supported to access the vaccine?

Local authorities and employers will work together to identify frontline social care workers that are eligible to receive the vaccine, including directly employed personal assistants.

<u>COVID Vaccination – care homes for older people residents and</u> <u>staff</u>

When and how will <u>care home residents</u> in priority group 1 receive a vaccine?

The national vaccination programme is working to offer a first vaccination to all residents and staff in care homes for older people by the 24th January 2021.

Primary Care Networks are organising for the vaccines to be delivered directly to care homes, and given on site to resident by teams of GPs, practice nurses, community pharmacists, and other trained vaccinators. They will also provide vaccination to care home staff on site where this is possible.

We are working hard to vaccinate all care home residents and workers as quickly and safely as possible.

When and how will <u>older adult care home workers</u> in priority group 1 receive the vaccines?

Older persons care home workers are the highest priority for vaccination. Care home managers should be proactive in ensuring that all the necessary preparations are made to ensure that all staff have been offered their first vaccination appointment by the 24th January 2021.

Currently vaccinations for care home workers are being offered and arranged directly with employers at a local level. Primary Care Networks are organising for the vaccines to be delivered directly to care homes, and given on site to resident by teams of GPs, practice nurses, community pharmacists, and other trained vaccinators. They will also provide vaccination to care home staff on site where this is possible. Vaccinations will also continue to be available for care home staff in hospital hubs and local vaccination services run by GPs and their teams.

Care home workers will be informed as to whether they will receive their vaccination in the care home where they work or in a nearby hospital or community setting, such as their local GP, pharmacy or vaccination centre. Where possible their second vaccination will take place at the same location as their first.

Will care home workers receive the vaccine at the same time as residents?

In some circumstances both care home workers and residents will be vaccinated at the same time, however this will depend on local circumstances and recognising that not all care home workers will be present when residents are getting their vaccination. Where it is not possible or appropriate for care home workers to receive their vaccination in the care home, their employer should make arrangements for them to receive a vaccination at another appropriate and accessible vaccination service.

Will care homes receive both vaccines?

Yes. Care home residents and staff might be vaccinated with either the BioNTech/Pfizer or Oxford/AstraZeneca vaccine, but their second dose will always be with the same vaccine as their first dose.

What space do care homes need to provide for vaccinators to administer the vaccine in care homes?

To ensure vaccines can be can delivered safely care homes should identify suitable space and set up for all activities of the vaccination process, including:

- Enabling privacy for clinical assessment, seeking consent, and managing circumstances where people lack mental capacity.
- Preparation of vaccines close to where residents will be vaccinated to minimise risk of deterioration when transported following reconstitution/drawn up.
- Supporting patient flow around the care home to enable social distancing for residents and minimising delay between vaccinations.
- Agreed arrangements for 15 minutes post-vaccination observation where required for a specific vaccine.

The team administering the vaccine will have a range of measures in place to keep staff and residents safe from COVID-19. They will be wearing the necessary protective equipment and there will be regular cleaning and disinfecting in between vaccinations.

Who is going to be administering these vaccines in older adult care homes?

Primary Care Networks will be organising for teams of local GPs, community pharmacists and trained vaccinators to take the vaccines to care homes and administer it to residents and staff.

They will either be existing NHS staff or those recruited by the NHS specifically for the programme, including those who signed up to the NHS Bring Back scheme. There are a number of roles within the vaccination programme and these will require different levels of qualifications and experience.

Legislation allows a wider group of people to administer vaccines, including more health care professionals as well as others who have passed a programme of training developed by PHE and HEE. New vaccinators will be assessed in person and closely supervised to ensure their and patients' safety.

Is the plan for nursing homes to administer vaccinations themselves?

Covid-19 vaccinations will be carried out by the appointed NHS services. General practice nurses are key to the delivery of the Covid-19 vaccine and this could be extended to include nursing staff in care homes who have the appropriate training and are working under the supervision of the primary care led vaccination team

Should older adult care homes stagger their staff getting the vaccine should they experience side effects?

