

**Some information is already online - published factsheet:**

<https://gov.wales/covid-19-vaccine-update>

## **Q&A**

### ***WHY YOU SHOULD GET THE VACCINE***

#### ***Why are vaccines important?***

Vaccines teach your immune system how to protect you from diseases. It's much safer for your immune system to learn this through vaccination than by catching the diseases and attempting to treat them.

Vaccines can reduce or even eradicate some diseases, if enough people are vaccinated. Since vaccines were introduced, diseases like smallpox and polio that used to kill or disable millions of people are gone from the UK.

Most people have said they would get a COVID-19 vaccine when it's available.

The long term response to the pandemic requires a safe and effective vaccine to be available for all who need it. It's a way to keep friends and family safe, potentially leading to lifting of restrictions.

#### ***I've had COVID already/ tested positive for antibodies do I need to be vaccinated?***

You should get vaccinated. We do not yet know the length of immune response in those who've had the disease. When you have the new COVID-19 vaccine, you will reduce the spread of this deadly virus and help to protect yourself and others.

#### ***There is a perceived idea in some people that the virus is less of a threat than it was: I don't know anyone who's had COVID, so why do we need a vaccine?***

The number of people worldwide who have died with COVID-19 has passed one million<sup>1</sup> with many regions still reporting surging numbers of new infections.

In Wales, there have been many deaths and thousands more people hospitalised, or with ongoing health complications.

People continue to get infected, and once the virus starts to spread it can do so rapidly. Even if you, your family or friends haven't experienced it first hand, that doesn't mean it isn't a threat. Protect your family and others. Being vaccinated will help to protect you and reduce the spread of this deadly virus.

#### ***What about treatments, are there effective ways to treat COVID?***

There are some treatments that have been proven to make a difference, for example antiviral drug remdesivir can reduce the length of illness. Two steroid drugs,

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<sup>1</sup> <https://www.ecdc.europa.eu/en/geographical-distribution-2019-ncov-cases>

dexamethasone and hydrocortisone, have been shown to save lives but only in people who are seriously ill in hospital.

It would be better to prevent the illness, rather than get it and treat it. A vaccine can help stop you getting it, lessen the impact of the disease and slow it spreading. This will help stop others getting it and passing it on.

***If I have the vaccine will I be immune for life? / Can I still catch COVID after I've been immunised?***

Duration of protection remains unknown, and further doses may be necessary.

***Will the vaccine be free if I'm in a priority group? Will it be free if I'm not?***

The vaccine will be provided free through the NHS. It may take a while to get to everybody, but, when you are invited, make sure you get yours.

***Will other measures (social distancing/ face coverings/ lockdowns) still apply to me if I've had the vaccine?***

Yes, you should still act to prevent the spread of coronavirus in the community and stick to the regulations.

***I have contact with people in eligible groups, should I let them know the vaccine is coming?***

If you're a doctor, nurse, care worker or in a patient-facing role, as well as being likely to be prioritised for vaccination, you have an important role in offering information on vaccines to other people. People may seek reassurance that vaccines are safe and effective. As well as the information in this document, patient information will be shared with more detail on individual vaccines.

## **SAFETY/ EFFICACY**

### ***Can we trust a vaccine that's been rushed through?***

For a vaccine to reach the general public it will have to work and be safe.

There may be a misconception that vaccine research takes a long time but it isn't the research that takes the time – it's all the steps beforehand, like getting funding and approval. What's sped up in the development of a COVID-19 vaccine is the funding. The UK Government funded trials to get them up and running quickly.

The Medicines and Healthcare Products Regulatory Agency (MHRA) and Medicines Research Authority have sped up the process of approval – things like administrative paperwork that used to take months is now being done in days. This is what's brought down the time for delivery of the clinical trials.

Processes have been streamlined and run in parallel. The length of the trials themselves have not been shortened, and the usual safety measures remain in place and high standards must still be met.

