The NHS COVID-19 Vaccination Programme

Communications resources: pull-out guide for staff uptake campaigns

Second edition – 8 January 2021

Using this document

This document contains information to support communications teams working in NHS organisations with rolling out their COVID-19 vaccination campaign to staff and is in addition to the communications resource pack.

This Communications Toolkit includes:

* Narrative and key messages
* FAQs
* Campaign materials and tips on running an effective campaign
* Template letter inviting staff for vaccination
* Useful links and resources

For further communication enquiries please contact your regional NHS England and NHS Improvement communications team.

# Introduction

Since the start of the coronavirus pandemic, medical and scientific professionals have been committed to developing a vaccine to help stop the spread of the virus.

Following extensive trials, two safe and effective vaccines for COVID-19 have now been approved by regulators and are available for use.

While the Government confirmed at the beginning of the month that people aged 80 and over along with care home residents and staff should be the top priority for the first phase of delivery, the JCVI have put healthcare workers into a high priority group because of their heightened risk of exposure to the virus.

With the NHS making excellent progress on vaccinating the highest priority cohorts over the last month and the approval of the Oxford/AstraZeneca vaccine meaning many more doses will be available over the coming weeks, trusts can now look to widen the number of staff they vaccinate, meaning that communications colleagues should begin their internal staff vaccination uptake campaign

Each individual employer is responsible for achieving as high a level of staff uptake of COVID-19 vaccines as possible. This means that trusts must provide opportunities for vaccination and actively encourage staff to take it up, mirroring the annual winter flu staff uptake campaign.

NHS England and NHS Improvement have now published a [Standard Operating Procedure](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2021/01/C1008-Operational-Guidance-Vaccination-of-Frontline-Health-Social-Care-Workers-7-January-2021.pdf) for the vaccination of frontline health and social care staff which will help organisations plan the rollout, including providing information on prioritisation and delivery methods. The ambition is organisations to have made significant progress by the first week of February.

This pack contains and links to the latest resources to assist comms teams in contributing to this important work.

# Narrative for driving staff uptake of COVID-19 vaccine

## Short narrative

Following extensive trials, two safe and effective vaccines for COVID-19 are now available. Healthcare workers are in a priority group to receive the vaccine because of their heightened risk of exposure to the virus.

Strict approval processes mean that all approved vaccines are safe and are our best defence against the virus.

Getting vaccinated means protecting yourself from the virus so you can be there for your family, friends and patients.

The vaccine cannot give you COVID-19 infection, and will reduce your chance of becoming seriously ill.

Getting vaccinated only protects you from the virus, so you will still need to follow the [IPC](https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control) and testing measures in your workplace, and follow general advice at work, at home and when you are out and about

The free vaccine will protect you against COVID-19 so you can keep protecting others.

## Long narrative

Since the start of the coronavirus pandemic, medical and scientific professionals have been working to develop a vaccine to help stop the spread of the virus.

We have all felt the impact of the pandemic, and this has been the most challenging year in NHS history. Happily, following extensive trials, two safe and effective vaccines for COVID-19 are now available to help protect you from the virus.

The vaccines have been through the same regulatory approval process as any medicines to ensure they meet strict safety standards and offer high levels of protection.

Over the last few weeks the NHS has prioritised those who are oldest and are most at risk.

Now, with a second vaccine approved for use, the vaccine will be rapidly rolled out to health and social care workers so that colleagues can protect themselves from the virus, and so they can be there for their family, friends and patients.

We will be contacting you to let you know how to get your vaccine, so there is no need to get in touch.

The vaccine cannot give you COVID-19 infection, and will reduce your chance of becoming seriously ill.

Getting vaccinated only protects you from the virus, so you will still need to follow [IPC](https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control) and testing measures in your workplace, and follow general advice at work, at home and when you are out and about:

* Practice social distancing
* Wear a face mask
* Wash your hands carefully and frequently
* Follow the current guidance: <https://www.gov.uk/coronavirus>

The NHS has robust workforce plans in place to deliver large numbers of vaccinations to the public. We will ensure we have enough trained and experienced staff to vaccinate as many people as possible, making sure this doesn’t affect other hospital, GP and community services.

The free vaccine is ready to protect you against COVID-19 so you can keep protecting others.

