



Healthy London
Partnership

NHS

London Social Prescribing

Resource pack

Covid-19 Vaccinations

Responding to vaccine hesitancy

Updated May/June 2021 - the latest version will be available [here](#)

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Role of Social Prescribing Link Workers

Purpose of pack

A vaccine to prevent COVID-19 is likely to be **the most effective way to control the pandemic**. Scientists across the world have worked to develop vaccines which have then been rigorously tested for safety and efficacy.

Those with a role in delivering/supporting the COVID-19 vaccine programme need to be knowledgeable, confident and competent in order to promote confidence in the vaccination programme and deliver the vaccine safely.

The purpose of this pack is to ensure you have all the resources and information you need to hand, acting as a 'go to guide' to support you when talking with patients who are eligible for a Covid-19 vaccination but are showing signs of hesitancy.

People may be concerned about or refusing the vaccine due to worries, fears, unclear about messages or for

many other reasons. It's important to understand that people will have their point of view and it may take time to talk through their concerns. Using Motivational Interviewing techniques, listening skills and sharing factual information about Covid-19 and the vaccine may help to encourage people and offer reassurance.

We appreciate all that you are doing to support the people in your communities, and hope you find this pack useful –

Thank you

Role of Social Prescribing Link Workers

A GP Standard Operating Procedure (Guidance) has been developed by NHS England for general practices. It outlines the general role of Social Prescribing Link Workers (SPLWs) in the pandemic response (see page 14).

[Guidance and standard operating procedures - General practice in the context of coronavirus \(Covid-19\)](#)

The National Social Prescribing team have written a more detailed summary of your role (SPLW) and what additional support may be required from you, with the Covid-19 vaccination roll out in the national Social Prescribing Newsletter.

Vaccination roll-out

SPLWs may be required by their Primary Care Network (PCN) to support COVID-19 vaccination roll-out. The most appropriate way for SPLWs to support the vaccine

roll-out is through supporting in waiting areas, picking up referrals, and helping GP's proactively identify people at risk of not receiving a vaccination they are eligible for. SPLWs should discuss their role with their associated PCN in order to ascertain if they are required to support vaccine efforts and how they can add most value.

[Further information on the role of SPLWs in the vaccination and COVID response](#)

If you do not currently receive the newsletter or have access to the [Social Prescribing Collaboration Platform](#) – a network for news, resources and discussion; **please email england.socialprescribing@nhs.net to join.**

Covid-19 Vaccines

National Covid-19 vaccination programme

Public Health England (PHE) have produced a range of [resources](#), including an NHS Staff [Comms Toolkit](#), posters, videos and other media to help reinforce and support messaging about the Covid-19 vaccine. It's free to register and download or order any of the resources. Although some of the information references communications to staff, it can also be useful when engaging with your patients too.

What vaccines are available for COVID-19?

There are **three COVID-19 vaccines**:

- [Pfizer/BioNTech](#)
- [AstraZeneca/Oxford](#)
- [Moderna](#)
- [Janssen \(Only one dose required\)](#)

All vaccines have been shown to be safe and offer high levels of protection, they have been given regulatory approval by the Medicines and Healthcare products Regulatory Agency (MHRA) following tests on safety and efficacy.

These vaccines will not be routinely offered to children and young people under the age of 16 years old*.

How long does the vaccine take to become effective?

The **MHRA have said these vaccines are highly effective, the vaccine becomes effective from 2-3 weeks after it is given**. However, to get full protection **people need to come back for the second dose – this is really important**.

Full and longer-lasting protection kicks in around two weeks after that second dose.

To ensure as many people are vaccinated as quickly as possible, **the second dose of** both the AstraZeneca/Oxford and the Pfizer/BioNTech **vaccine should be scheduled up to 12 weeks apart** Moderna currently a 4-week window and Janssen will only require one dose).

**This information has been extracted from the [British Society for Immunology's A guide to vaccinations for Covid-19](#)*

Covid-19 Vaccines

How effective is the COVID-19 vaccine?

Full protection kicks in around two weeks after **that second dose**, which is why it's also important that when people do get invited, they act on that and get themselves booked in as soon as possible.

Can the vaccine give you the Covid-19 infection?

No, none of the vaccines contain the actual Covid-19 virus (SARS-CoV-2), they are synthetic ingredients that have been designed to replicate the virus.

You cannot catch COVID-19 from the vaccine **but it is possible to have caught COVID-19 and not realise you have the symptoms until after your vaccination appointment.**

Although a mild fever can occur within a day or two of vaccination, if individuals have **any other COVID-19 symptoms** or their **fever lasts longer**; they should **stay at home and arrange to have a test.**

Can the vaccine affect people with allergies?

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

Checking for allergies is a routine part of the process before giving any vaccine or new medicine. Having these conversations – as well as being able to deal with allergic reactions in the rare case they do happen, is a central part of training for vaccinators. **But these are new vaccines and so the NHS and the MHRA are being extra vigilant and responding quickly to ensure everyone across the NHS is totally clear on these requirements.**

Covid-19 Vaccines

Can you give COVID-19 to anyone if you have had the vaccine?

The **vaccine cannot give you the COVID-19 virus**, and **a full course will reduce peoples chance of becoming seriously ill**. We do not yet know whether it will stop individuals from catching and passing (transferring) on the virus, but we do expect it to reduce this risk.

The **vaccine cannot give you the COVID-19 virus**, and **a full course will reduce peoples chance of becoming seriously ill**.

Studies have already demonstrated that being vaccinated against COVID-19 significantly reduces your risk of being infected.

This new research shows that those who do become infected 3 weeks after receiving one dose of the Pfizer-BioNTech or Oxford/AstraZeneca vaccine were between 38% and 49% less likely to pass the virus on to their household contacts than those who were unvaccinated.

Protection was seen from around 14 days after vaccination, with similar levels of protection regardless of age of cases or contacts. [Click here](#) for more information.

It is still important to follow social distancing guidance in local areas to protect family, friends and the community.

Should I have the Oxford/AstraZeneca vaccine if offered it?

Recently there have been reports of an extremely rare condition involving the Oxford/AstraZeneca vaccine and blood clots.

As a precautionary measure while this is being carefully reviewed, the Joint Committee on Vaccination and Immunisation (JCVI) **has now advised that** it is

Covid-19 Vaccines

preferable for **adults aged under 40, who don't have underlying health conditions** that put them at higher risk of severe COVID-19 disease, to **be offered an alternative vaccine** when it is their turn to be vaccinated.

For those in **this age group** who have **already had** their **first dose of the Oxford/AstraZeneca vaccine** and had no adverse reactions, **they should still come forward for their second dose when invited.**

This condition can also occur naturally, and clotting problems are a common complication of COVID-19 infection.

Differences between Covid-19 Vaccines

What is in the vaccines and how do they work?

All of the following vaccines **DO NOT contain the actual Covid-19 virus (SARS-CoV-2), they are synthetic ingredients*** that have been designed to replicate the virus.

The vaccines work by making a protein from the virus that is important for creating protection. The protein works in the same way they do for other vaccines by stimulating the immune system to make antibodies and cells to fight the infection. This immune memory builds up in your body after receiving two doses of the vaccine.