It has also been enabled by new technology, including the ability to rapidly manufacture vaccines. And supply – the vaccine is being produced already so that as soon as it's known to be safe and effective it can be made available.

### ***Are people going to be administering/ receiving an unlicensed vaccine, and what does that mean?***

For a vaccine to be offered, it will have been proved to be safe and to work.

A vaccine that is needed to protect public health in an emergency situation is going to be unlicensed, simply because the pharmaceutical companies haven't had time to get the necessary permissions to make it licensed.

Unlicensed does not mean untested. Unlicensed vaccines are already used in the UK in some situations, but only when tests have shown them to be safe.

The licensing process can take weeks or even months. This happens after the trials are complete, which usually means the vaccine has already been tested on thousands of adults. If a vaccine is deemed safe and effective, it can be put to use while the administrative side of the licensing process is underway.

Licensing is when experts within the national Medicines and Healthcare products Regulatory Agency review the results of the trials. The standards of vaccines generally have to be much higher than those for medication to treat illnesses, as vaccines are usually given to healthy people to prevent disease.

The UK Government has consulted on plans which propose to make the rules around fast tracking unlicensed vaccines stricter, not looser.

### ***How will I be sure the vaccine is safe with my health conditions?***

Some individuals may consider themselves more vulnerable to side effects or negative effects from the vaccine.

When it is confirmed which vaccines will be used, we will be open and transparent about characteristics of each vaccine and details of which vaccines will be most suitable for each group.

Doctors, nurses and vaccinators will be fully informed of vaccine characteristics, effectiveness and risks. Individuals are advised to discuss any concerns when they are invited to be vaccinated.

Information will be provided to people before vaccination (and will be available online) to reassure about safety and allow informed decisions.

***What is the recommendation if I'm pregnant or if I'm planning to get pregnant?***

Advice isn't available on pregnancy yet. When the very first vaccine becomes available, it is unlikely that there will be evidence yet from trials including pregnant women. Even if there are insights from women who become pregnant in the large trials, it's still unlikely that pregnant women will be among the first to get the vaccine.

By early 2021, more data will be available on COVID's effects in pregnancy. That evidence is important because it tells us about risk. If the virus presents a major risk to pregnant women, then it's possible that pregnant women might be offered a vaccine sooner.

***What happens if I experience side effects/ adverse or unexpected events, how do I report it?***

Vaccines are very safe. As with all medicines, side effects can occur after getting a vaccine. However, these are usually very minor and of short duration, such as a sore arm or a mild fever. More serious side effects are possible, but extremely rare. Tests have been done in thousands of adults to ensure the vaccine is safe.

At the point of vaccination, you will receive information about how to report any adverse events. You will be given details of the yellow card system<sup>2</sup> and the name and batch number of the vaccine administered.

It's essential that any events are reported and investigated. The safety of patients/ recipients is paramount.

***What's in the vaccines? Will they have any ingredients which are unsuitable for [religious group/ vegan/ allergies etc]?***

Patient leaflets explaining the different vaccines and ingredients will be developed and information made available to people prior to vaccination so they can make an informed decision.

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<sup>2</sup> <https://yellowcard.mhra.gov.uk/>

### ***Who can get the vaccine?***

Nearly everyone can get vaccinated. However, because of some medical conditions, some people should not get some vaccines, or should wait before getting them.

These conditions can include:

- Chronic illnesses or treatments (like chemotherapy) that affect the immune system;
- Severe and life-threatening allergies to vaccine ingredients, which are very rare;
- If you have severe illness and a high fever on the day of vaccination.

These factors often vary for each vaccine. If you're not sure if you should get the vaccine, talk to your doctor or nurse. They can help you make an informed choice about vaccination.

### ***Will serology be required to confirm immunity?***

This is not expected to be required.

## **ELIGIBILITY**

### ***When will a vaccine be available?***

It's hoped small quantities of a vaccine could be available for those at the highest risk before the end of the year.