Like all medicines, vaccines can cause side effects. Most of these are mild and short-term, and not everyone gets them. These symptoms following vaccination normally last less than a week.

In preparation, care home managers should consider the Covid-secure logistics of releasing staff to receive their vaccine, while maintaining staffing levels within the home.

If staff are vaccinated, will this mean there is no requirement to restrict staff movement between different care settings?

Until we are confident that the virus is under control, it is vital that care homes continue to adopt practices which limit infections, including restricting staff movement, testing and the use of PPE.

The latest information for healthcare staff involved in delivering the vaccination programme can be found <u>here</u>.

What should older adult care homes do if they have an outbreak of Covid-19 at the same time as the vaccinators are due to attend?

The Covid-19 vaccine should be offered to older adults in care homes and their carers, with the aim of achieving high uptake as rapidly as possible. This includes when other residents have been diagnosed as having Covid-19 infection. A number of factors will need to be considered before a vaccination team attends a care home.

Guidance (published 31 December 2020) on vaccination in care homes that have cases and outbreaks, can be found <u>here</u>.

Will vaccinators need to come in to care homes multiple times to deliver the vaccine?

We recognise the need to minimise the number of unnecessary visits to care homes to mitigate potential risk to residents. A four-visit schedule is expected to be required to ensure as many care home residents and staff can be vaccinated:

• Dose 1 - all (or most) residents and staff on site

- Second visit 1 week later to capture staff or residents who were unavailable on the day
- Dose 2 scheduled for the period of time specified by the vaccine manufacturer
- Fourth visit to capture outstanding doses one week later.

<u>COVID Vaccination – community-based social care workers in</u> priority group 2

How and when will eligible social care workers in priority group 2 receive their vaccine?

All community-based social care workers in priority group 2 are now being supported to access their first appointment for a Covid-19 vaccination. This includes home care workers and those working in day centres and supported living, who have close personal contact with those who are clinically at risk from COVID19

Vaccinations have already started in some areas and we expect the number to increase significantly over the next month. All eligible social care workers should have been offered their first vaccination appointment by 15th February.

Currently vaccinations for this group are being offered and arranged at a local level to best meet local need. They will either take place at a hospital hub or with their GP practice, a community pharmacy, or a vaccination centre. All eligible workers will be contacted when it's their turn to get the vaccine, and will receive a letter about how they should access their vaccination.

Local authorities will be working with local employers and local NHS vaccination teams to make sure vaccinations are delivered as efficiently and effectively as possible to meet demand.

How will older people receiving care in their own homes receive their vaccine?

There are some people living in the community who usually receive care at home and are generally classed as housebound.

GP-led teams will identify those people who are housebound based on their knowledge of the person. Some of these people may be able to attend a designated local vaccination site, with assistance and discussion to be held with the family and/or carer to facilitate this process.

For those people who are completely housebound and unable to travel to a vaccination site, arrangements will be made for them to receive their vaccination at home by a team of trained vaccinators.

Will home care workers working with clients who are clinically vulnerable to Covid-19 receive the vaccine at the same time as the people they care for at home?

Home care providers will be required to work with eligible staff members within priority group 2, to support them to access a vaccination either at a hospital hub or with their GP practice, a community pharmacy, or a vaccination centre at the earliest opportunity.

People receiving home care will be supported to receive their vaccination in line with the guidance from the JCVI on prioritisation.

How can care providers book appointments for staff included in priority group 2? Will there be a central booking system?

Vaccinations for community-based social care workers in priority group 2 will be either booked by employers on behalf of their staff, or by individuals directly. All eligible workers will receive a letter about how they should access their vaccination. This will either be at a hospital hub or with their GP practice, a community pharmacy, or a vaccination centre

Where can I find more information on the different vaccination sites?

A full list of the vaccination sites can be found here: <u>https://www.england.nhs.uk/coronavirus/publication/vaccination-sites/</u>

Preparing for the Covid vaccines

What can be done now by all care providers to prepare for the vaccine?