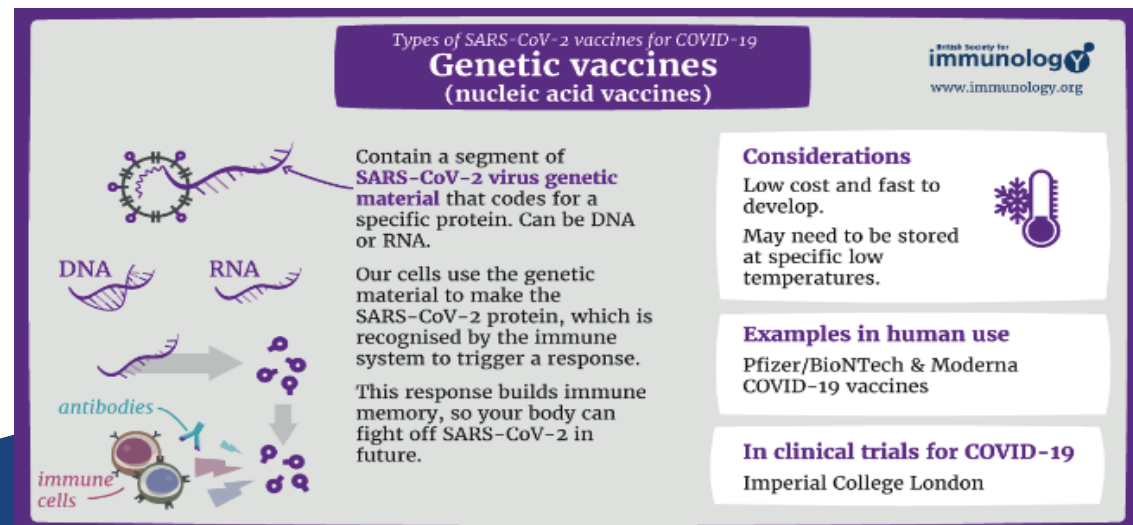
Pfizer/BioNTech and Moderna

- This vaccine is an **mRNA vaccine** which contains a segment of the **SARS-CoV-2 virus genetic material (not actual virus)** that codes for a specific protein from the virus, which is the spike protein on the surface of the virus.
- The genetic material tells the cells to make proteins.
- When the vaccine is given, **our cells at the site of injection take up the mRNA and**

make the SARS-CoV-2 protein. The body then destroys the mRNA.

- The SARS-CoV-2 protein produced is then **recognised by the immune system and triggers a specific response.**
- This response builds immune memory so that **your immune system is ready to quickly fight off SARS-CoV-2 in the future and prevent you from getting sick with COVID-19.**
- The mRNA is delivered by the vaccine cannot enter the nucleus of our cells, where our DNA is stored, and will degrade naturally within hours. **At no point is anyone's DNA altered or affected.**

**There is no material of foetal or animal (No pork, beef or gelatine) origin in either vaccine*



Differences between Covid-19 Vaccines

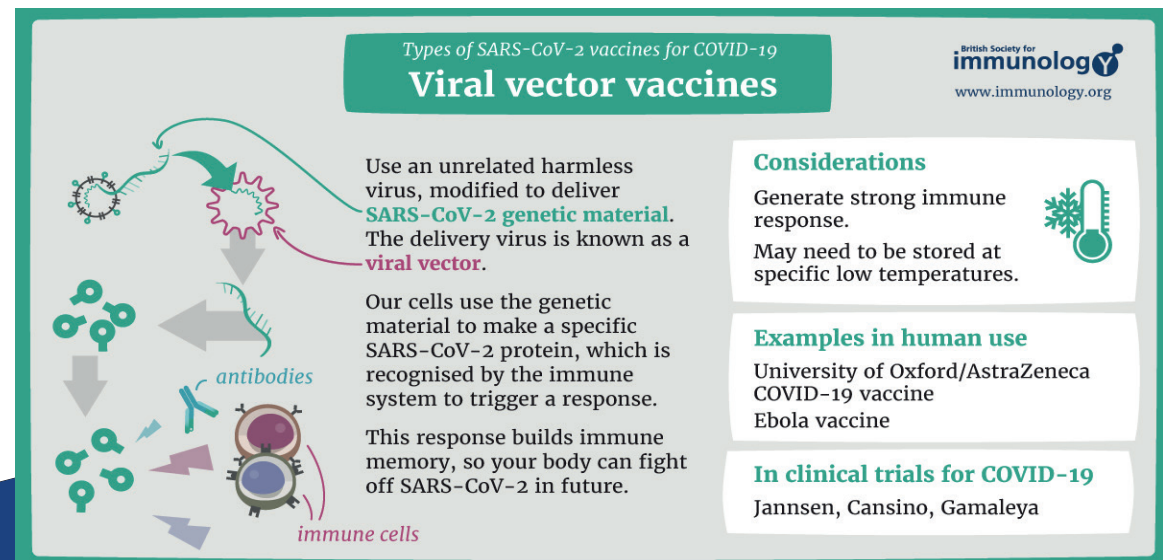
AstraZeneca/Oxford

- This vaccine is a **viral vector vaccine** which **uses an unrelated and harmless virus** which has been modified **to act as a delivery system to carry the SARS-CoV-2 virus genetic material (not actual virus)**.
- The genetic material is a segment of SARS-CoV-2 DNA that codes for the specific spike protein from the SARS-CoV-2 virus.
- The delivery virus is known as a viral vector. In this vaccine, the viral vector is a weakened **chimpanzee adenovirus** (vaccine carrier), which normally causes the common cold in chimpanzees and **has been changed so it cannot grow in humans**.
- When the vaccine is given, our cells at the site of injection take up the viral vector and the SARS-CoV-2 genetic material is delivered so the cell can make the SARS-CoV-2 protein.
- The viral vector from the vaccine is **subsequently destroyed by the body**.

This information has been extracted from the British Society for Immunology's [A guide to vaccinations for Covid-19](#).

- The protein produced is then recognised by the immune system and triggers a specific response.
- This response builds immune memory so that **your immune system is ready to quickly fight off SARS-CoV-2** in the future and **prevent you from getting sick with COVID-19**.
- The **adenovirus** as well as the DNA delivered by it in the vaccine cannot enter the nucleus of our cells, where our DNA is stored, and will degrade naturally within hours. **At no point is anyone's DNA altered or affected.**

This immune memory builds up in your body after receiving two doses of the vaccines.



What to expect after the Covid-19 Vaccine

What are the side effects

Like all medicines, vaccines can cause side effects. Most of these are mild and short-term, and not everyone gets them. The side effects are the same for people of all demographics.

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 to 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 someone has COVID-19 or another infection. An uncommon side effect is swelling of the glands. Individuals can rest and take the normal dose of

paracetamol (follow the advice in the packaging) to help make them feel better. **Do not exceed the normal dose.**

These symptoms normally last less than a week.

If symptoms seem to get worse or if individuals are concerned, they should call NHS 111. If individuals do seek advice from a doctor or nurse, they should inform them about their vaccination (show the vaccination card) so that they can assess the individual properly.

How long will the vaccine be effective for?

The vaccines are **expected to work for at least a year – if not longer**. This will be constantly monitored.

What to expect after the Covid-19 Vaccine

To protect the most vulnerable ahead of the winter, the government is preparing for a booster programme based on clinical need to ensure people have the strongest possible protection against COVID-19. [Click here](#) for further information.

Full and further information about what to expect after the Covid-19 vaccine is available on the [government website](#) and [PHE resource centre](#).

Can people choose the vaccine they want?

People are **not able to choose which vaccine** they have. However there is an **exception for individuals who are identified in specific groups** (e.g. people under 40 and pregnant women) that have been advised **not to have the Astra Zeneca/Oxford vaccine**.

People are reassured that whatever vaccine they are given; it is safe and worth their while.

There are concerns about the difference in effectiveness rates between each vaccine; however as mentioned previously, all vaccines have been shown to be safe and offer high levels of protection, they have been given regulatory approval by the Medicines and Healthcare products Regulatory Agency (MHRA) following tests on safety and efficacy.

Following the clinical trials all vaccines were effective in preventing people getting sick with COVID-19. Importantly, no one who received the vaccine suffered severe disease; the vaccine prevents the most severe cases of COVID-19. (see further information [here](#))

What to expect after the Covid-19 Vaccine

Do people have to continue social distancing after each vaccine dose?

Individuals must continue to follow the government guidelines for social distancing after each vaccine dose.

People should be able to resume physical activities at home that are normal for them if they feel well. If their arm is particularly sore, they may find heavy lifting difficult. If they feel unwell or very tired, they should rest and avoid operating machinery or driving.