## Key messages

* Two safe and effective vaccines for COVID-19 are now available
* Thousands of staff have already received the vaccine, and we are rolling it out to many more over the coming weeks.
* Getting vaccinated means protecting yourself from the virus so you can be there for your family, friends and patients
* The COVID-19 vaccinations have been approved by the MHRA, the official UK regulator, like all other medicines and devices.
* The vaccines have undergone months of rigorous testing and the MHRA’s approval processes mean we can be sure that they meet strict safety standards and offer high levels of protection.
* Rollout of the vaccine will help protect against the virus, and so it is important we offer it to those most at risk first.
* We are preparing additional local facilities to manage large volumes of vaccinations when they become available next year
* The COVID-19 vaccine will not protect you against flu. All health care workers should have the flu vaccination. To keep you, your family and patients protected, get your free annual flu jab as soon as you can.
* All [staff must continue to comply with infection prevention and control](https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control) and testing measures even once they have been vaccinated
* The independent Joint Committee on Vaccination and Immunisation (JCVI) regularly review the latest information and update their advice on the groups that should be prioritised for vaccination. The latest information can be found here.

# FAQs

**What vaccine for COVID-19 is currently available?**

Both the Pfizer/BioNTech and Oxford/AstraZeneca COVID-19 vaccines are now available. Both vaccines have been shown to be safe and offer high levels of protection, and have been given regulatory approval by the MHRA.

The Government has in principle secured access to seven different vaccine candidates, across four different vaccine types, totalling over 357 million doses. This includes:

* 40 million doses of the BioNTech/Pfizer vaccine
* 100m doses of the Oxford/AstraZeneca vaccine.
* 17 million doses of the Moderna vaccine, which has been approved by the MHRA but is not expected to be delivered to the NHS until Spring.

**What about the Moderna vaccine? Why is this available in the USA but not here?**

The MHRA have now decided – after extensive assessment – that the Moderna vaccines are safe and effective. The Government provisionally ordered several million doses of this vaccine ahead of it being approved, but we don’t expect Moderna to be able to make these available until Spring 2021.

**Will the vaccines work with the new strains?**

There is no evidence currently that the new strains will be resistant to the vaccines we have, so we are continuing to vaccinate people as normal. Scientists are looking now in detail at the characteristics of the virus in relation to the vaccines. Viruses, such as the winter flu virus, often branch into different strains but these small variations rarely render vaccines ineffective.

**Should people who have already had Covid or are suffering from ‘Long Covid’ 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, including those who have mild residual symptoms. Where people are suffering significant ongoing complications from Covid they should discuss whether or not to have a vaccine now with a clinician.

**Why are you postponing second doses?**

The [UK Chief Medical Officers have agreed](https://www.gov.uk/government/news/statement-from-the-uk-chief-medical-officers-on-the-prioritisation-of-first-doses-of-covid-19-vaccines) a longer timeframe between first and second doses so that more people can get their first dose quickly, and because the evidence shows that one dose still offers a high level of protection after two weeks – 89% for the Pfizer/BioNTech vaccine and 74% for the Oxford/AstraZeneca vaccine.

This decision will allow us to get the maximum benefit for the most people in the shortest possible time and will help save lives.

Getting both doses remains important so we would urge people to return for it at the right time.

**Why are healthcare workers amongst the first groups to receive the vaccine?**

The JCVI have put patient-facing health and social care staff into a priority group because of their heightened risk of exposure to the virus.

The NHS is experienced in vaccinating hundreds of thousands of staff quickly and safely – we do it every year for the flu vaccine – and all local NHS employers will be responsible for ensuring that 100% of eligible staff have the opportunity to take it up over the coming weeks and months.

**How do healthcare workers get the vaccine?**

The NHS will offer vaccinations using different models. For healthcare workers, most will get vaccinated either at their own work or a local hospital.

**Which healthcare workers are being prioritised?**

Some staff have been vaccinated to avoid doses going to waste, and employers have been identifying those who will benefit most – either due to medical conditions or the environment in which they work.

Frontline health and social care workers 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, are considered of higher priority for vaccination than those at lower risk. Healthcare providers have been undertaking staff risk assessments throughout the pandemic to identify such individuals and should use these as the basis for prioritising access to vaccines.

**Why are BAME groups not being prioritised?**

There is clear evidence that certain Black, Asian and minority ethnic (BAME) groups have higher rates of infection, and higher rates of serious disease and mortality. The reasons are multiple and complex.

There is no strong evidence that ethnicity by itself (or genetics) is the sole explanation for observed differences in rates of severe illness and deaths. What is clear is that certain health conditions are associated with increased risk of serious disease, and these health conditions are often overrepresented in certain Black, Asian and minority ethnic groups.