It is important that all care providers work proactively with their local authority to ensure that staff eligible to receive the vaccine are identified and supported, taking into consideration equality of access and health inequalities.

What care providers need to do to prepare:

- 1. Compile staff lists, including basic details (name, gender, date of birth, NHS number, GP details) for each staff member;
- 2. Provide each staff member with a letter confirming their eligibility and employment in the care sector, and information on vaccination.
- 3. Consider arrangements for securing staff vaccinations either at the home where they work, through block booking at a local hospital hub, or by supporting individuals to book a vaccination themselves in their community.
- 4. Keep a record of vaccinations for residents, clients and staff and report via the Capacity Tracker (as you do with flu vaccination);
- 5. Consider the logistics of releasing staff to receive their vaccine, while maintaining staffing levels and safe delivery of services.
- 6. Take steps now to ensure that staff understand need for obtaining consent, so that they in turn can help residents and families to complete the necessary forms to receive their vaccine.

Everyone who receives a vaccine will be required to have completed a consent form. A standardised consent form is available to download from the <u>Health Publications</u> website.

What should social care workers in priority groups 1 and 2 do now to prepare for getting the vaccine?

All social care workers in priority groups 1 and 2 are now being invited to receive the Covid-19 vaccine, including care home workers, home care workers and those working in day centres and supported living. To prepare for getting their vaccine, individuals should:

- 1. Speak with their employer about booking their Covid-19 vaccination, either through a hospital hub, or with their GP practice, a community pharmacy, or a vaccination centre. Be ready to provide their NHS number to book their vaccination.
- 2. Ask their employer to provide them with a letter to prove they are eligible to receive a Covid vaccine. They will need to take this to their appointment.
- 3. Complete a consent form to say that they would like to have their Covid-19 vaccine. They will need to take this to their appointment.
- 4. Read the <u>Covid vaccination leaflet</u> so they know what to expect when being vaccinated.
- 5. Ask their employer to keep a record of their vaccination.

How will I prove that I am a social care worker when I go to get my vaccine?

All frontline care staff in cohort 2 should receive a letter of eligibility from their employer or the local authority in which they work. Staff will need to take a physical copy of this with their consent form, and a form of photo ID with them to their appointment.

Should I get both doses of the Covid vaccine at the same place?

Every effort should be made to have both doses in the same place as this will enable appointments to be arranged more easily and will minimise the risk of people missing their second dose.

Will you pay care workers' costs for getting to vaccination centres?

At the moment vaccinations for social care workers are being offered and arranged directly with employers at a local level, to make it as easy as possible for staff to receive the vaccine and minimise the need for extensive travel.

The Adult Social Care Infection Control Fund states however that all providers should ensure that staff who need to attend work or another location for the purposes of being vaccinated or tested for Covid are paid their usual wages to do so, and any costs associated with reaching a vaccination or testing facility.

What information and resources will care providers have to distribute to staff and residents about the vaccination process?

The Department for Health and Social Care, NHS England and Public Health England have developed a suite of resources about the Covid vaccines, including information for patients and social care workers receiving the vaccine.

This information is available to download here.

While managers should encourage all residents and staff to take up the vaccine using these resources, it is not mandatory for anyone. We would expect all care providers to be open and honest in response to queries on this subject.

What should I do if I, or any of my staff or residents, experience any side effects from the vaccine?

Like all medicines, vaccines can cause side effects. Most of these are mild and short-term, and not everyone gets them. These symptoms following vaccination normally last less than a week. If your symptoms seem to get worse or if you are concerned, call NHS 111.

Even if a person does have symptoms after the first dose, they should still have the second dose.

Will social care workers be given proof of having the vaccine to show an employer for example?

We are asking care providers to keep staff records of vaccinations and report this back through the Capacity Tracker – as they do for flu vaccinations.

When people are vaccinated, they will receive a vaccine record card that notes the date of their vaccination, their appointment for their second dose where that can be arranged at the same time as the first dose, and details of the vaccine type and batch.

This vaccine record card is similar to those given for other NHS vaccinations as a note of when they received their vaccine. Staff can share this with their employer if they would like to, to show they have had the vaccine.

