



# The NHS COVID-19 Vaccination programme

Communications Toolkit: pull-out guide for care homes phase

22 Dec 2020 – First edition

## Using this document

This document contains information primarily to support communications teams working in ICS/STPs and CCGs in rolling out their COVID-19 vaccination campaign to staff and residents in care homes.

We would encourage you to share this pack with your Local Authority social care partners and directly with care homes in your area. It will also be shared nationally with representative bodies.

This Communications Toolkit includes:

- Narrative and key messages
- Template letter for care home managers
- Links to campaign materials and consent forms
- FAQs
- Useful links and resources

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

## Narrative for driving uptake of COVID-19 vaccine in care homes

### **Short narrative (residents)**

Following extensive trials, an effective vaccine for COVID-19 with a good safety record is now available. Older people in care homes have been identified as the top priority group for this vaccine by the Joint Committee on Vaccinations and Immunisations.

Strict approval processes mean that all approved vaccines have met strict safety standards and are our best defence against the virus.

Getting vaccinated means protecting yourself from the virus. It is the best chance we have of getting back to normality and reducing the restrictions on seeing your family and friends.

You cannot catch COVID-19 from the vaccine, and two doses will reduce your chance of becoming seriously ill.

It will take some time for your body to build up protection, so for the moment you will still need to follow the guidance around hand washing and social distancing.

The free vaccine will protect you against COVID-19 and reassure others that they are not putting you at risk.

The NHS is getting the vaccine to you so that you don't need to leave your home.

### **Short narrative (staff)**

Following extensive trials, a safe and effective vaccine for COVID-19 is now available. Care home staff and residents are among the first to be offered vaccinations.

Strict approval processes mean that all approved vaccines have met strict safety standards 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 residents.

You cannot catch COVID-19 from the vaccine, and two doses will reduce your chance of becoming seriously ill.

If you are a woman of childbearing age, you can have the vaccine, but should wait for two months after your second dose to get pregnant. If you are pregnant or breastfeeding, you should wait until after you have had your baby or until you have finished breastfeeding.

It will take some time for your body to build up protection, so you will still need to follow the guidance in your workplace, and follow general advice at work, at home and when you are out and about. It is hoped that eventually when enough people have been vaccinated this will change.

You will be informed as to whether you are getting your vaccination in the care home where you work or in a nearby hospital or community setting. Your second vaccination will take place at the same location as your first.

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

### **Key messages**

- A safe and effective vaccine for COVID-19 is now available
- Care home staff and residents will be amongst the first to receive the vaccine.
- Getting vaccinated means protecting yourself from the virus so you can keep safe and be there for your family, friends and people you care for.
- The COVID-19 vaccination has been approved by MHRA, the official UK regulator, like all other medicines and devices.
- The vaccine has undergone months of rigorous testing, with more than 40,000 people, and strict approval processes mean we can be sure that the vaccine is safe and effective.
- 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 now have a way of transporting the vaccine so it can go in to care homes.
- The COVID-19 vaccine will not protect you against flu. All social care workers and older people should have the flu vaccination, which is free through the NHS.
- Women of childbearing age should avoid pregnancy for two months after the second dose of the vaccine.
- There are no safety concerns with the vaccine, but it is a standard precautionary measure to make sure that women avoid pregnancy after having the vaccine for 2 months and that pregnant or breastfeeding women, should wait until after they have completed the pregnancy or breastfeeding.

### **[Collection of staff details for the national flu and COVID-19 vaccination programme](#)**

To ensure that care home staff are able to access flu and COVID-19 vaccines as a priority in any setting, we are asking employers to collect and securely provide their NHS numbers. This allows the NHS to tag them as care home workers on the national system we are using to invite and keep track of who has been vaccinated.

A letter to care homes providers setting out setting out the requirement and legal basis for the collection off staff details to support the national flu and COVID-19 vaccination programme is in development with representative bodies and will be issued separately as soon as possible.