Prioritisation of people with underlying health conditions will also provide for greater vaccination of BAME communities who are disproportionately affected by such health conditions.

Tailored local implementation to promote good vaccine coverage in Black, Asian and minority ethnic groups will be the most important factor within a vaccine programme in reducing health inequalities in these groups.

The NHS will provide advice and information at every possible opportunity, including working closely with BAME communities, to support those receiving a vaccine and to anyone who has questions about the vaccination process.

Throughout the pandemic increasing attention has been given to reducing health inequalities and we have invested more than £4 million into research into Covid-19 and ethnic disparities so that we can go further.

Healthcare providers have been undertaking staff risk assessments throughout the pandemic to identify individuals at higher risk of contracting the virus and/or experiencing serious illness if they do. These risk assessments include factors such as ethnic background, and should be used as the basis for prioritising access to vaccines for staff over the coming weeks.

**How long does the vaccine take to become effective?**

The MHRA have said these vaccines are highly effective, but to get full protection people need to come back for the second dose – this is really important.

To ensure as many people are vaccinated as quickly as possible, the Department for Health and Social Care now advise that the second dose of both the OxfordAstraZeneca and the Pfizer/BioNtech vaccine should be scheduled up to 12 weeks apart.

Full protection kicks in around a week or two after that second dose, which is why it’s also important that when you do get invited, you act on that and get yourself booked in as soon as possible. Even those who have received a vaccine still need to follow social distancing and other guidance.

**Why is it important to get your COVID-19 vaccination?**

If you’re a frontline worker in the NHS, you are more likely to be exposed to COVID-19 at work.

Getting your COVID-19 vaccination as soon as you can, should protect you and may help to protect your family and those you care for. The COVID-19 vaccine should help reduce the rates of serious illness and save lives and will therefore reduce pressure on the NHS and social care services.

**Is it mandatory, and what happens if healthcare workers don’t want the jab?**

There are no plans for COVID-19 vaccines to be compulsory. Just as they do with the winter flu vaccine, local NHS employers will be working hard to ensure 100% of staff are able to get vaccinated, and that any concerns that staff have are answered. We are confident that the vast majority of our staff – as they do every year for the flu vaccine – will choose to protect themselves by getting the vaccine.

**Is the vaccine vegan/vegetarian friendly?**

There is no material of foetal or animal origin, including eggs, in either vaccine. All ingredients are published in healthcare information on the MHRA’s website.

For the Pfizer/BioNTech vaccine information is available here: <https://www.gov.uk/government/publications/regulatory-approval-of-pfizer-biontech-vaccine-for-covid-19>

For the Oxford/AstraZeneca vaccine information is available here: <https://www.gov.uk/government/publications/regulatory-approval-of-covid-19-vaccine-astrazeneca>

**Will healthcare workers need to pay for the vaccine?**

No, the COVID-19 vaccination is only available through the NHS to eligible groups and it is a free vaccination.

**Who cannot have the vaccine?**

People with history of a severe allergy to the ingredients of the vaccines should not be vaccinated.

The MHRA have updated their guidance to say that pregnant women and those who are breastfeeding can have the vaccine but should discuss it with a clinician to ensure that the benefits outweigh any potential risks.

**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.

The vaccine cannot give you COVID-19 infection, and two doses will reduce your chance of becoming seriously ill. However, you will need to continue to follow the guidance in your workplace, including wearing the correct personal protection equipment and taking part in any screening programmes.

**How effective is the COVID-19 vaccine?**

The MHRA have said this vaccine is highly effective, even with one dose, but to get full protection people need to come back for the second dose – this is really important.

Full protection kicks in around a week or two after that second dose, which is why it’s also important that when you do get invited, you act on that and get yourself booked in as soon as possible.

**Is the NHS confident the vaccine will be safe?**

Yes. The NHS would not offer any COVID-19 vaccinations to the public until it is safe to do so.  The MHRA, the official UK regulator authorising licensed use of medicines and vaccines by healthcare professionals, has said these vaccines are safe and highly effective, and we have full confidence in their expert judgement and processes.

As with any medicine, vaccines are highly regulated products. There are checks at every stage in the development and manufacturing process, and continued monitoring once it has been authorised and is being used in the wider population.

**What is the evidence to show the vaccine is safe for BAME communities?**

The Public Assessment Reports contain all the scientific information about the trials and information on trial participants.

For the Pfizer trial, participants included 9.6% black/African, 26.1% Hispanic/Latino and 3.4% Asian.

For the Oxford/AstraZeneca vaccine 10.1% of trial recipients were Black and 3.5% Asian.