It is not intended to be used for any other purpose, or as an immunity certificate.

All vaccinations are recorded on the individual's record with their GP.

Are there any resources for adults with a learning disability and getting the Covid vaccine?

Information and resources will be made available to order and download from the <u>Health</u> <u>Publications website</u> in Braille, BSL video, Large print, simple text, and Easy read versions as well as under the relevant publication on <u>GOV.uk</u>.

Once residents/staff have had two doses of a vaccine, do they still need to be tested regularly?

Yes. Testing will continue as normal until further notice.

Consent for the vaccine

Will you make vaccination compulsory for all social care workers?

No, the Covid vaccine will not be compulsory. The UK operates a system of informed consent for vaccinations. It is, however, strongly recommended that all frontline social care workers who can receive a vaccine choose to take it in order to help to protect themselves from becoming seriously ill from Covid.

What should we do if a care worker refuses to have the vaccine?

Vaccines are the way out of this pandemic. They save millions of lives worldwide and are safer now than ever before. Any vaccine must first go through a rigorous testing and development process and be shown to meet strict standards of safety, quality and effectiveness, before it can be given to the public.

It is strongly recommended that all frontline social care workers who can receive a vaccine choose to take it. Getting vaccinated will help protect themselves from becoming seriously ill from Covid, so they can continue to be there for their family, friends and the people they care for.

However, the Covid-19 vaccine will not be compulsory. The UK operates a system of informed consent for vaccinations.

With or without a vaccine, we all have a vital role to play in protecting our own health and likewise the health of those around us. All staff will still need to follow the guidance, including wearing the correct PPE and taking part in any testing programmes.

To continue to protect themselves, the people they care for, their family, friends and colleagues, staff should follow the general advice at work, at home and when they are out and about:

- practise social distancing
- wear a face mask
- wash their hands carefully and frequently

www.gov.uk/coronavirus

How will consent be gained for the vaccine to be administered to people with reduced capacity to make independent decisions?

Everyone who receives a vaccine will be required to have completed a consent form.

A standardised consent form is available to download from the <u>Health Publications</u> website.

Some people who will be offered the vaccine may lack mental capacity to make decisions about vaccination. This will include some (but not all) people with dementia, learning disabled and autistic people, people with mental health difficulties and people with acquired brain injury. These people, if they are aged 16 or over, are protected by the empowering, decision-making framework set out under the Mental Capacity Act 2005.

These legal requirements will be familiar to everyone involved in the care and treatment of these people, as they will be used to considering them for other, similar decisions, including a decision to test a person for Covid, or administer the flu vaccine to help protect them from illness over the winter. The principles of best interest decision-making under the MCA are the same for the Covid vaccination.

Health care professionals offering the vaccine to someone who may lack the mental capacity to consent should take all practicable steps to support the person to make the decision for themselves.

Where it has been established that the person lacks capacity to consent, a best interests decision should be taken in line with the checklist in Section 4 of the MCA. This means that the decision-maker must consider all the relevant circumstances, including the person's wishes, beliefs and values, the views of their family where appropriate, and what the person would have wanted if they had the capacity to make the decision themselves.

The decision-maker should make a record of the decision and how they arrived at it. Best interests decisions much always be made on an individual basis.

All social care workers should plan in advance to ensure that the health care professional administering the vaccine has the information they need to make an appropriate best interests decision about consent, at the right time.

Where appropriate, the person's advocate or those with power of attorney for Health and Welfare should be consulted. If there is a deputy or attorney with relevant authority, then the heath care professional can only give the vaccination if the deputy or attorney has first given their consent.

If best interests meetings are required, would they need to be done individually or in a group process?

Best interests decisions must always be made on an individual basis. A best interests decision should be taken in line with best interest checklist in section 4 of the Mental Capacity Act 2005. This means that the decision-maker must consider all the relevant circumstances, including the person's wishes, beliefs and values, the views of their family where appropriate and what the person would have wanted if they had the capacity to make the decision themselves.