To protect yourself and your family, friends and colleagues you still need to:

- practice social distancing
- wear a face mask
- wash your hands carefully and frequently
- follow the [current guidance](#) and [Lockdown guidelines](#)

Reporting suspected side effects

People should report suspected side effects of vaccines and medicines online through the [Yellow Card scheme](#) or by downloading the Yellow Card app.



Vaccination appointments

The NHS Covid-19 Vaccination Booking Service

Everyone in the 9 top priority groups (all those aged 50 and above), individuals over the age of 40 and those at high risk of getting seriously ill from Covid-19 (clinically extremely vulnerable) are now eligible for a Covid-19 vaccine.

The NHS has been writing to eligible people (based on the JCVI) cohorts offering them the opportunity to book a Covid-19 vaccine appointment* through the following services:

They can do this in two ways:

- Booking online at www.nhs.uk/covid-vaccination
- Phoning 119

**If people need to rearrange an appointment this can be done online through 'manage your appointments' or phoning 119.*

How it will work

In line with the process already in place for other vaccination services, the NHS will continue to contact people by letter or phone when it is their turn to book their vaccine.

People are also able to use the national booking system to **book an appointment without needing a letter, provided they are registered with a GP** (so records can be matched) and are **within one of the priority groups**. Both first and second dose appointments should be booked at the same time.

People may also be invited by their GP or local NHS service directly which means they will not need to use the national booking service.

People under 40 years old will not be offered appointments for the Oxford/AstraZeneca vaccine.

There may be fewer appointments available which means people may have to travel further.

If an individual is eligible but **has not been offered the vaccine** yet, they are **advised to contact the national booking system as soon as possible**.

Vaccination appointments

[Covid-19 vaccination consent forms](#) are available on the government website. See further FAQs in the [Covid-19 programme comms pack](#).

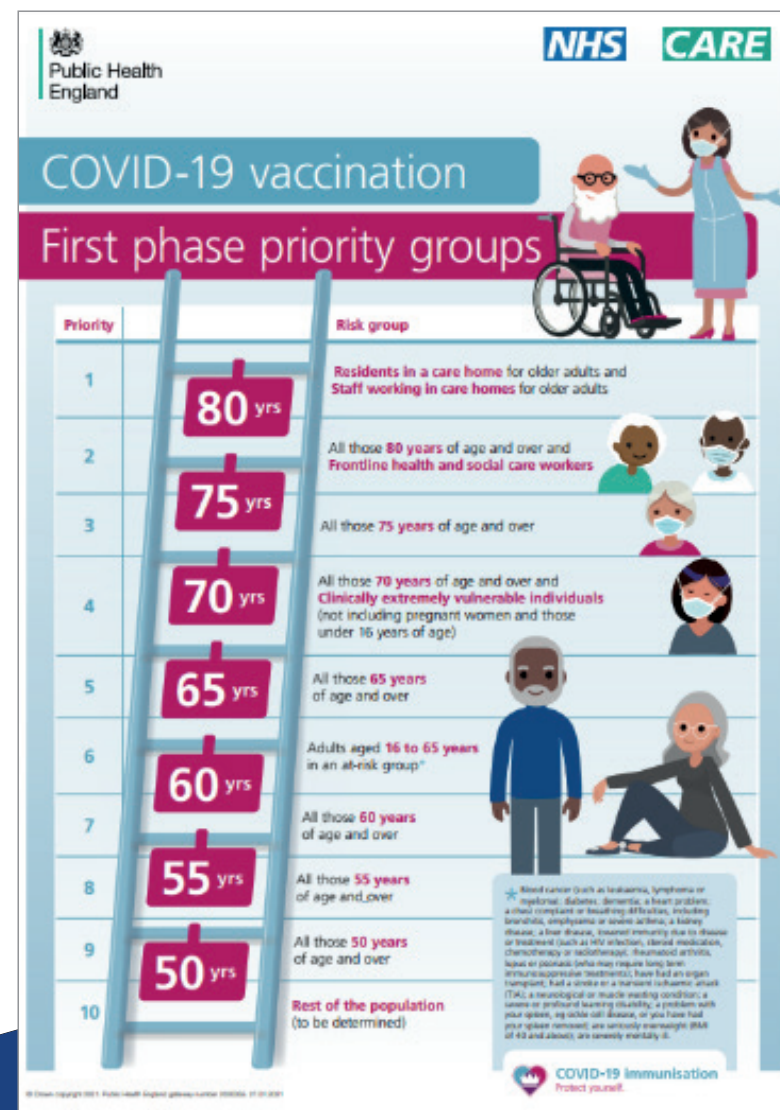
Here is an [up to date list of Covid-19 vaccination first phase priority groups](#); which includes the **Risk Groups** and **Clinical conditions list**.

To keep updated about priority/age groups, [click here](#)

You can download the PHE poster of the Covid-19 vaccination – First phase priority groups [here](#)

Local teams and the National Immunisations Management Service are making follow up calls and sending reminder letters to people who have been contacted but not yet booked an appointment.

People currently unwell with Covid-19 and experiencing Covid-19 symptoms should not receive a vaccine until they have recovered and around four weeks after onset of symptoms or four weeks from the first positive test in those who are asymptomatic.



Vaccination appointments

There is no evidence of any safety concerns from vaccinating individuals with a past history of COVID-19 infection, or with detectable COVID-19 antibodies so people who have had COVID-19 (whether confirmed or suspected) can still receive COVID-19 vaccine; this would be expected to boost any pre-existing antibodies. For further information [click here](#).

The NHS encourages anyone who isn't registered with a GP, to do so; no proof of address or immigration status is needed. If people have never registered with a GP or haven't been to a GP for a number of years, **we would recommend speaking with your local practice about registering**. Register with a GP.

A [record card](#) will be provided to every person who has had their first vaccination. This **must be taken to the next appointment** for their second vaccine which will be between 3 and 12 weeks later. It is important to have both doses of the same vaccine to give you the best protection.

People are encouraged to book and attend their second vaccine.



Don't forget your COVID-19 vaccination 

Make sure you keep this record card with you

For more information on the COVID-19 vaccination or what to do after your vaccination, see www.nidirect.gov.uk/covid-vaccine

 **DoH**
www.health-ni.gov.uk

 **HSC** Health and Social Care

COVID-19 immunisation
Protect yourself.



Name

1 Name of vaccine:
Batch no: Date vaccine given:

Don't forget to attend your appointment to have your second dose of vaccine. You will have the best protection after two doses.

Second appointment date:

2 Name of vaccine:
Batch no: Date vaccine given:

Public Health Agency | www.publichealth.hscni.net

How people access the vaccine

What if people can't get to the Vaccination Centre?

People who are housebound will be contacted by their GP services about alternative ways to get vaccinated. People can also wait until more locations closer to where they live become available. The NHS will follow up with people that haven't booked their appointment, as a reminder.

Ensure you know where your local and neighbouring boroughs vaccination sites are located. This will be useful to keep to hand, just in case one of your clients/patients are unable to travel far. **Live vaccination sites** can be found [here](#).

To support the vaccine programme, outreach and/or pop-up sites may be set up locally, for further information contact your Local Authority or Integrated Care System (ICS).

Find out what transport support is available for your patients, if they require assistance.

Why do other people have to wait for the Covid-19 vaccine?

People most at risk from the complications of COVID-19 are being offered the vaccine first.

An independent group of experts has recommended that the NHS first offers these vaccines to those at highest risk of catching the disease and of suffering serious complications or dying from COVID-19. This includes older adults in care homes and frontline health and social care workers.

When more vaccines become available, they will be offered to other people at risk as soon as possible. For more information visit the [government website](#) or [PHE resource centre](#).

How people access the vaccine

Call and text scams – help patients to avoid fraud

There have been a small number of reports of people being targeted by scams related to the vaccine via various such as WhatsApp, email etc.