There may only be small quantities of a vaccine at first, so it will be offered to those who need it most. Getting enough doses for everybody will take a while after a vaccine becomes available.

### ***Why are some [health and care workers/ people with X condition/ age groups] eligible and not others? Am I/ is my profession eligible?***

To help protect those who need it the most, the vaccine is being offered to groups at highest risk first. As more vaccine becomes available, it will be offered to other people.

The Joint Committee for Vaccination and Immunisation (JCVI) has made recommendations for the provisional prioritisation for COVID-19 vaccines. Wales and other UK administrations will be guided by the recommendations. The advice is based on preliminary information on the vaccines in development, and provisional timelines for vaccine availability, and is subject to change.

The committee strongly agrees that a simple age-based programme will likely result in faster delivery and better uptake in those at the highest risk.

A provisional ranking of prioritisation for persons at-risk is set out below:

- older adults' resident in a care home and care home workers
- all those 80 years of age and over and health and social care workers
- all those 75 years of age and over
- all those 70 years of age and over
- all those 65 years of age and over
- high-risk adults under 65 years of age
- moderate-risk adults under 65 years of age
- all those 60 years of age and over
- all those 55 years of age and over
- all those 50 years of age and over
- rest of the population (priority to be determined)

The prioritisation could change substantially if the first available vaccines were not considered suitable for, or effective in, older adults.

Further detail on eligibility and definitions of health and care workers, and definitions of risk levels, will be provided by the JCVI and this will be clarified in communications.

<https://www.gov.uk/government/publications/priority-groups-for-coronavirus-covid-19-vaccination-advice-from-the-jcvi-25-september-2020/jcvi-updated-interim-advice-on-priority-groups-for-covid-19-vaccination>

***Why aren't high-risk children and young people included in the list?***

Some at-risk young people may be considered for vaccination but as it stands, children are not a high-risk group as they are not generally badly affected by COVID.

***Are people who were shielding included in the priority groups?***

The JCVI's recommendations will include some people within the broader 'shielding' group (over 80s for example) but, as it stands, shielded people are not in the first groups to be vaccinated. The JCVI strongly agrees that a simple age-based programme will likely result in faster delivery and better uptake in those at the highest risk.

The Chief Medical Officer for Wales has written to those in the shielded group with advice on how to reduce their risk of catching or spreading COVID<sup>3</sup>.

***Will black, Asian and minority ethnic (BAME) people or those from areas of deprivation, be among the first to get the vaccine?***

There will be many people from black, Asian and minority ethnic groups, and people from deprived communities, in the early prioritised groups.

As well as age and underlying co-morbid conditions, potential risk factors include deprivation and ethnicity.

Research has shown that people in those groups have been disproportionately affected by COVID-19 with a higher mortality risk or higher likelihood of transmission.

Every effort will be made to get good coverage in black, Asian and minority ethnic groups, in areas of higher socio-economic deprivation, and in areas with outbreaks or high levels of community transmission.

This includes identifying vaccine ingredients which may be a barrier to uptake in some groups.

Plans and communications materials will consider insight and evidence from UK Government, Public Health England, Public Health Wales and other sources.

***Will staff delivering the vaccine also be among the first to receive it?***

Health and social care workers are currently one of the groups that have been identified as a priority for receiving the vaccine.

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<sup>3</sup> <https://gov.wales/sites/default/files/inline-documents/2020-10/letter.pdf>

A final decision on the prioritisation for health and social care workers will be dependent on vaccine characteristics and the epidemiology at the start of any programme.

***I work in a patient-facing role but I'm not in an at-risk group, why am I being prioritised?***

As a health or social care professional, the new COVID-19 vaccine is your best defence against the virus, keeping you healthy, able to work, and secure in the knowledge that you're helping to reduce spreading the virus on to patients, family and friends.

Other measures, including the use of PPE and proper infection control procedure should continue to be used to prevent the spread of the virus.