As 2 doses are needed will you need to obtain consent twice?

No. The consent form is for both doses.

About the Covid vaccines

Will I have to pay to get a vaccine?

No. The vaccines will be available across the UK, free at the point of delivery, according to need, not ability to pay.

What and how many vaccines will be available?

The UK has secured access to seven different possible vaccines, across four different vaccine types, reflecting the government's strategy to ensure the UK has a supply of vaccines should they prove safe and effective in clinical trials. These are at separate stages of development.

We have secured early access to over 367 million vaccines doses through agreements with several separate vaccine developers at various stages of trials, including:

- 100 million doses of University of Oxford/AstraZeneca vaccine
- 40 million doses of BioNTech/Pfizer vaccine
- 17 million doses of Moderna vaccine
- 60 million doses of Novavax vaccine
- 60 million doses of Valneva vaccine
- 60 million doses of GSK/Sanofi Pasteur vaccine
- 30 million doses of Janssen vaccine

Which vaccines have now been approved by the MHRA?

Following extensive safety trials and authorisation by the independent regulator, the MHRA, three effective COVID-19 vaccines are now available in the UK for free. These are the

BioNTech/Pfizer vaccine, the University of Oxford/AstraZeneca vaccine, and the Moderna vaccine.

Moderna are currently scaling up their European supply chain, which means these doses would become available in Spring 2021 in the UK at the earliest.

Do I need my NHS number in order to receive the vaccine?

The vaccination team will need your NHS number to ensure that the right information is in your clinical record, which is important for clinical safety reasons. Most social care workers will have their NHS number, as this will have been provided as part of routine testing. If you do not know your NHS number, you may need to provide your name, date of birth and address, to enable your NHS number to be traced.

If you are not registered with a GP and do not have an NHS number, you will still be able to receive a vaccination.

Are there any side effects to having the vaccines?

Like all medicines, vaccines can cause side effects. Most of these are mild and short-term, and not everyone gets them. Even if you do have symptoms after the first dose, you still need to have the second dose.

Very common side effects include:

- having a painful, heavy feeling and tenderness in the arm where you had your injection. This tends to be worst around 1-2 days after the vaccine
- feeling tired
- headache
- general aches, or mild flu like symptoms

These symptoms following vaccination normally last less than a week. If your symptoms seem to get worse or if you are concerned, call NHS 111.

Is the new strain of COVID-19 resistant to the vaccine?

There is currently no evidence to suggest that the Pfizer/BioNTech or Oxford/AstraZeneca vaccine would not protect people against the new strain.

Further laboratory work is currently being undertaken as a priority to understand this.

How many doses of the vaccines will be required and when?

Following extensive safety trials and authorisation by the independent regulator, the MHRA, two effective Covid vaccines are now available in the UK for free and a third, Moderna, has also been authorised and will be available soon.

For both the Pfizer/BioNTech and the Oxford University/AstraZeneca vaccines, you are required to have two doses, up to 12 weeks apart.

Everyone will receive the second dose of their Covid vaccine within 12 weeks of their first. The second dose completes the course and is important for longer term protection.

Why have you changed the dose interval to 12 weeks?

- Throughout this global pandemic we have always been guided by the latest scientific advice. Having studied evidence on both the Pfizer/BioNTech and Oxford/AstraZeneca vaccines the JCVI has advised that we should prioritise giving as many people in at-risk groups their first dose, rather than providing two doses in as short a time as possible.
- The four UK Chief Medical Officers agree with 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
- This is because the evidence shows that one dose of either vaccine provides a high level of protection from Covid-19.
- For both vaccines, data provided to MHRA demonstrate that whilst 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 NHS across the UK will prioritise giving the first dose of the vaccine to those in the most high-risk groups. Everyone will still receive their second dose and this will be within 12 weeks of their first. The second dose completes the course and is important for longer term protection.
- The JCVI's independent advice is that this approach will maximise the benefits of both vaccines allowing the NHS to help the greatest number of people in the shortest possible time. It will ensure that more at-risk people are able to get meaningful protection from a vaccine in the coming weeks and months, reducing deaths and starting to ease pressure on our NHS.