The NHS England communications team have been working nationally with law enforcement agencies and other Government departments to understand the scale of the problem and developed joint messages in response.

Local organisations are encouraged to **use the messaging on the right**, *graphics and other assets are expected to be developed shortly*:

We are aware that some people are receiving suspicious calls and text messages offering the COVID-19 vaccination.

Coronavirus vaccines are only available on the NHS. You can be contacted by the NHS, your employer, or a GP surgery local to you, to receive your vaccine. Remember, the vaccine is free of charge. At no point will you be asked to pay.

- The NHS will never ask you for your bank account or card details.
- The NHS will never ask you for your PIN or banking password.
- The NHS will never arrive unannounced at your home to administer the vaccine.
- The NHS will never ask you to prove your identity by sending copies of personal documents such as your passport, driving licence, bills or pay slips.

How people access the vaccine

If you receive a call you believe to be fraudulent, hang up. If you believe you have been the victim of fraud or identity theft you should report this directly to [Action Fraud](#) on **0300 123 2040**. Where the victim is vulnerable, and particularly if you are worried that someone has or might come to your house, report it to the Police online or by calling 101.

There have also been reports of patients who have been invited by text message not trusting that the message is legitimate. If your organisation is using text messages to invite patients in, we highly recommend that these messages include personal information to build trust, for example beginning with the sentence:

This is a message for [name], date of birth [DOB], from [organisation name].

Spotting fake news – What is fake news and how can you identify it?

The BBC have created this video how fake news can sometimes very closely mimic real news. This video takes a look at where fake stories come from and how they travel.

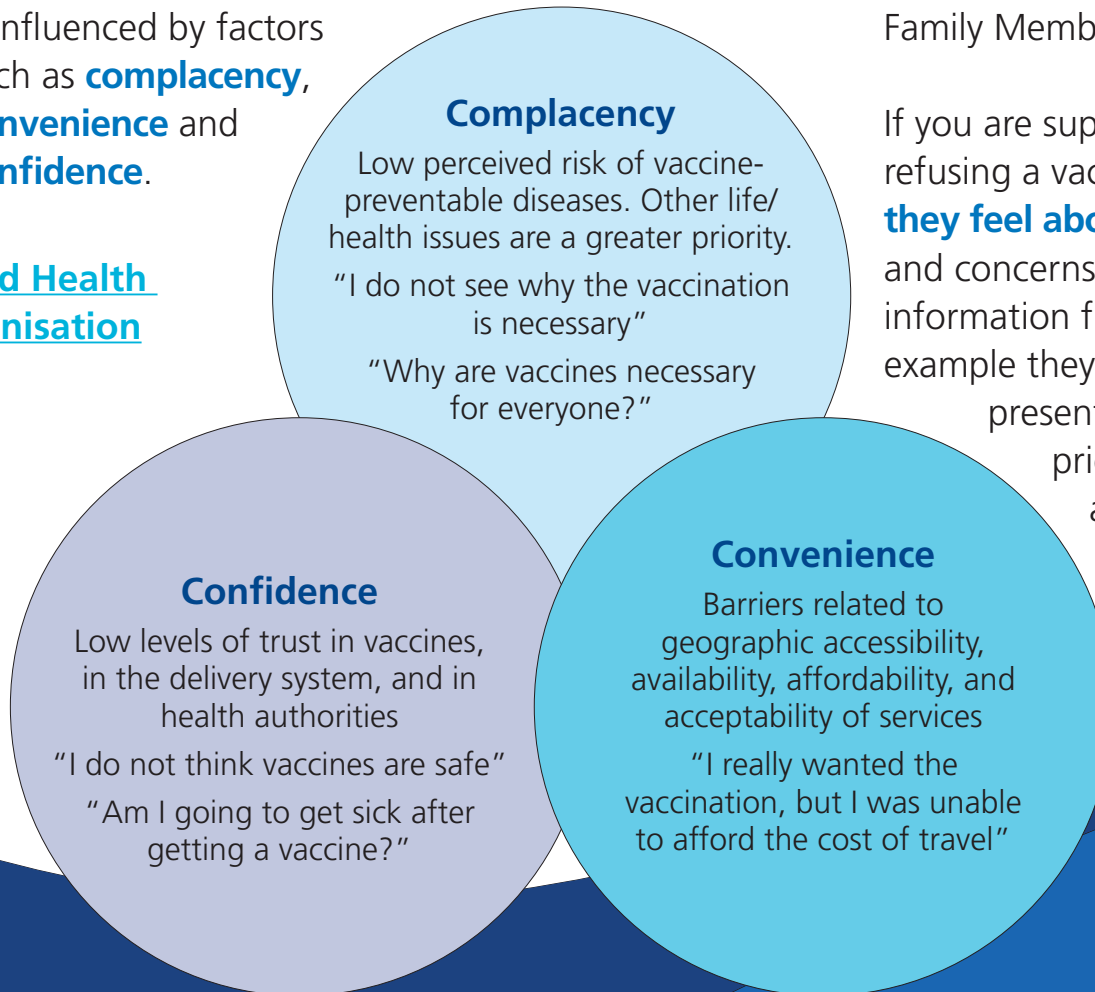
To **keep updated on the number of Covid-19 vaccinations** provided by NHS England, you can find weekly [publications of this data here](#).

Vaccine Hesitancy

What is vaccine hesitancy?

- **A delay in acceptance** or refusal of vaccines, despite availability of vaccination services
- **Complex and context** specific, varying across time, place and vaccine
- Is influenced by factors such as **complacency**, **convenience** and **confidence**.

World Health Organisation



Conversations with clients/patients

People will be receiving information about the Covid-19 vaccine from various sources; such as social media platforms (Facebook, Twitter, Instagram, WhatsApp etc.), Community Groups (i.e. Faith/Support groups) Family Members and friends etc.

If you are supporting a patient who is hesitant of or refusing a vaccination; **it's important to find out what they feel about the vaccine**. Explore their worries and concerns, and identify where they have got their information from, and what their fears may be. For example they could have a **needle phobia**, or at present, they may feel they have other pressing priorities at home, work or with family, and their current practices of social distancing are enough.

Vaccine Hesitancy

It's important to listen to their reasons for not wanting the vaccine and be non-judgemental about their response. We can't dismiss people's thoughts and feelings, as this is what they currently believe.

Having questions about vaccines is very normal – and it's ok to be hesitant.

Providing factual information will support conversations with individuals and will help them to make an informed decision about the vaccine. Signpost people to the most up to date information and facts from PHE and NHS England (NHSE), the Government website or their local authority and other resources throughout this pack.

Common questions

"I am worried about catching the virus from the vaccine"

It is not possible to catch the virus from the vaccine as we only inject a small protein/part of the virus and never the whole virus.

"I am worried about side effects"

It is normal to feel out of sorts after vaccination. You may get redness, swelling or a fever however these are all evidence that your immune system is working well against the vaccine and generating memory.

"Why do some people get disease even after vaccination?"

Although vaccines work well, there is still a small chance that you can get the disease. However, if this is the case the disease tends to be less severe.

Vaccine Hesitancy

The NHS have provided a short script to support staff when making follow up conversations with patients who have not yet come forward for whatever reason for their vaccination but are eligible.

Intro

"I understand completely – we know some people have concerns and need more information"

"I might be able to answer some of the questions you have, can I talk to you about it for a little while?"