There is no evidence either of the vaccines will work differently in different ethnic groups.

**How was the vaccine developed so quickly?**

Medicines, including vaccines, are highly regulated – and that is no different for the approved COVID-19 vaccine. There a number of enablers that have made this ground-breaking medical advancement possible and why it was possible to develop them relatively quickly compared to other medicines;

1. The different phases of the clinical trial were delivered to overlap instead of running sequentially which sped up the clinical process;
2. There was a rolling assessment of data packages as soon as they were available so experts at the MHRA could review as the trial was being delivered, ask questions along the way and request extra information as needed – as opposed to getting all information at the end of a trial;
3. Clinical trials managed to recruit people very quickly as a global effort meant thousands of people were willing to volunteer.

**How are you raising awareness of the vaccine with the NHS workforce?**

The Cabinet Office have developed a campaign to raise awareness of the vaccine with the public and health and social care staff. This includes specific engagement with BAME communities and workforce.

**I’m currently ill with COVID-19, can I get the vaccine?**

People currently unwell and experiencing COVID-19 symptoms should not receive COVID-19 vaccine until they have recovered.

**Do people who have already had COVID-19 get vaccinated?**

Yes, they should get vaccinated. There is no evidence of any safety concerns from vaccinating individuals with a past history of COVID-19 infection, or with detectable COVID-19 antibody so people who have had COVID-19 disease (whether confirmed or suspected) can still receive COVID-19 vaccine.

**Are there any known or anticipated side effects?**

These are important details which the MHRA always consider when assessing candidate vaccines for use.

For these vaccines, like lots of others, they have identified that some people might feel slightly unwell, but they report that no significant side effects have been observed in the tens of thousands of people involved in trials.

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
* Although feeling feverish is not uncommon for 2 to 3 days, a high temperature is unusual and may indicate you have COVID-19 or another infection.
* You can take the normal dose of paracetamol (follow the advice in the packaging) and rest to help you feel better. Do not exceed the normal dose.

These symptoms normally last less than a week. If your symptoms seem to get worse or if you are concerned, call NHS 111. If you do seek advice from a doctor or nurse, make sure you tell them about your vaccination (show them the vaccination card) so that they can assess you properly.

You can also report suspected side effects of vaccines and medicines online through the Yellow Card scheme or by downloading the Yellow Card app.

All patients will be provided with information on the vaccine they have received, how to look out for any side effects, and what to do if they do occur, including reporting them to the MHRA.

More information on possible side effects can be found at <https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/coronavirus-vaccine/>

**How many doses of the vaccine will be required and when?**

You are required to have two doses of the COVID-19 vaccine, up to 12 weeks apart. You will get a good level of protection from the first dose but will not get maximum protection until at least 7 to 14 days after your second dose of vaccine.

**I have had my flu vaccine, do I need the COVID-19 vaccine as well?**

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.

**Will the COVID-19 vaccine protect me from flu?**

No, the COVID-19 vaccine will not protect you against the flu. If you have been offered a flu vaccine, please try to have this as soon as possible to help protect you, your family and patients from flu this winter.

**Will I still need to follow infection control and testing measures?**

Yes. The vaccine cannot give you COVID-19 infection, and 2 doses will reduce your chance of becoming seriously ill. No vaccine is completely effective and it will take a few weeks for your body to build up protection. So, you will still need to follow the guidance in your workplace, including wearing the correct personal protective equipment and taking part in any screening programmes.

# Campaign materials

To help NHS organisations and communications teams with rolling out a COVID-19 vaccine campaign to staff, there is a suite of free print, digital and social campaign materials available on [PHE’s Campaign Resource Centre](https://campaignresources.phe.gov.uk/resources/campaigns).

Various versions of the posters/collateral have been developed, with different call-to-actions to be used depending on vaccine availability.

Available resources include:

* Posters (including empty belly posters)
* Leaflets
* Social media graphics
* Email signature
* Digital screens

Example lockup and poster below:

**Text

Description automatically generated **

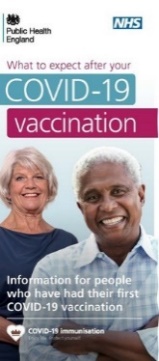
**Immunisation publications and digital assets**

Leaflets, posters and immunisation resources on the COVID-19 vaccine are also available to download and use. This includes:

* Adult leaflet
* Healthcare workers leaflet
* Social care workers leaflet
* What to expect after your COVID-19 vaccination leaflet
* Why do I have to wait for my COVID-19 vaccine flyer
* Record card

These resources are available for download [here](https://www.gov.uk/government/collections/covid-19-vaccination-programme). You can also place orders for these resources via the [health publications website](https://www.healthpublications.gov.uk/Home.html).