Why are you prioritising the first dose?

- The JCVI has recommended that as many people on the JCVI priority list as possible should be offered a first vaccine dose as the initial priority.
- The four UK Chief Medical Officers agree with 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.
- NHS 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.

Which vaccine is better/more effective?

- The Pfizer/BioNTech and Oxford/AstraZeneca and Moderna are very effective vaccines. Comparisons between the vaccine efficacies are unhelpful due to the different methodologies used.
- It's not as simple as saying one vaccine is better than the other. An effective vaccine will save lives and reduce hospitalisations.
- Comparing vaccines on a simple percentage of effectiveness is a mistake. A vaccine with slightly lower headline efficacy than another may prove to be the one that offers more durable protection or a greater effect on transmission
- Vaccines have been approved because they pass the MHRA's tests on safety and efficacy, so people should be assured that whatever vaccine they get will be highly effective and protect them from getting seriously ill from COVID 19.

Can you choose which vaccine you have? Can you take more than one type of vaccine?

- No. Any vaccines that are available will have been approved because they pass the MHRA's tests on safety and efficacy, so people should be assured that whatever vaccine they get will be highly effective and protect them from coronavirus.
- There are no current plans to mix the vaccines.
- The Government's Vaccine Taskforce keeps its approach under review, ensuring the UK is in the strongest position to protect people. The science is uncertain about how mixing vaccines could produce a better immune response, so trials and testing will continue to assess and test vaccine responses.

Can I catch Covid from the vaccines?

You cannot catch Covid from the vaccines. But it is possible to have caught Covid and not realise you have the symptoms until after your vaccination appointment.

Please continue to have the regular screening tests that your employer arranges.

If you have any of the symptoms of Covid, stay at home and arrange to have a test. If you need more information on symptoms visit <u>www.nhs.uk/conditions/coronavirus-COVID-19/symptoms/</u>

I'm currently feeling unwell, or have COVID-19, should I get the vaccine?

If you are unwell, it is better to wait until you have recovered to have your vaccine, but you should try to have it as soon as possible. You should not attend a vaccine appointment if you are self-isolating (whether because you have tested positive for Covid-19 or because you are a close contact of someone who has tested positive), waiting for a COVID-19 test or unsure if you are fit and well.

Do people who have already had COVID-19 still need to get vaccinated?

Yes, if they are in a priority group identified by JCVI. The MHRA have looked at this and decided that getting vaccinated is just as important for those who have already had Covid-19 as it is for those who haven't.

Can I go back to work after having my vaccine?

Yes, you should be able to work as long as you feel well. If your arm is particularly sore, you may find heavy lifting difficult. If you feel unwell or very tired you should rest and avoid operating machinery or driving.

Can I get my COVID-19 vaccine around the same time or on the same day as I have my flu vaccine?

The flu vaccine does not protect you from COVID-19. As you are eligible for both vaccines you should have them both, but normally separated by at least a week.

After I have had the vaccine will I still need to follow all the infection control advice?

Yes. No vaccine is completely effective, and it will take a few weeks for your body to build up protection. While the approved vaccines provide protection to a vaccinated person from becoming seriously ill from COVID-19, we do not yet know if they prevent someone from passing on the virus to others.

All staff will still need to follow the guidance in your workplace, including wearing the correct personal protection equipment and taking part in any screening programmes.

To continue to protect yourself, your residents, your family, friends and colleagues you should follow the general advice at work, at home and when you are out and about:

- practise social distancing
- · wear a face mask
- wash your hands carefully and frequently
- follow the current guidance

www.gov.uk/coronavirus

Can you still infect others once you have been vaccinated?

Yes. You can still carry the virus on your body and clothes if you come into contact with it. You will therefore still need to follow the guidance in your workplace, including wearing the correct personal protection equipment and taking part in any screening programmes.