Safety

"These vaccines have a really good safety record – we wouldn't be able to give them if they didn't"

"They were tested on thousands of people of different ages, ethnic backgrounds and with different health conditions before being approved, and have now been given to 35 million people like you in England alone"

"Some people do have side effects but in almost all cases these are really mild and go away within a day or two"

"Most importantly, they can keep you safe from getting seriously ill if you get coronavirus – it's the best way we have of keeping you safe and getting back to being able to do the things you want to do"

"We're working really hard to make sure that it's as safe as possible when you come to a vaccination service too – all the staff will be wearing PPE, surfaces are being disinfected regularly and social distancing will be in place"

"There is no evidence at all that the vaccine makes you infertile" (Only mention when relevant)

Vaccine Hesitancy

Ingredients

“Neither vaccine has any ingredients from animals or human”

“The Oxford/AstraZeneca contains a tiny amount of ethanol but this is true of lots of things – they don’t contain any more than a banana or slice of bread does – and scholars have been clear that this is permissible” (Only mention when relevant)

“Leaders from all the faiths have said that the vaccines are a good thing and people shouldn’t hesitate to get them”

“Scholars have been clear that injections don’t invalidate the fast so you don’t need to worry if your second dose is during Ramadan” (Only mention when relevant)

Don’t need it

“There are thousands of people in hospital at the moment who probably thought that Covid wouldn’t affect them much too – the average age of people in intensive care is 60 but people much younger have been seriously ill and died too”

“Just because you’ve had Covid doesn’t mean you can’t get it again, and the next time it could affect you worse. The vaccine is the only way to get a high level of protection and keep yourself and others safe”

Key concerns and communicating with your communities

Some of the key concerns people have, including NHS staff, are summarised below, with some examples of how your organisation and you can help counteract 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 and patients about 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.

Do I 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 and patients are in a priority group.

Will it 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.

[The British Society for Immunology have also created a range of resources to help engage and inform the public about the immunology of Covid-19 – Connect on Coronavirus: public engagement resources](#)

Key concerns and communicating with your communities

The table below is 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 of 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

Key concerns and communicating with your communities

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 (ethnic minority, Muslim etc), community organisations, religious groups, voluntary groups etc

COVID-19 Vaccine Equalities Connect and Exchange Hub

The NHS England and NHS Improvement Covid-19 Vaccination Programme have created an **Exchange Hub** on the Future NHS Collaboration Platform, for people passionate about increasing the uptake of the vaccine in all communities. The purpose of the hub is to:

Collaborate – connect and engage to design solutions together

Connect – share best practice, information and data and signpost to where support is available

Co-create – join events, webinars and conversation, enabling success to drive local solutions

Communicate – access inclusive, engaging, co-ordinated messaging through trusted voices, partnership and networks.

To register for an account [click here](#) and once registered you can request to join the Hub [click here](#).

The British Society for Immunology have also created a range of resources to help engage and inform the public about the immunology of Covid-19 – [Connect on Coronavirus: public engagement resources](#)

BAME and Religious communities

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.

The Health Service Journal (HSJ) have published an article about the [reasons for covid hesitancy in black communities](#) which provides an insight in to why people may be reluctant based on previous history and experiences.

Religious organisations have released position statements to their communities and created dedicated pages on their websites to provide guidance about the current vaccines for eligible/at-risk individuals:

- [The British Islamic Medical Association Pfizer/ BioNTech / Oxford-AstraZeneca / Moderna](#)
- London Colney Islamic Centre have [created a video](#) to address key misconceptions regarding Covid-19 and the vaccines. Three points from an Islamic perspective are also covered.
- [Fasting and covid-19 vaccinations](#) analysis from Islamic scholars says that injections for non-nutritional purposes do not invalidate the fast. Therefore, people don't need to worry if their second dose is during Ramadan.
- The Conference of European Rabbis [Recommending Covid-19 vaccines](#)
- [Board of Deputies of British Jews – Advocacy for the community](#)
- The Catholic Church – [Update on Covid-19 and Vaccination](#)
- The Church of England – [Covid-19 Vaccines update December 2020](#)
- The Inter Faith Network – [Faith Communities and Covid – Responding together at a time of need](#)

BAME and Religious communities

Your Neighbour: Give Hope campaign links multiple faith groups and communities in support of the vaccine programme and to help increase uptake of vaccines.

[Click here](#) for further information and videos.

Translated resources

The following information is currently available in Albanian, **Arabic, Bengali, Chinese, Farsi, Gujarati, Hindi, Kurdish, Nepali, Punjabi, Polish, Romanian, Somali, Spanish, Tagalog, Turkish and Urdu.**

- [Guide for healthcare workers](#)
- [COVID-19 vaccination: guide for older adults](#)
- [What to expect after your COVID-19 vaccination](#)
- [Why you are being asked to wait](#)
- [Women of childbearing age, currently pregnant or breastfeeding](#)

Race Equality Foundation – have written and audio translated materials of the guidance on coronavirus and other information to support those with dementia, their

families and carers. The materials have been translated into the following languages: Arabic, Bengali, Chinese, Gujarati, Kurdish, Punjabi, Portuguese, Polish, Somali and Urdu – [Covid-19 translated materials and resources](#)

Vaccine information videos in community languages

NHS doctors, nurses and other frontline staff have come forward to help reassure communities that COVID-19 vaccines are safe, effective and have been independently tested to the highest standards.

In a series of [short videos](#), they explain how the vaccine is given, and give clear evidence that the vaccines work and are safe. It is hoped that the videos will be shared among friends, families, faith and community groups via WhatsApp, text message and on social media.

BAME and Religious communities

The [Greater London Authority \(GLA\)](#) have kindly shared the following downloadable [WhatsApp audio clips here](#) which explain some of the new rules and guidance from 29th March 2021 in Bengali, Gujarati, Polish, Romanian, Turkish and Somali.

There is a section on [Commslink](#) in FutureNHS Collaboration Platform, which includes social media assets designed for communicating with BAME audiences including, infographics, quote cards and video.

[South Asian Health Foundation](#) have put together some resources and links in South Asian Languages to follow for advice during the Coronavirus Pandemic.

[BAME celebrities call out vaccine misinformation](#)

[Doctors of the World](#) have also created [Covid-19 guidance](#) translated in **over 60 languages**.

Women of child bearing age, pregnancy and breastfeeding

There are concerns about the possible effects from the Covid-19 vaccines on fertility, harm to women during pregnancy or who are breastfeeding.

Fertility

There is no evidence that the vaccine affects fertility. Most people who contract COVID-19 will develop antibody to the spike and there is no evidence of fertility problems after Covid-19 disease.

The Royal College of Obstetricians and Gynaecologists and Royal College of Midwives have released a statement *“to reassure people that there is no evidence to suggest that Covid-19 vaccines will affect fertility. Claims of any effect of Covid-19 vaccinations on fertility is speculative and not supported by data...”* you can find the [full statement here](#).

Pregnancy

The Joint Committee on Vaccination and Immunisation

(JCVI) has updated its guidance to say that pregnant women should be offered the COVID-19 vaccine at the same time as the rest of the population, based on their age and clinical risk.

This decision is based on real-world data from the United States which shows that around 90,000 pregnant women have been vaccinated, mainly with mRNA vaccines including Pfizer-BioNTech and Moderna, without any safety concerns being raised.

Based on this data, the JCVI now advises that it's **preferable for pregnant women in the UK to be offered the Pfizer-BioNTech or Moderna vaccines**



Women of child bearing age, pregnancy and breastfeeding

where available. There is no evidence to suggest that other vaccines are unsafe for pregnant women, but more research is needed.

You can read more about the American study [here](#).

COVID-19 vaccines do not contain ingredients that are known to be harmful to pregnant women or to a developing baby.

Public Health England's [Green Book](#) still advises that pregnant women should discuss the risks and benefits of vaccination with their clinicians, including the latest evidence on safety and which vaccines they should receive.

Breastfeeding

You should not stop breastfeeding in order to be vaccinated against COVID-19. There is no known risk in giving available COVID-19 vaccines to breastfeeding women. Breastfeeding brings many benefits to the

health of you and your baby and the World Health Organisation, the JCVI and many countries around the world are recommending that breastfeeding continues. However, women should be advised that there is a lack of safety data for the COVID vaccines in breastfeeding.

What this means for women in these groups

- There is **nothing** in the vaccine **that can affect the fertility** of women or men, **therefore there is no reason to postpone having your COVID-19 vaccine** as it does not affect your likelihood of having a miscarriage and there is no need to avoid pregnancy after the COVID-19 vaccination.