## [Template letter for care home managers \(from Primary Care Network\)](#)

This can be adapted as appropriate to make it relevant to your local situation. It is envisaged that this will be sent by the Primary Care Network to care home managers so the detail around the delivery of the vaccination can be included.

Dear **[care home manager]**,

I am pleased to inform you that we will soon be making the COVID-19 Pfizer BioNTech vaccine available at **[care home name]**. Vaccinating care home staff and residents to protect them from COVID-19 is a national priority and we need to work with you to organise and schedule the vaccinations.

This COVID-19 vaccination has received MHRA approval and we are now ready to transport the vaccine so that it can be delivered directly to care home staff and residents.

Thank you for all your work throughout the pandemic and the challenges it has presented. We know this has been very demanding.

By providing vaccinations, your care home will be playing its part in protecting all residents and staff from catching and spreading the virus, as well as helping the national response to the pandemic.

By local arrangement with the Primary Care Network (*localise as appropriate*) staff can receive the vaccination at your care home or in a hospital or community setting. All residents will receive the vaccination in the care home.

### **How can I prepare?**

#### 1. Leaflets

Public Health England (PHE) have developed leaflets to support the vaccination programme and inform patients and staff about the vaccine. You should have received the following materials:

- Guide for older adults;
- What to expect after vaccination;
- Guide for healthcare workers (if vaccinating staff)
- Guide for social care workers – for social care staff
- Guide to COVID-19 vaccination for women of childbearing age, who are pregnant or currently breastfeeding.

Please ensure that these leaflets are made available to residents and staff. Although fully trained staff from the Primary Care Network will be administering the vaccine, it is advisable that your staff are familiar with the contents of the leaflets to answer questions from residents.

#### 2. Consent

Three separate forms have been developed to obtain informed consent or agreement for residents prior to the vaccine being administered. We will need your support in obtaining consent as soon as possible, preferably directly by residents, from those who have power of attorney, or agreement from relatives. There is a separate consent form for care home staff

When considering a decision made in someone's best interests, the past views of the person should be taken into account. These could be obtained from family, friends, carers or anyone else who has an interest in the welfare of the person, including their GP or other paid health or social care workers. The COVID-19 vaccination 'relative's view' form for a care home resident can be used by someone acting in the best interests of the person.

Further information on consent and best interest decisions are available in the [guidance for healthcare practitioners](#) and in the [COVID-19 vaccination training slide set](#).

### 3. Environment

To deliver the vaccine safely we need a suitable space and setup for all parts of the vaccination process, including:

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

You will also need to ensure a COVID safe environment when residents are moving round the home for vaccination.

We will have a range of measures in place to keep our team, your staff and residents safe from COVID-19. Our team will be wearing the necessary protective equipment and there will be regular cleaning and disinfecting in between vaccinations.

Best wishes,

**NAME**

**NB: optional paragraph for care homes where some staff have already received vaccinations.**

We are aware that some staff within your home have already received the vaccine through the hospital hub or the community facilities. You will need to ensure that only those staff who are yet to receive the vaccination present themselves to the vaccination team. It is important that staff are not under the impression that this is the second dose of the vaccine as they will need to return to the same facility where they received their first vaccination to have access to the second.

## Campaign materials

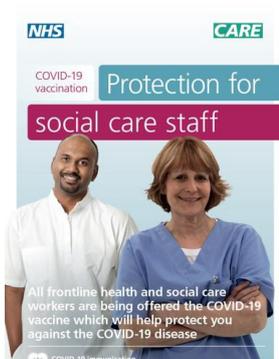
To help NHS organisations and communications teams with rolling out a COVID-19 vaccine campaign to care homes, there is a suite of free print, digital and social campaign materials available on [PHE's Campaign Resource Centre](#).

Various versions of the leaflets and posters have been developed, with different call-to-actions to be used depending on vaccine availability. Large print, braille and Easy read versions and translated versions are also available for download. There will be BSL videos for the 'adults', 'what to expect' and 'pregnancy' leaflets shortly.

You can also place orders for these resources via the [health publications website](#).