Example leaflets here:

**Additional materials and guidance**

Communications colleagues are well-practised in running uptake campaigns every year for flu and we would recommend that you apply the same techniques and principles for this campaign.

If useful, we have summarised five tips based on insight and what the most successful employers already do for flu:

1. Show evidence and scientific reassurance about the safety/efficacy/side effects.
2. Emphasise and repeat that the vaccine will reduce transmission of the virus.
3. Reassure that immunisation will be made easy.
4. Encourage the use of clinical leaders as vaccine champions.
5. Acknowledge and profile those staff who have had the vaccine.

With the COVID-19 vaccines in particular we know that there is a level of vaccine hesitancy which needs to be addressed. Some of the chief concerns people including NHS staff have are summarised below, with some examples of how your organisation and you as comms professionals can help counter them:

* **Safety concerns** – this includes worries over side effects, the general safety of vaccines, and the ingredients used. Your organisation can help in this by sharing the content developed by PHE and others on your social media and internal channels, and ensuring key staff are equipped with the information they need to reassure colleagues of the safety of the vaccine.
* **Not being first** - some people who are unsure say they want to wait until others have had the vaccine first. Vaccinating organisations can help in this by sharing the stories of those who have already been vaccinated on social media and internally.
* **Don’t need it** – a small number of people don't think coronavirus poses enough of a risk to them, and so they don’t need a vaccine. Vaccinating organisations can help in this by being clear in invitations why staff are in a priority group.
* **It won’t work** – a smaller number of people are not convinced that the vaccine will be effective. As above, all organisations can help in this by sharing the content developed by PHE and others through your staff-facing channels and with key internal influencers.

**Considerations for communicating with Black, Asian and minority ethnic communities about the vaccine**

The key messages about the vaccine are the same for all. However, some communities may have specific concerns which should be taken into consideration when delivering messages about the vaccine.

This table provides a summary of the key concerns of commonly hesitant groups and which messages should be highlighted in communications to which groups. This information comes from insight gathered by PHE and Multicultural Marketing Consultancy.

|  |  |  |
| --- | --- | --- |
| **Community** | **Key Concern(s)** | **Key things to highlight in communications** |
| Black African / Caribbean | General mistrust, intentions of the vaccine, side effects | Details on who was involved in clinical trials  Clarity on side effects and safety |
| Muslim | Ingredients in the vaccine | Clarity on ingredients |
| Polish | General mistrust, intentions of the vaccine | Details on MHRA approval  Details on how the vaccine was developed so quickly |
| Ultra-orthodox Jewish | Ingredients in the vaccine and permissible by religion | Clarity on ingredients  Support from faith leaders |

The FAQ section in this pack provides information covering the topics to highlight. We are working nationally with faith leaders to secure supportive statements, but you may wish to do this locally too.

Further tips on communicating to different audiences include:

1. Ensure message is delivered in an authentic, relatable way through a raft of credible and relatable influencers.
2. Ensure message is culturally appropriate and is in the right tone and/or language.
3. Engage with groups that know your audience and work with them to co-create messages and content. i.e. staff networks (BAME, Muslim etc), community organisations, religious groups, voluntary groups etc

There are some specific nationally-created resources which you may find useful for these purposes:

* PHE are translating patient leaflets into various different languages which will be available through their ordering service over the coming days and weeks.
* There is a section on Commslink which includes social media assets designed for communicating with BAME audiences including, infographics, quote cards and video. The direct link is: <https://future.nhs.uk/CommsLink/view?objectId=24858064>

# Useful links

The Green Book chapter on COVID-19: <https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a>

Information for UK healthcare professionals (Pfizer/BioNTech): <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/940565/Information_for_Healthcare_Professionals_on_Pfizer_BioNTech_COVID-19_vaccine.pdf>

Information for UK healthcare professionals (Oxford/AstraZeneca): <https://www.gov.uk/government/publications/regulatory-approval-of-covid-19-vaccine-astrazeneca/information-for-healthcare-professionals-on-covid-19-vaccine-astrazeneca>

Priority groups for coronavirus (COVID-19) vaccination: updated advice from the JCVI: <https://www.gov.uk/government/publications/priority-groups-for-coronavirus-covid-19-vaccination-advice-from-the-jcvi-30-december-2020>