Women of child bearing age, pregnancy and breastfeeding

- Pregnant women are not a specific priority group. **The greatest risk factor for severe outcomes from COVID-19 is age**, which is why **pregnant women should be invited for vaccination along with their age or clinical risk group**.
- **Pregnant women in eligible cohorts** who have yet to receive a COVID-19 vaccination **should be offered the Pfizer-BioNtech vaccine or Moderna vaccine**. If an appointment has been made and the vaccine is Astra Zeneca/Oxford individuals will receive a cancellation and rebooked for the Pfizer-BioNtech or Moderna vaccine.
- Pregnant women who have already had a **first dose of AstraZeneca/Oxford**, are advised to complete with the same vaccine and **attend their second dose appointment as planned**.

NHS England have produced FAQs specifically for questions asked about fertility (including IVF) and pregnancy, you will find them [here](#).

Other vulnerable or at risk groups

Adults with Learning Disabilities

You may be contacting and supporting people with learning disabilities; to support them with their understanding of the Covid-19 vaccination PHE have created an easy read guide that you can share or walk through with your patients.

Click here for the [full version](#).

Guy's and St Thomas' NHS Foundation Trust have also created a great Covid-19 vaccinations [Easy Read](#) guide too.

Corona Bee Game is an evidence-based 'serious' game that challenges the common myths and misconceptions that are barriers to vaccine uptake. This could be a useful resource to use with patients. For further information [click here](#).

Older Adults

Information is also available for older adults who are in the 'eligible' group category; it includes answers to common questions

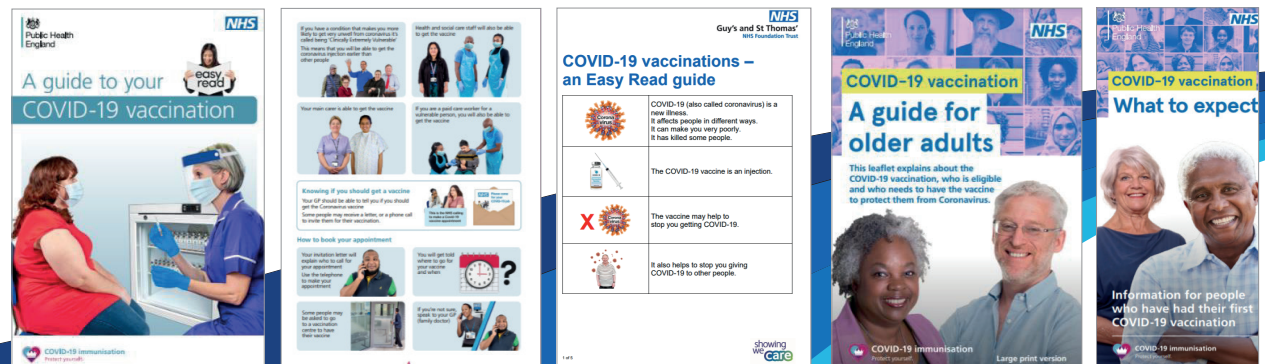
that may be asked and further details about the vaccination process. The guidance is available in a large print version too, [click here](#) for further information.

Guidance on shielding

The clinically extremely vulnerable will get priority access to vaccinations against COVID-19 before the general population and in line with the priority ordering set by the JCVI. Read the guidance on shielding and protecting people who are clinically extremely vulnerable from Covid-19 [here](#).

Finding my NHS Number

AN NHS number is not necessarily required for booking appointments however would be useful. People can find their number on the NHS App or via the website [click here](#).



Further support

There may be more activity happening in your local area than you realise! Many sectors and organisations have recruited (including volunteers) or redeployed staff to support the efforts of the Covid-19 vaccination programme; and equally created information and guidance to support specific groups and cases to ensure people have the facts they need.

Covid-19 Vaccine Community Champion / Connector Schemes

Volunteer programmes have been established in boroughs across the country; one example is the [Covid-19 Health Champions programme](#) in Newham.

The roles are wide ranging and there may be more to add to this list! Make contact your local [Health Watch](#) to find out how they may be involved with supporting local communities too.

Bereavement support

People may be needing bereavement support, especially if they have a loved one or acquaintance who is dying/has died from Covid-19. There are services and information available you can connect people to:

Hospice UK: [Caring for your dying relative at home with Covid-19](#)

NHS: [Bereavement advice and support during coronavirus](#)

Thrive London: [Support after sudden bereavement during the Covid-19 pandemic - Toolkit](#)

Department of Health & Social Care - Guidance for funerals: [Covid-19: guidance for arranging or attending a funeral during the coronavirus pandemic](#)

At a Loss.org: [Grieving Alone & Together: Responding to the loss of your loved one during the Covid-19 pandemic](#)

Further support

Support for people with Long Term Conditions

Charities and groups established to support people with long term conditions will have created guidance and fact sheets for people who are living with a long term condition, see below a list of examples that are in line with the [up to date list of Covid-19 vaccination first phase priority groups](#); which includes the [Risk Group](#) and [Clinical conditions list](#).

Asthma – [Asthma UK](#)

Cancer – [Macmillan](#)

Diabetes – [Diabetes UK](#)

Heart problem – [British Heart Foundation](#)

Kidney disease – [Kidney Care UK](#)

Liver disease – [British Liver Trust](#)

HIV – [National Aids Trust](#)

Muscular Dystrophy – [Muscular Dystrophy UK](#)

Neurological conditions – [Brain and Spine Foundation](#)

Rheumatoid arthritis, Lupus or Psoriasis – (who may require long term immunosuppressive treatments
[Specialist Pharmacy Service](#))

Stroke or Transient Ischaemic Attack (TIA) –

[Stroke Association](#)

Sickle cell disease – [Sickle Cell Society](#)

Severe mental health illness – [Rethink Mental Illness](#)

Seriously overweight (BMI 40 and above) –

[Public Health England](#)

Other conditions*

Cystic Fibrosis – [Cystic Fibrosis Trust](#)

Multiple sclerosis – [MS Society](#)

COPD – [British Lung Foundation](#)

*Please add additional conditions and organisations as you need; there may be local charities that also offer guidance and support.

Top tips

To support your conversations with patients, it might be helpful to run through the following list of 'Top Tips' that can help you prepare in advance of an appointment / call, or when you're supporting at a vaccination centre / GP practice; there are also tips about ensuring you are supported too!

- 1. Develop your confidence;** it may feel like a big responsibility to support people through the vaccination process. Reading through this pack and the resources available to you, will leave you well equipped to start these conversations.
- 2. Use Motivational Interviewing techniques;** ask simple and non-judgemental questions "How do you feel about the Covid-19 vaccination?"
- 3. Explore peoples worries and concerns;** appreciate that these are their feelings and fears. Talk through the possible causes.
- 4. Help find solutions;** what is stopping them from attending an appointment? Help to find ways around what the issues may be i.e. transport, family pressures, fear of needles etc.
- 5. Planting the seed – introduce information;** if people continue to be hesitant, provide them with information and resources they can return to in their own time. Sometimes people need more time to reflect and decide once they have more knowledge.
- 6. Have information to hand;** create your own pack of resources that will make you feel prepared. You may need to relay a lot of information to people about the vaccination process, or need to know where vaccination sites are etc. Your local area may also have covid-19 vaccine community champions or connector schemes you can link in with, these may be managed by your local authority or voluntary and community services (VCS).
- 7. Take the opportunity to get to know people** such as your colleagues and patients, you'll have a great opportunity when stewarding at vaccination sites. Think about how you may be able to generate Social Prescribing referrals when at vaccine sites (covid-19 safe ways of distributing leaflets, GDPR safe ways of recording referrals on paper etc).
- 8. Keep connected;** ensure to keep in contact with your peer support group, manager and/or supervisor. Maintaining communications with your colleagues and peers is important, don't struggle – reach out.
- 9. Talk through your own concerns;** if you are worried about the vaccine or experience similar challenges to those of your patients, speak to your GP for further information and reassurance.