The leaflets to go in to care homes for the vaccination programme are:

### COVID-19 Social care worker leaflet.

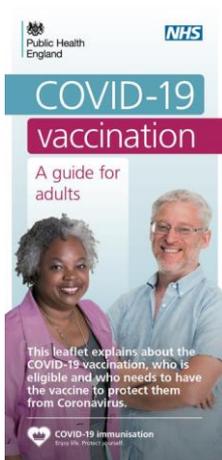


This should be given in advance of the appointment so that the staff can read and consider ahead of the vaccination appointment. Printed copies should be sent to care homes who will be vaccinating staff. It should also be accompanied by the [pregnancy leaflet](#).

Product code for ordering from Health Publications website:  
COV2020341

### COVID-19 Vaccination – a guide for adults

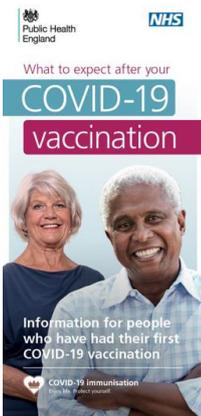
This leaflet is for all older adults in the first priority cohort and should be given in advance of the appointment, so that it can read and considered ahead of the vaccination appointment. Printed copies should be sent to all care homes.



Product code for ordering from Health Publications website:  
COV2020351

Large print version product code: COV2020351LP

## What to expect after your COVID-19 vaccination



This leaflet should be given to everybody who has had a COVID-19 vaccination.

Product code for ordering from Health Publications website:  
COV2020307

Large print version product code: COV2020307LP

## A guide to the COVID-19 vaccination – for women of childbearing age, those currently pregnant, planning a pregnancy or breastfeeding



This should be given to social care worker with the main leaflet (COV2020341) in advance of the vaccination appointment

Product code for ordering from Health Publications website:  
COV2020374

Large print version product code COV2020374LP

These are also available to download [here](#) as well as versions translated in to a number of different languages, (available to order free of charge) Large print, Braille and Easy Read versions.

## Consent forms

There are three consent forms available for residents, depending on the circumstances of the individual. There is an additional consent form for care home staff.

The COVID-19 vaccination consent form letter templates are available in different software versions and can be downloaded from the [Health Publications website](#) and adapted to suit the needs of local healthcare teams.

- [COVID-19 consent form](#) – resident able to self consent. Product code COV2020365
- [COVID-19 vaccination consent form](#) – care home resident for relative with power of attorney. Product code COV2020367
- [COVID-19 agreement](#) – relatives views agreement form. Product code COV2020368
- [COVID-19 vaccination consent form](#) for social care staff. Product code COV2020370.

Care homes can order free stock of the leaflets and consent forms directly but should liaise with the immunisation team in their Primary Care Network to make sure you are not duplicating the order.

They will need to register with the Health Publications website to place an order.

<https://www.healthpublications.gov.uk/Home.html>

### **Immunisation publications and digital assets**

Additional leaflets, posters and immunisation resources on the COVID-19 vaccine are also available. This includes:

- Why do I have to wait for my COVID-19 vaccine - flyer
- Get ready for your COVID-19 vaccination - health and social care poster
- Record card
- Get ready to have your COVID-19 vaccination posters (aimed at residents and older adults)
- Get ready to have your COVID-19 poster - empty belly – aimed at HCWS and COVID-19 clinic poster (empty belly for address of care home vaccination session) poster
- [COV2020315 Get ready for your COVID-19 vaccination poster – features health and social care Workers](#)

These resources are available for download [here](#). You can also place orders for these resources now via the [health publications website](#).

### **Supporting the ongoing monitoring of the vaccine - the MHRA Yellow Card Vaccine Monitor scheme**

The MHRA are keen to get health and care 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.



VaccineMonitor  
Letter Healthcare prof

## FAQs

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

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 currently being assessed by the MHRA.
- 7 million doses of the Moderna vaccine, which is also being assessed by the MHRA.