***I work in a non-patient role, but critical to the NHS response to COVID-19. Why am I not being prioritised for vaccine?***

Some people are more at risk than others of exposure to COVID-19 or serious complications from the virus, which is why the new vaccine is being offered to them first. As more vaccine becomes available, it'll be offered to other people.

***I work for a voluntary sector/private sector delivering front line care, can I also get a vaccine?***

Further detail on eligibility and definitions of health and care workers, and definitions of risk levels, will be provided by the Joint Committee for Vaccination and Immunisation and this will be clarified in communications.

<https://www.gov.uk/government/publications/priority-groups-for-coronavirus-covid-19-vaccination-advice-from-the-jcvi-25-september-2020/jcvi-updated-interim-advice-on-priority-groups-for-covid-19-vaccination>

***Will staff be required to have the vaccine to continue working in certain sectors?***

Mandatory vaccination is not being planned for staff or the public. Vaccination helps to protect you and others, and help to prevent spread of COVID.

***Will there be enough vaccine available to vaccinate the whole population over time?***

The vaccination programme won't cover the whole population as there are no plans to vaccinate under 18s. It may take a while to get to all adults. Those who are most at risk of serious complications are being offered the vaccine first.



## **DELIVERY**

### ***How will I find out if I'm eligible and where to get my jab(s)?***

Correspondence will come from your employer/ health board informing you about the vaccine, where to go and what to do on the day so you can get vaccinated in a convenient, safe setting.

### ***I've got symptoms/ have a positive test result and am due to be vaccinated, should I still go?***

Only well individuals should attend for vaccination. If you are displaying symptoms of COVID-19, other infections, or are self-isolating because of travel or you are a contact of suspected or confirmed COVID-19 cases you should not attend.

### ***Who will be able to administer the vaccine and will there be enough people available?***

Immediate needs are expected to be met by staff who are already involved in vaccination programmes within health boards (e.g. occupational health nurses and Flu Champions/ Peer Vaccinators), as well as recruitment from bank staff, which may include registered staff, voluntary organisations such as St. John's Ambulance and armed forces personnel. Other individuals with relevant skills could be trained as vaccinators.

Vaccines will be delivered by trained and competent immunisers.

The UK government has consulted the public on whether to change the rules around who can administer certain vaccines, which may include some people who don't normally administer them, including some who aren't registered healthcare professionals.

The amendments to medicines regulations would allow any person<sup>4</sup> trained and assessed as competent to administer a vaccine to be able to do so – in Wales this would be under a national protocol issued by Welsh Ministers.

Public Health Wales (PHW) will provide e-learning resources and guidelines for the expanded workforce. Flu training resources are currently available. PHW with Public Health England will deliver national resources for training. Those administering the vaccine will be offered practical training delivered locally in vaccine administration techniques and infection prevention and control (IP&C).

### ***How many doses do I need, how will I know when/ where to get subsequent doses, do I need to leave a gap between getting a flu jab?***

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<sup>4</sup> <https://www.gov.uk/government/consultations/distributing-vaccines-and-treatments-for-covid-19-and-flu/consultation-document-changes-to-human-medicine-regulations-to-support-the-rollout-of-covid-19-vaccines#proposed-expansion-to-the-workforce-eligible-to-administer-vaccinations>

This information will be provided prior to vaccination as it may vary depending which vaccine is offered. A record will be kept and linked to your NHS medical records.

NHS Wales Informatics Service is working on a system to call and remind people of their appointments and capture and monitor data from vaccination centres.

***Will the expanded flu vaccine programme affect the ability to deliver a COVID vaccine?***

The vast majority of the flu vaccination programme is scheduled to be completed prior to commencement of COVID-19 vaccination. However, plans are in place for delivery of flu and COVID vaccinations concurrently if required.

It's likely if you're eligible for the COVID vaccine, you'll also be eligible for the flu vaccine and you should get that when invited. A gap of 7 days has been advised between flu and COVID vaccinations.

***Will there be enough PPE/ consumables for the delivery of vaccines?***

Based upon work already undertaken, we do not anticipate any shortfall of PPE or consumables for the delivery of vaccines.