FAQ's & Key messages

Below is a combined list of frequently asked questions and key messages. This list may evolve over time and you might want to start adding your own experiences to this too; no question is a silly question and often more than one person will be thinking it!

What vaccine for COVID-19 is currently available?

The Pfizer/BioNTech and Oxford/AstraZeneca COVID-19 vaccines are now available. The Moderna vaccine is also being delivered in small scales to a limited number of sites across the country. All three vaccines have been shown to be safe and offer high levels of protection and have been given regulatory approval by the MHRA.

How does the vaccine work?

The vaccine works by making a protein from the virus that is important for creating protection. The protein works in the same way they do for other vaccines by stimulating the immune system to make antibodies and cells to fight the infection.

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 are 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;

FAQ's & Key messages

3. Clinical trials managed to recruit people very quickly as a global effort meant thousands of people were willing to volunteer.

Is the NHS confident the vaccine is 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.

Are there any side effects?

For these vaccines, like lots of others, the MHRA have identified that some people from all demographics might feel slightly unwell, but they report that no

significant side effects have been observed in the millions of people who have now been vaccinated.

All patients from all demographics 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.

Should I have the Oxford/AstraZeneca vaccine if offered it?

Recently there have been reports of an extremely rare condition involving the Oxford/AstraZeneca vaccine and blood clots.

As a precautionary measure while this is being carefully reviewed, the Joint Committee on Vaccination and Immunisation (JCVI) has now advised that it is preferable for adults aged under 30, who don't have underlying health conditions that put them at

FAQ's & Key messages

higher risk of severe COVID-19 disease, to be offered an alternative vaccine when it is their turn to be vaccinated.

For those in this age group who have had already their first dose of the Oxford/AstraZeneca vaccine and had no adverse reactions, they should still come forward for their second dose when invited.

This condition can also occur naturally, and clotting problems are a common complication of COVID-19 infection.

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.

Are there any materials of human or animal origin in the vaccines, are they vegan/vegetarian friendly?

No. There is no material of foetal or animal (No pork, beef or gelatine) origin in any of the vaccines. A detailed review of the vaccines and their ingredients are published on the MHRA's [website](#).

Are there microchips in the vaccine?

No, the vaccines do not contain microchips or any other nano-particles.

Can people pick what vaccine they want?

No. Any vaccines that the NHS will provide will have been approved because they pass the MHRA's tests on safety and efficacy, so people should be reassured that whatever vaccine they get, it is safe and worth their while.

FAQ's & Key messages

Can I get one privately?

No. Vaccinations are only available through the NHS. You can be contacted by the NHS, your employer, or a GP surgery local to you, to receive your vaccine. Remember, the vaccine is free of charge.

Why are you postponing second doses?

The UK [Chief Medical Officers have agreed](#) 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.

What happens if a person has the first jab but not the second?

Both vaccines have been authorised on the basis of two doses because the evidence from the clinical trials shows that this gives the maximum level of protection.

The evidence doesn't show any risk to not having the second dose other than not being as protected as

you otherwise would be. We would urge everyone to show up for both of their appointments for their own protection as well as to ensure we don't waste vaccines or the time of NHS staff.

Can you give Covid-19 to anyone if you have the vaccine?

The **vaccine cannot give you COVID-19 infection**, and a full course will reduce your chance of becoming seriously ill. We do not yet know whether it will stop you from catching and passing on the virus, but we do expect it to reduce this risk. So, it is still important to follow the guidance in your local area to protect those around you.

Were the trial participants reflective of a multi-ethnic population?

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

FAQ's & Key messages

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.

For the Moderna trial, 9.7% of participants were African American, 4.6% Asian and 19.7% Hispanic/Latino.

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

Were the vaccines tested on high-risk groups?

For both vaccines trial participants included a range of those from various ages, immune-compromised and those with underlying health conditions, and both found the efficacy of the vaccine translates through all the subgroups.

Does the Covid-19 vaccine affect fertility?

There is no evidence that the vaccine affects fertility. Most people who contract COVID-19 will develop antibody to the spike and there is no evidence of fertility problems after Covid-19 disease.

How long will my vaccine be effective for?

We expect these vaccines to work for at least a year – if not longer. This will be constantly monitored.

Are there any groups that shouldn't have the vaccine?

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

The advice, published in Public Health England's Green Book, advises that pregnant women should discuss the risks and benefits of vaccination with their clinician, including the latest evidence on safety and which vaccines they should receive.

FAQ's & Key messages

Are there different vaccines for different age groups?

No, the vaccines will be made available for people over the age of 16 years old; and will be administered to people in line with the up-to-date list of Covid-19 vaccination first [phase priority groups](#); which includes the Risk Group and Clinical conditions list.

Do vulnerable people travel to get the vaccine or does it come to them?

We are planning a mixed approach to ensuring that people who are eligible can get the vaccine safely. For care home residents and those who can't leave home, this will involve roving community teams coming to them.

What time will the opening hours of vaccination centres be?

Standard opening times for vaccination centres will be 8am – 8pm, seven days a week. To test the system and make sure the space is safe for visitors and staff, most vaccination centres in the first day or days may open slightly later.

What if people can't get to the Vaccination Centre?

People who are housebound will be contacted by their GP services about alternative ways to get vaccinated. People can also wait until more locations closer to where they live become available. The NHS will follow up with people that haven't booked their appointment, as a reminder.

Can healthcare workers use the National Booking System to book their vaccination?

The self-referral route for eligible frontline health and social care workers will be reinstated on the National Booking System by 19th April, and local systems are also asked to continue to ensure local provision for all eligible health and care workers.

Further Reading

If you want to read through other resources in addition to the [NHS England and Public Health England guidance and information](#); you may want to check out the following organisations and websites:

[The British Society for Immunology](#)

The [British Society for Immunology](#) and the Academy of Medical Sciences (AMS) have rapidly convened an expert group to collate and review what is currently known about the immunology of COVID-19, and to identify immunology research priorities in response to the COVID-19 outbreak.

[Celebrate Vaccines](#) is the British Society for Immunology's campaign to champion the critical role of vaccination and vaccine research in advancing global health. Our goal is to use the expert voice of the immunology community to strengthen public understanding of vaccines, supporting everyone to make informed decisions about vaccination.

[Health Education England](#)

[Covid-19 Vaccination](#) – An e-learning resource designed to support the training of the health and care workforce involved in delivering the Covid-19 vaccination programme.

[Joint Committee on Vaccination and Immunisation \(JCVI\)](#) – The JCVI advises UK health departments on immunisation.

[Department of Health and Social Care](#)

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

[Royal College of Nursing](#)

Covid-19 and vaccination FAQs

[London School of Hygiene & Tropical Medicine](#)

Vaccine FAQs

Further Reading

University of Oxford

[Vaccine Knowledge Project](#)

Vaccine Confident Project

[Vaccine Confidence Project](#) and [videos](#)

Anxiety UK

[Needle and Injection Phobia booklet](#)

Doctors of the world

Translated health information – [Covid-19 guidance available in over 60 languages](#)

NHS England & Improvement

Covid-19 vaccination programme – [Primary Care Guidance](#)

Public Health England

Addressing health inequalities – [Health Equity Assessment Tool \(HEAT\)](#) in conjunction with [Health equity audit guide for screening providers](#)

[and commissioners](#) provides a helpful framework to identify practical action to systematically address health inequalities in the vaccination roll out and communications strategy.

Inclusion Health Groups

You can have an impact on health by ensuring that your relationship with individuals from inclusion health groups is appropriate to allow you to provide the necessary support read through [Inclusion Health: Applying 'All Our Health'](#) the for more information.