Based on two doses of the Pfizer vaccine per person this would run to a maximum of 20m people. But we don't have all of these doses from day 1 or even in the first month – this is going to be a long-term programme and we are hopeful we will get other vaccines along the way.

It will likely take until at least Spring until all high risk groups have been offered a Covid vaccine.

### **Why are care home 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, and the risk of passing it on to vulnerable groups.

### **How do care home workers and residents get the vaccine?**

The NHS will offer vaccinations using different models for different groups who are eligible to receive it. For care home residents and workers, GP-led teams are delivering the vaccines to care homes through mobile units. This is in addition to hospital hubs and local vaccination services which have already been vaccinating some residents and staff.

We are keeping the operational plans under constant review and if further vaccines are licensed by the Medicines & Healthcare products Regulatory Agency (MHRA) we will examine the use of these for care home residents.

### **I am in a Tier 4 area. Will vaccines still be provided/should I still attend my appointment?**

Yes. Getting the COVID-19 vaccine, or any other vaccine, is an important medical appointment and so is within the rules wherever you live. Vaccinations will continue as normal in all areas regardless of what Tier they are in. If you have booked or are offered an appointment, please attend it. The place that you choose to have your vaccine will keep you safe from COVID-19 through a range of measures including cleaning and disinfecting and having social distancing in waiting areas. Please also wear a face covering to your appointment. You should also take the usual steps to minimise your risk as you travel to your appointment.

### **Will the vaccine work with the new strain?**

There is no evidence currently that the new strain will be resistant to the vaccine 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 vaccine. Viruses, such as the winter flu virus, often branch into different strains but these small variations rarely render vaccines ineffective.

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

The MHRA have said this vaccine is highly effective, 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.

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

If you're a frontline health and care worker, 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 care home staff or residents don't want the jab?**

There are no plans for a COVID-19 vaccine to be compulsory. We are confident that the vast majority of staff and residents will choose to protect themselves by getting the vaccine.

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

Yes, the vaccine does not contain any meat derivatives or porcine products.

If, and when, further vaccines are successful, we will publish information about known allergens or ingredients that are important for certain faiths, cultures and beliefs.

### **Will care home staff and residents 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?**

The COVID-19 vaccination is not recommended for women who are pregnant or those with a history of immediate allergic reaction to a vaccine, medicine or food. The MHRA have also explicitly advised that a 15min observation period is part of the vaccination process.

### **Can staff 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, 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 is safe?**

Yes. The NHS will not offer any Covid-19 vaccinations to the public until independent experts have signed off that it is safe to do so.

The MHRA, the official UK regulator, have said this vaccine is 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.

The MHRA recommend certain groups do not take the vaccine, including women who are pregnant or breastfeeding, and those with certain types of allergies.

### **How are you raising awareness of the vaccine with the health and care workforce?**

The Cabinet Office has 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?**

Like all medicines, vaccines can cause side effects. Most of these are mild and short-term, and not everyone gets them. Even if you do have symptoms after the first dose, you still need to have the second dose. You may not be protected until at least seven days after your second dose of the vaccine.

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

As with all vaccines, appropriate treatment and care will be available in case of a rare anaphylactic event following administration.

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.

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

You are required to have two doses of the COVID-19 vaccine, a minimum of 21 days apart

### **I had my first does of the vaccine at my local hospital, can I get my second dose at the care home where I work?**

You should get both doses in the same place. This is so we can avoid people missing their second dose.

### **What consent needs to be obtained before care home staff and residents are vaccinated?**

Decisions around vaccinations should be made on the basis on informed consent. A care home will be supported and supplied with consent forms in advance of the vaccination taking place.

Further details can be found at Annex D of the [Standard Operating Procedure for COVID-19 Deployment in Community Settings](#).

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

Yes. 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.

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

The Pfizer vaccine has been authorised on the basis of two doses three weeks apart because the evidence from the clinical trials shows that this gives the maximum level of protection. The evidence doesn't show any direct risk to not having the second dose, but not getting it means you will not be get the full level of protection.

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.