Statement from the UK Chief Medical Officers on time between first and second dose: <https://www.gov.uk/government/news/statement-from-the-uk-chief-medical-officers-on-the-prioritisation-of-first-doses-of-covid-19-vaccines>

COVID-19 vaccination e-learning programme: <https://www.e-lfh.org.uk/programmes/covid-19-vaccination/>

# Appendix A: National press release on staff vaccination campaign

**The release below was issued on Friday 8 January. You may wish to use parts of it to shape your communications, particularly the quotes from clinical leaders.**

**NHS Organisations Instructed To Rapidly Vaccinate Staff**

NHS England has written to Trusts across the UK to outline plans to vaccinate all frontline staff against Covid-19 following the rollout of the Oxford-AstraZeneca vaccine.

From the middle of January, all NHS Trusts will be able to provide vaccinations for local healthcare and social care workers, which will be critical in keeping both them and patients safe.

The life-saving jab will be offered to all staff across NHS services, including those who work in general practices, pharmacies, dentists and other primary and secondary care settings.

It will also be available to ambulance trusts, volunteers and all independent providers, such as community-based mental health services.

Local Clinical Commissioning Groups (CCG) will co-ordinate the details for all staff on how and when to get their jab, and local vaccination centres will also be able to deliver jabs at short notice in order to prevent wastage.

Clinics will be scaled up to enable vaccinations to take place seven days a week and health and social care workers will be invited to book appointments.

The NHS will ensure CCGs have a full list of providers, including independent and private services. For example, private sector dentists registered with the CQC, which the NHS has access to.

While the priority so far has been to deliver the vaccine to those most in need, a number of staff will have already received their first dose. The aim is to have made significant progress in immunising all frontline staff by the first week of February and uptake will be continuously monitored.

The vaccination of workers will be prioritised based on local risk assessments, which will consider factors such as face-to-face contact time, underlying health conditions and whether people are from black, Asian and minority ethnic (BAME) backgrounds, all of which are proven risk factors.

Ensuring widespread vaccine coverage among those most at risk in our workforce will be an important factor in reducing the disproportionate impact Covid-19 presents.

The procedure of rolling the vaccine out to staff will be very similar to that of flu vaccinations, which this winter had a high uptake of almost 75%.

**Chief Nursing Officer for NHS England, Ruth May,** said**:** “This is the biggest vaccination programme in NHS history and as we move to the next phase of the rollout, it is only right that we prioritise the NHS staff who have been on the frontline of this global pandemic.

“We will be prioritising the nurses, doctors and other frontline staff who continue to work tirelessly, before administering the vaccine to almost all health and social care staff by mid-February.”

**Chief People Officer Prerana Issar** said: “Frontline staff across the NHS have been working around the clock to keep patients safe throughout the pandemic. It’s absolutely essential that we protect them while they care for patients, and the approval of the Oxford AstraZeneca vaccine is helping us to do that.”

Immunising healthcare workers will both prevent them from becoming ill and colleagues from being required to self-isolate, enhancing the ability of the NHS to provide an excellent service.

Hospital hubs will need to facilitate appointments for outside of peak times and at weekends for those workers who are only available at those hours.

It will also be the responsibility of local authorities to ensure that all social care workers are able to receive their jabs and they will similarly be contacted directly.

All social care workers will be eligible for the jab regardless of whether they work in hospitals, people’s homes or another setting, or who employs them.

Individual Trusts will make sure they have sufficient vaccinators dependent on the size of their staff cohort and they will be able to draw on the national workforce where necessary.

**Professor Helen Stokes-Lampard, Chair of the Academy of Medical Royal Colleges** said, “In the middle of an incredibly dark time, this is very welcome news. Day after day scores of people who care for the sick and vulnerable put their lives on the line, many have already been seriously ill; ensuring they all have the vaccine is the surest way to help the healthcare system to keep functioning at the highest levels as we work to overcome this pandemic and save as many lives as possible. We have done an incredible job to get as far as we have with the vaccine programme in this country, we know the future roll-out plans are ambitious, but they are achievable and hopefully now people can see there is a light at the end of the tunnel.”

**Professor Andrew Goddard, President of the** **Royal College of Physicians** said: “The RCP welcomes the additional guidance that all NHS trusts will be established as hubs to vaccinate all frontline healthcare workers by mid-January. It is imperative that we are all vaccinated as soon as possible, to protect our patients, protect ourselves and keep as many of us delivering care as possible.”