To continue to protect yourself, your residents, your family, friends and colleagues you should follow the general advice at work, at home and when you are out and about:

- practise social distancing
- wear a face mask
- wash your hands carefully and frequently
- follow the current guidance

Guidance is at www.gov.uk/coronavirus

When will you know if the vaccines prevent transmission?

• PHE will employ existing surveillance systems and enhanced follow-up of cases to monitor how effective the vaccine is at protecting against a range of outcomes including: infection, symptomatic disease, hospitalisations, mortality and onwards transmission.

- It is likely to be some time until we have sufficient data to provide a clear picture of how vaccination impacts on onward transmission.
- While the approved vaccines provide protection to a vaccinated person from serious disease, we do not yet know if they prevent someone from passing on the virus to others.
- We have been consistently clear in our messaging that everyone must continue to follow the rules to protect the NHS and save lives, even after they have been vaccinated, remembering hands, face, space.

How long will the vaccines protect people for?

- PHE will employ existing surveillance systems and enhanced follow-up of cases to monitor how effective the vaccine is at protecting against a range of outcomes including: infection, symptomatic disease, hospitalisations, mortality and onwards transmission.
- It is likely to be some time until we have sufficient data to provide a clear picture of how long the protective effect of vaccination lasts.

Are the vaccines safe for people with pre-existing conditions?

The trials have involved people with chronic underlying conditions deliberately, and they have involved people from very broad age ranges and quite a lot of people in the elderly bracket. The JCVI have looked at this, there's no indication that there should be any difficulty in giving it to people with chronic underlying conditions.

The JCVI has picked out, not just by age, but people 18 to 65 with at-risk conditions. And, and the reason for that is that they are at extremely high risk from coronavirus compared with the general population.

For more information about the COVID vaccine visit https://www.nhs.uk/covidvaccine

Can pregnant women have the Pfizer/BioNTech or Oxford/AstraZeneca vaccines?

The JCVI has amended its previous precautionary advice on Covid-19 vaccines and pregnancy or breastfeeding.

The new advice sets out that 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.

The Pfizer/BioNTech vaccine should only be considered for use in pregnancy when the potential benefits outweigh any potential risks for the mother and baby. Women should discuss the benefits and risks of having the vaccine with their healthcare professional and reach a joint decision based on individual circumstances. Women who are breastfeeding can also be given the vaccine.

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.

For more information about the COVID vaccine visit https://www.nhs.uk/covidvaccine

Should people with a history of severe allergies have the vaccines?

Updated guidance from MHRA on managing allergic reactions (issued 30 December 2020).

"We are no longer advising as a precaution that individuals with a history of anaphylaxis to any vaccine, medicine or food do not get the vaccine. However, our advice remains that individuals should not get the vaccine if they have had a severe allergic reaction to any of the vaccine ingredients or if they experience anaphylaxis after the first dose.

Standard clinical procedure advises that vaccine recipients should be monitored for 15 minutes after vaccination, with a longer observation period when indicated after clinical assessment

This updated advice follows enhanced surveillance since the initial precautionary advice was issued, which has found no evidence of an increased risk of anaphylaxis in those with prior severe allergic reactions, other than to the vaccine and its ingredients.

For more information about the COVID vaccine visit https://www.nhs.uk/covidvaccine

What ingredients are used in the COVID vaccines?

The MHRA has confirmed that the COVID-19 Vaccine AstraZeneca and Pfizer/BioNTech COVID-19 vaccine do not contain any components of animal origin.

- A full list of ingredients for the qualitative and quantitative composition of the vaccine can be found at point 2 in the <u>Information for Healthcare Professionals of COVID-19</u> <u>Vaccine AstraZeneca</u>.
- A full list of ingredients for the excipient composition of the vaccine can be found at point 6.1 in the <u>Information for Healthcare Professionals of COVID-19 Vaccine</u> <u>AstraZeneca</u>.
- A full list of ingredients for the qualitative and quantitative composition of the vaccine and a full list of the excipient composition of the vaccine can be found at point 6 in the Information for Recipients of COVID-19 Vaccine AstraZeneca.