### **How were vaccines developed so quickly?**

Medicines including vaccines are highly regulated – and that is no different for the approved COVID-19 vaccines.

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 run 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 for the Pfizer vaccine involved over 43,000 participants and managed to recruit people very quickly as a global effort meant thousands of people were willing to volunteer.

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

The Public Assessment Report contains all the scientific information about the trial and information on trial participants. [You can read it in full here](#) or [read a summary of the report here](#).

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

There is no evidence the vaccine will work differently in different ethnic groups.

### **Was it tested on high risk groups?**

The trial sample included a those from various ages, immune-compromised and those with underlying health conditions. Analysis of data by health condition is available in the [Public Assessment Report](#). The efficacy of the vaccine translates through all the subgroups.

### **Does the vaccine include any parts from foetal or animal origin?**

There is no material of foetal or animal origin in the Pfizer BioNTech vaccine. All ingredients are published in healthcare information on the website and are included in the [Public Assessment Report](#).

### **Can the vaccine alter your genetic material?**

There is no evidence to suggest that individual genetic material will undergo an alteration after receiving the vaccine

### **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 long will the Pfizer 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?**

There are MHRA recommendations for some groups to not have the vaccine – these are precautionary due to a lack of data, rather than because there is an expected issue.

These include;

- Pregnant women
- Women who are breast feeding
- Women planning pregnancy within the next few months
- People with history of a severe allergy to food items or medicines i.e. those who carry epi pens including those with contraindications to penicillin based medicines

### **Does the vaccine work on those taking immune suppressants?**

Although the vaccine was not tested on those with very serious immunological conditions, the vaccine has been proven to be very effective and it is unlikely that the vaccine will have no effect at all on these individuals.

There may be a very small number of people with very complex or severe immunological problems who can't make any response at all – but the vaccine should not do any harm to these individuals. Individuals meeting these criteria may want to discuss the vaccine further with their specialist doctor.

### **Who will be delivering vaccines?**

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

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

**Are they qualified? What is the training?**

PHE and HEE have compiled comprehensive training which includes anaphylaxis and Basic Life Support training, injection administration, training on vaccines in general and the specific ones that will be used. Importantly new vaccinators will be supervised and assessed by senior clinicians to ensure both their safety and of course the safety of the people they are vaccinating – just like any other vaccinator.

## 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:

[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](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)

Priority groups for coronavirus (COVID-19) vaccination: advice from the JCVI:

<https://www.gov.uk/government/publications/priority-groups-for-coronavirus-covid-19-vaccination-advice-from-the-jcvi-2-december-2020>

COVID-19 local vaccination services deployment in community settings:

<https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/12/C0910-COVID-19-Vaccine-Deployment-in-Community-Settings-LVS-SOP-10-December-2020.pdf>

## Resources to support care home staff.

Information is available on the nhs.uk website and this covers;

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

- Who can get the Covid-19 vaccine
- Advice if you're of childbearing age, pregnant or breastfeeding.
- How safe is the Covid-19 vaccine
- How effective is the Covid-19 vaccine
- Side effects

## Social media

Care homes are encouraged to share their stories of staff and residents being vaccinated on social media. Including the hashtag #CovidVaccine and tagging in @NHSEngland, @AgeingWellNHS and your local CCG will allow NHS communications teams to amplify them.

NHS organisations are also posting messages about the safety of the vaccine so please encourage members to retweet these.

## Appendix A: JCVI healthcare worker definition

The Joint Committee of Vaccination and Immunisation (JCVI) has identified frontline healthcare workers as the initial priority group to receive the vaccine.

The following term for healthcare worker is used by the Joint Committee of Vaccination and Immunisation (JCVI) as,

**“all individuals working in healthcare regardless of their direct employer.”**

This definition makes no distinction on healthcare workers based on job role (i.e. there is no distinction between frontline/patient facing and back office staff) and includes laboratory staff, students, trainees and volunteers working in healthcare.

Regions and local systems should prioritise the vaccination of healthcare workers based on protecting individuals at highest risk of exposure, local expediencies of delivery and minimising wastage.