**Dr Samantha Batt-Rawden, President of the** **Doctors’ Association UK** said: “For frontline staff who are risking their lives every day to keep patients safe, this announcement couldn’t have come soon enough. Tragically we have lost too many healthcare workers to COVID in the UK. Frontline NHS and care workers absolutely must be protected as a matter of priority and we are pleased to see this announcement from NHS England today”.

**British Dental Association** **Chair Eddie Crouch** said: “Clarity on priority access to the vaccine comes as welcome news to colleagues in NHS and private dentistry across England. Dentists and their teams have not been looking for special treatment. We look forward to a straightforward rollout, that simply offers us the same protection afforded to all health professionals working on the frontline.”

**Danny Mortimer, chief executive of NHS Confederation**, said:  “It is right to prioritise frontline health and care staff for COVID-19 vaccinations – irrespective of which part of the health and care sector they work in or whether they are a student or volunteer. Today’s guidance is something our members have been calling for and so it offers very welcome clarity on how staff will be vaccinated.

"Indeed, there has been a significant increase in staff absences relating to COVID-19, and staff are rightly very concerned about how they could work safely. So it is essential that staff are vaccinated as soon as possible, not just so that they can get back to work, but because it is a basic principle that we should do our utmost to protect the NHS’ best assets: our people. It will be logistically challenging to implement on top of so many existing pressures, and the timescales are ambitious, but we need our staff to be protected from infection and hopefully remain COVID-free.”

**UNISON head of health Sara Gorton** said: "Ensuring a safe, quick and efficient rollout of the vaccine is crucial. Everyone working in the NHS - including staff employed by private contractors or on temporary contracts - must be included in the plans.

"Providing clear, easy-to-understand information about the vaccines will encourage the widest possible take up across the entire workforce."

**Professor Martin Marshall, Chair of the Royal College of GPs**said: “GPs and our teams are currently working incredibly hard delivering two mass vaccination programmes, as well as the care and services our patients rely on us for – much of which cannot be delivered remotely.

“It’s imperative that GPs, our teams and others involved in delivering the vaccination programme have the opportunity to receive the Covid vaccine in a timely manner. This won’t just protect us from this terrible virus, allowing us to continue working on the frontline delivering patient care, but also patients and our families. General practice has been doing an excellent job, playing a leading role in vaccinating more than 1.5m patients – but there is long road ahead of us, and the last thing we want to see is the workforce depleted as staff fall ill due to Covid-19 at a time when we need all hands-on deck.

“These plans from NHS England to ensure frontline workers are vaccinated are welcome, and the College agrees that prioritising the people providing frontline care within communities is sensible and essential.”

**Dr Katherine Henderson, President of the Royal College of Emergency Medicine** said “This is a very positive step and great news that frontline staff will all get vaccinated in a timely way. Staff in Emergency Departments and paramedics are at significant risk with the current levels of transmission in the community so this  rollout will protect the health of the NHS’s greatest asset, its people as well as our ability to deliver care. Trusts must ensure that those who have been assessed as at highest risk are prioritised”.

**Martin Flaherty OBE, Managing Director of the Association of Ambulance Chief Executives (AACE)**, said: “The vaccination of the ambulance service workforce is absolutely vital to further protect our staff as they continue to care for patients and contribute towards saving the lives of those who have contracted Covid-19. Ambulance staff are often the first healthcare professionals that Covid-19 patients see, by which time they can be extremely unwell and will need to be taken to hospital.

"With a virus as contagious as Covid-19, it is vital that our staff have all the protection that is available to them, which thankfully now includes the vaccine in addition to their personal protective equipment. We commend all ambulance staff who are working under these unprecedented and extremely challenging conditions and reassure them that ambulance trusts are doing all they can to get these vaccines out to staff as soon as possible.”

**Tracy Nicholls, CEO of the** **College of Paramedics** said “The College welcomes the ability to provide vaccinations to paramedics and all ambulance and control room staff who are working within communities day and night.  It is evident the pressure they are under and they do not want to be responsible for either spreading the virus through the communities they serve, or amongst their families and colleagues.

"This is the same for our members who work in primary or urgent and emergency care settings. It is important that trusts work hard to make sure they prioritise access to the vaccines appropriately. Paramedics want to continue to do the job they do with such dedication and professionalism and this is a big step forward in helping them do that.”