Shared practice

A number of Trusts have shared the steps they have taken to increase uptake of the Covid-19 vaccine amongst their staff. These case studies capture key activities, challenges and learnings.

You can access these on the COVID-19 Vaccination Programme Futures website, [click here](#).

To all who read and use this resource pack...

“We value your time and appreciate your support to ensure people within your community feel confident and understand the vaccine programme”

To all who have supported the creation of this resource pack...

“Thank you for sharing and connecting us to the valuable resources and programme teams that helped to shape this document”



Full Links & References in Resource Pack

If you have problems with accessing any of the hyperlinks in this pack, please use full links below:

Cover

https://www.healthylondon.org/our-work/personalised_care/socialprescribingresources/social-prescribing-link-workers/

Prescribing Link Worker

<https://www.england.nhs.uk/coronavirus/publication/managing-coronavirus-covid-19-in-general-practice-sop/>

<https://future.nhs.uk/socialprescribing/view?objectId=90305157#90305157>

<https://future.nhs.uk/socialprescribing/grouphome>

Covid-19 Vaccines

<https://coronavirusresources.phe.gov.uk/covid-19-vaccine/resources/>

<https://coronavirusresources.phe.gov.uk/covid-19-vaccine/resources/nhs-staff-comms-toolkit/>

<https://www.gov.uk/government/publications/regulatory-approval-of-pfizer-biontech-vaccine-for-covid-19>

<https://www.gov.uk/government/publications/regulatory-approval-of-covid-19-vaccine-astrazeneca>

<https://www.gov.uk/government/publications/regulatory-approval-of-covid-19-vaccine-moderna>

<https://www.gov.uk/government/publications/regulatory-approval-of-covid-19-vaccine-janssen>

<https://khub.net/documents/135939561/390853656/Impact+of+vaccination+on+household+transmission+of+SARS-COV-2+in+England.pdf/35bf4bb1-6ade-d3eb-a39e-9c9b25a8122a?t=1619601878136>

<https://www.gov.uk/government/news/one-dose-of-covid-19-vaccine-can-cut-household-transmission-by-up-to-half>

<https://www.immunology.org/public-information/guide-vaccinations-for-covid-19>

Differences between Covid-19 Vaccines

<https://www.pfizer.co.uk/behind-science-what-mrna-vaccine>

<https://www.gavi.org/vaccineswork/what-are-viral-vector-based-vaccines-and-how-could-they-be-used-against-covid-19>

<https://www.research.ox.ac.uk/Article/2020-07-19-the-oxford-covid-19-vaccine>

<https://www.immunology.org/public-information/guide-vaccinations-for-covid-19>

What to expect after the Covid-19 Vaccine

<https://www.gov.uk/government/news/uk-secures-extra-60-million-pfizerbiontech-covid-19-vaccines>

Full Links & References in Resource Pack

<https://www.gov.uk/government/publications/covid-19-vaccination-what-to-expect-after-vaccination/what-to-expect-after-your-covid-19-vaccination>

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/951769/PHE_COVID-19_vaccination_guide_what_to_expect_after_your_vaccination_English_v2.pdf

<https://www.immunology.org/public-information/guide-vaccinations-for-covid-19>

<https://www.gov.uk/coronavirus>

<https://www.gov.uk/government/publications/england-lockdown-stay-at-home-posters>

<https://coronavirus-yellowcard.mhra.gov.uk/>

Vaccination appointments

<http://www.nhs.uk/covid-vaccination>

<https://www.gov.uk/government/collections/covid-19-vaccination-programme#leaflets-and-posters>

<https://coronavirusresources.phe.gov.uk/covid-19-vaccine/resources/nhs-staff-comms-toolkit/>

<https://www.gov.uk/government/publications/covid-19-vaccination-care-home-and-healthcare-settings-posters/covid-19-vaccination-first-phase-priority-groups>

<https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/who-can-get-the-vaccine/>

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https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/965177/COVID-19_vaccination_programme_guidance_for_healthcare_workers_26_February_2021_v3.4.pdf

<https://www.nhs.uk/nhs-services/gps/how-to-register-with-a-gp-surgery/>

<https://www.publichealth.hscni.net/publications/covid-19-vaccination-record-card>

How people access the vaccine

<https://www.england.nhs.uk/coronavirus/publication/vaccination-sites/>

<https://www.gov.uk/government/publications/covid-19-vaccination-why-you-are-being-asked-to-wait>

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/951774/PHE_COVID-19_vaccination_guide_why_do_I_have_to_wait_English_v2.pdf

<https://www.actionfraud.police.uk/covid19>

<https://www.bbc.co.uk/news/av/technology-46149888>

<https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-vaccinations/>

Full Links & References in Resource Pack

Vaccine hesitancy

https://www.euro.who.int/_data/assets/pdf_file/0004/329647/Vaccines-and-trust.PDF

<https://www.guysandstthomas.nhs.uk/resources/patient-information/all-patients/overcoming-your-fear-of-needles.pdf>

Key concerns and communicating with your communities

<https://future.nhs.uk/>

<https://future.nhs.uk/NationalCOVID19VaccineEquality/grouphome>

<https://www.immunology.org/coronavirus/connect-coronavirus-public-engagement-resources>

BAME and Religious communities

https://www.hsj.co.uk/coronavirus/theyre-not-going-to-offer-us-anything-good-first-the-reasons-for-covid-hesitancy-in-black-communities/7029416.article?mkt_tok=eyJpIjoiTnpBNFpEazJOMk0xVWw1NMClSnQiOiJHQLJqeXo5dlwwNWpCUzIzanJIT1EzclRCbFRKUmlCeG54WUNEcDc3MlRlajgwUlwwdXErU0d4UGVNbnJnUVVwK2RHTnVWME1VQUJXVXZiV0VURFwwTdVaFU5WDJkWXNENFM4MVphNU5SSmRiZ1NrN3REa1RianM0R1N1ODJqK0ozZnlfQ%3D%3D&adredir=1

<https://britishima.org/pfizer-biontech-covid19-vaccine/>

<https://britishima.org/covid19-vaccine-az/>

<https://britishima.org/moderna-covid19-vaccine/>

<https://www.youtube.com/watch?v=cbYr2Zc8N2I>

<https://britishima.org/operation-vaccination/hub/statements/#FAST>

<https://rabbiscer.org/wp-content/uploads/2020/12/CER-Vaccination-.pdf>

<https://www.bod.org.uk/board-of-deputies-president-praises-vaccine-teams-as-roll-out-begins/>

<https://www.cbcew.org.uk/home/our-work/health-social-care/coronavirus-guidelines/update-on-covid-19-and-vaccination/>

https://www.churchofengland.org/sites/default/files/2020-12/COVID_19_Vaccines_update_v1.0.pdf

<https://www.interfaith.org.uk/news/faith-communities-and-covid-responding-together-at-a-time-of-need-a-statement>

<https://yourneighbour.org/vaccine>

<https://www.gov.uk/government/publications/covid-19-vaccination-guide-for-healthcare-workers>

<https://www.gov.uk/government/publications/covid-19-vaccination-guide-for-older-adults>

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Full Links & References in Resource Pack

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Full Links & References in Resource Pack

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<https://www.brainandspine.org.uk/coronavirus-covid-19/>

<https://www.sps.nhs.uk/articles/using-covid-19-vaccines-in-patient-taking-immunosuppressive-medicines#:~:text=Use%20in%20patients%20taking%20immunosuppressive,be%20vaccinated%20against%20COVID%2D19.>

<https://www.stroke.org.uk/finding-support/information-coronavirus-stroke-survivors>

<https://www.sicklecellsociety.org/coronavirus-and-scd/>

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Full Links & References in Resource Pack

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<https://www.mssociety.org.uk/care-and-support/ms-and-coronavirus-care-and-support>

<https://www.blf.org.uk/support-for-you/coronavirus>

FAQs & Key messages

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Further Reading

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<https://www.immunology.org/celebrate-vaccines/public-engagement/videos>

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

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