COVID-19 Vaccination **Factsheet**

Tremendous progress has been made with the Pfizer/BioNTech vaccine since December 2020 and now the Oxford/AstraZeneca vaccine is available to vaccinate from 4th January 2021.

How is the vaccine given?

- The COVID-19 vaccine is given as an injection into your upper arm as is given as 2 doses
- There have been changes to the way in which these vaccines are given as the second dose is now given up to 12 weeks after the first dose
- This has changed from being given 3 weeks after the first dose
- It is worth noting that there are some regional variations where some clinics for second vaccines have not been able to be cancelled

Who can get the COVID-19 vaccine?

The NHS is currently offering the COVID-19 vaccine to people most at risk from coronavirus.

The vaccine is being offered in some hospitals and hundreds of local vaccination centres run by GPs.

There may be a difference in when vaccines are available in different areas based on a number of factors and how the vaccine programme is being rolled out nationally in waves. This means that one geographical area may move through the priority groups (below) at a faster pace initially than other areas.

Vaccination of Frontline Health & Social Care Workers

By mid-January, NHS Trusts (including acute, mental health, community and ambulance trusts) will be established as "hospital hubs" with a responsibility for COVID-19 vaccine delivery to all individuals within JCVI cohort 2b as set out in the updated Public Health England Green Book.

JCVI recommend that within this group, you should give priority to frontline staff "at high risk of acquiring infection, at high individual risk of developing serious disease, or at risk of transmitting infection to multiple vulnerable persons or other staff in a healthcare environment".

This includes but is not limited to:

- Staff working on the vaccination programme
- Staff who have frequent face-to-face contact with patients and who are directly involved in patient care in either secondary or primary care, mental health, urgent and emergency care and community settings
- Those working in independent, voluntary and non-standard healthcare settings such as hospices, and community-based mental health or addiction services
- Laboratory, pathology and mortuary staff
- Those working for a sub-contracted provider of facilities services such as portering or cleaning
- Temporary, locum or 'bank' staff, including those working in the COVID-19 vaccination programme, students, trainees and volunteers who are working with patients
- Frontline social care workers directly working with vulnerable people who need care and support irrespective of where they work (for example in hospital, people's own homes, day centres, or supported housing); or who they are employed by (for example local government, NHS, independent sector or third sector).

How will this happen?

As the default provider, hospital hubs will:

- Build on the success of this season's healthcare worker flu vaccination programme, taking immediate action to offer COVID-19 vaccination to directly employed frontline staff
- Work with local authorities to plan and deliver COVID-19 vaccinations to all front-line social care workers.
- Work with CCGs and local systems to offer COVID-19 vaccination to all healthcare workers working in primary care as well as independent practitioners and independent providers including general practice (including locum staff), community pharmacy, dentistry, optometry and hospices

What about if I do not hold an NHS contract?

The NHS requests that providers update their contact records with the Care Quality Commission (CQC) as a matter of urgency.

This is because if you work in private healthcare or the dentistry sector and the practice you work in does not have an NHS Contract or you personally do not have an NHS contract, then the NHS does not hold any contact details for you.

This means we need to get hold of your contact details, or that of your practice, from the regulator, the CQC. It is, therefore, essential that private practice owners ensure that the CQC has up-to-date contact details for their practice, especially an up-to-date email address.

The NHS can then begin the process of vaccinating staff.

If you are a locum clinician not currently clinically active or between employment, we will update you as soon as possible.

Phase 1 – direct prevention of mortality and supporting the NHS and social care system

1. Residents in a care home for older adults and their carers

2. All those 80 years of age and over and frontline health and social care workers

3. All those 75 years of age and over

4. All those 70 years of age and over and clinically extremely vulnerable individuals

5. All those 65 years of age and over

6. All individuals aged 16 years to 64 years with underlying health conditions* which put them at higher risk of serious disease and mortality, all those 60 years of age and over

7. All those 55 years of age and over

8. All those 50 years of age and over

* Persons with underlying health conditions

The committee's advice is to offer vaccination to those aged 65 years and over followed by those in clinical risk groups aged 16 years and over. The main risk groups identified by the committee are set out below:

- Chronic respiratory disease, including chronic obstructive pulmonary disease (COPD), cystic fibrosis and severe asthma
- Chronic heart disease (and vascular disease)
- Chronic kidney disease
- Chronic liver disease
- Chronic neurological disease including epilepsy
- Down's syndrome
- Severe and profound learning disability
- Diabetes
- Immunosuppression due to disease or treatment
- Asplenia and splenic dysfunction
- Morbid obesity
- Severe mental illness
- Solid organ, bone marrow and stem cell transplant recipients
- People with specific cancers

Other groups at higher risk, including those who are in receipt of a carer's allowance, or those who are the main carer of an elderly or disabled person whose welfare may be at risk if the carer falls ill, should also be offered vaccination alongside these groups.

Planning is currently underway to focus on the second phase of the vaccination and other people at increased risk due to their occupation could be a priority in phase 2. This could include first responders, the military, those involved in the justice system, teachers, transport workers and public servants essential to the pandemic response.

How safe is the COVID-19 vaccine?

The vaccines approved for use in the UK have been developed by Pfizer/BioNTech and Oxford/ AstraZeneca.

They have met strict standards of safety, quality and effectiveness set out by the independent Medicines and Healthcare products Regulatory Agency (MHRA).

Any coronavirus vaccine that is approved must go through all the clinical trials and safety checks all other licensed medicines go through. The MHRA follows international standards of safety.

Other vaccines are being developed. They will only be available on the NHS once they have been thoroughly tested to make sure they are safe and effective.

So far, thousands of people have been given a COVID-19 vaccine and reports of serious side effects, such as allergic reactions, have been very rare. No long-term complications have been reported.

How effective is the COVID-19 vaccine?

The first dose of the COVID-19 vaccine will give some protection from coronavirus. Two doses of the vaccine to give the best protection.

There is a chance you might still get or spread coronavirus even if you have the vaccine.

This means it is important to:

- Continue to follow social distancing guidance
- If you can, wear something that covers your nose and mouth in places where it is hard to stay away from other people

COVID-19 vaccine side effects

Most side effects of the COVID-19 vaccine are mild and should not last longer than a week, such as:

- A sore arm where the needle went in
- Feeling Tired
- A headache
- Feeling achy

You can take painkillers, such as paracetamol, if you need to. If you have a high temperature you may have coronavirus or another infection. If your symptoms get worse or you are worried, call 111.

Allergic reactions

Tell staff before you are vaccinated if you have ever had a serious allergic reaction (anaphylaxis).

You should not have the vaccine if you have ever had a serious allergic reaction to a previous vaccine.

If you do have a reaction to the vaccine, it usually happens in minutes. Staff giving the vaccine are trained to deal with allergic reactions and treat them immediately.

COVID-19 vaccine ingredients

The 2 approved COVID-19 vaccines do not contain any animal products or egg.