**ENDS**

**Notes to editors:**

* Link to full letter sent out available [here](http://tracking.vuelio.co.uk/tracking/click?d=952MOhupQCEpTqRSW-TdIEkK_ZCLleqG4tSJp-jSARoVY_5sfYkACX9IxpH3EvDopvqkNjSoC_ZmURE22aeNhXAxbNkSFJ2Y6pSwIzccC80quKIRxChb2Tlsh5z6mTK4tnZRPp4zp8Cv-IrS9vY3tMw0Jri_N_e9RrALT9XD00w-dZVPB9y8m3GAFV6hZ3cCsaj-Jm0iOiF5nCMSTEDU8ntXvEZHpo_U8gq_qWkECPNvYMD7QDcAPmSyTctF6iFCVOmtCjtUwNjxXX6NSxb93w3lU56W1mv74yxwB5Vaa72Sp2zUPSKhreB_fI-dBdcijArJybjMcmheMDZQJVk8HoU1).
* NHS England will ensure CCGs have details for all providers of services it directly commissions in their area.
* Both vaccines will be used. In most cases trusts and primary care networks will be using the Oxford/AstraZeneca vaccine.
* The NHS has been prioritising vaccinating the most at risk groups since the first vaccine was approved. Compiling and providing lists of staff is a simple process, and employers have been compiling the risk assessments which will form the basis of prioritisation within staff groups since April.
* Employers have been compiling the risk assessments which will form the basis of prioritisation within staff groups since April. These take account of both the risk of contact someone faces in their role, as well as their personal risk of suffering serious illness if they do contract Covid.

# Appendix B: Template copy for letter inviting staff to book vaccination

Dear [First Name]

**Invitation to book your COVID-19 vaccination**

As a frontline worker in the NHS, you are more likely to be exposed to COVID-19 at work.

Getting your COVID-19 vaccination as soon as you can, should protect you and may help protect your family and those you care for.

Like all other medicines and devices, both COVID-19 vaccinations have been granted regulatory MHRA approval to ensure it is safe and effective.

The vaccines cannot give you COVID-19 infection, and will reduce your chance of becoming seriously ill.

However, you will need to continue to follow the guidance in your workplace, including wearing the correct personal protection equipment and taking part in any screening programmes.

With high rates of COVID-19, it’s more important than ever to help stop the spread of coronavirus, to avoid pressure on the NHS and to keep our workforce healthy.

It is also important to remember the COVID-19 vaccine will not protect you against the flu.

If you have not done so already, please try to have your flu vaccine as soon as possible to help protect you, your family and patients this winter.

**Booking your vaccination appointment**

[Insert appointment booking details]

Yours sincerely,

[Name]

**Further information**

You can find out why vaccination is safe and important here: <https://www.nhs.uk/conditions/vaccinations/why-vaccination-is-safe-and-important/>

# Appendix C: Template copy for internal staff communications

The MHRA have now approved the Oxford/AstraZeneca vaccine.

The MHRA is the official UK regulator, authorising the use of medicines and vaccines by healthcare professionals.

Their approval means we can be confident that, like the Pfizer/BioNTech vaccine which hundreds of thousands of people have already benefited from, the Oxford/AstraZeneca vaccine meets strict safety standards and offers high levels of protection.

Over the last few weeks the NHS has prioritised those who are oldest and are most at risk.

Now, with a second vaccine approved for use, the vaccine will be rolled out to more healthcare workers. This will mean that colleagues can protect themselves from the virus, so they can be there for their family, friends and patients.

We will be contacting you to let you know how to get your vaccine, so there is no need to get in touch.

The vaccine cannot give you COVID-19 infection, and will reduce your chance of becoming seriously ill.

However, you will need to continue to follow [insert trust name] guidance, including wearing the correct personal protection equipment and taking part in any screening programmes.

With the new, faster spreading strain of COVID-19 leading to more hospitalisations, it’s more important than ever to help stop the spread of coronavirus.

It is also important to remember the COVID-19 vaccine will not protect you against the flu. If you haven’t already done so, please try to have your flu vaccine as soon as possible to help protect you, your family and patients this winter.

The free vaccine will protect you against COVID-19 so you can keep protecting others.

# Appendix D: Supporting the ongoing monitoring of the vaccine – the MHRA Yellow Card Vaccine Monitor scheme

The MHRA are keen to get healthcare workers who are receiving COVID-19 vaccinations to sign up to their Yellow Card Vaccine Monitor programme. This is one of the ways in which they are continuously monitoring the safety of COVID-19 vaccines.

The MHRA are looking for approximately 10,000 individuals to sign up, including a mix from staff working in hospital Trusts, care homes and other health sectors. Please see the attached letter which we would appreciate your sharing with staff who have been vaccinated.

Double-clicking this icon will open a PDF file.