Wales and UK governments are working jointly to procure equipment needed for vaccine delivery.

Advice on infection prevention and PPE required for vaccine administration is available on the Public Health Wales website.<sup>5</sup>

***What happens if I want to give blood after having the vaccine, is there a wait?***

It's really important to get the vaccine first, and follow guidance on the when you are able to give blood following the COVID vaccination.

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<sup>5</sup> <https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/information-for-health-and-social-care/advice-on-ppe-guidance-implementation/>

## **VACCINE TRIALS**

### ***Is Wales participating in vaccine trials?***

Wales is part of a UK programme that is undertaking vaccine studies – this will provide the opportunity for some of the Welsh population to participate. There will be a number of studies taking place in Wales between now and during 2021, and different vaccine studies will take place in different regions across Wales. Information on the studies will be made available through social and other media platforms, through organisations such as large employers and through the vaccine registry websites. Not all studies will be possible to run in Wales - a particular age group of people may be required or people who work in a particular job. Sometimes studies have to be run where there are high levels of COVID-19 infection in order to get results quickly.

### ***How can the Welsh population indicate if they are interested to be part of vaccine trials?***

People across the UK can sign up to give permission for researchers to contact them about taking part in COVID-19 vaccine studies. By collecting details about people who are interested in taking part in vaccine studies, it will help cut down the time it takes to find volunteers for vaccine studies. This will help researchers to carry out studies and find a vaccine faster. You can sign up to a UK wide registry, if you are 18 or over, and live in the UK at <https://www.nhs.uk/sign-up-to-be-contacted-for-research>

### ***Are volunteers infected with COVID in the trials?***

There are different types of vaccines being trialled but none of them involve deliberately infecting people with the virus. The vaccine is intended to trigger an immune response and, in turn, protection if the person then comes into contact with COVID-19 in the community. The vaccines in preparation for early vaccination of the population will have been these type of large scale trials.

There are discussions underway in the research community for undertaking human challenge trials, which are trials where people are being infected deliberately with COVID to find out if COVID vaccines work. Media reports have indicated that volunteers in the UK could soon be part of the world's first human challenge trials. Such a trial would require approval from the UK Medicines and Healthcare products Regulatory Agency (MHRA) and an independent ethical committee before starting.

Volunteers for any clinical trials only take part with their full consent, and all the facts of the trials are made available to them before they sign up. This ensures that volunteers do so with full knowledge of the facts and clinical risks.

### ***If/when a national vaccination programme commences, how will the trial programme be impacted?***

It is likely that a number of vaccines will be required to meet the needs of the population globally – so even if one vaccine is proven to be effective, the trial programme will continue so that other vaccines can be tested.

As it will take many months for the whole population to be offered a proven effective vaccine, it will be possible for the UK vaccine trials to continue to run in parallel with a vaccination programme. It is likely that researchers will look towards groups of the population that are planned to be vaccinated at a later stage to participate in trials. More information will become available when a vaccine is found to be effective which will also help people decide if they wish to participate or not in a trial.

***Will I be disadvantaged if I join a trial, and a vaccine is subsequently licenced?***

We need volunteers for the vaccine trials, to gather evidence on which vaccines are safe and effective, before a vaccine can be deployed for the wider population. It is possible that one or more vaccines will be found effective and approved for use before the trial follow-up period has ended. The Vaccines Taskforce and other relevant organisations will ensure that the best advice is made available to all trial volunteers, and that they are not disadvantaged by having taken part in a trial. This may include trial volunteers being offered a further vaccine if they are in a group set out as a priority for the newly approved vaccine. Advice will be made available to all trial participants.

***Should I still get a flu vaccination?***

Yes, if this is recommended for you. You may need to wait between one to four weeks between receiving the flu vaccine and receiving any COVID vaccine, but you can still enroll in the study and discuss timing with the research team. Do not put off your flu vaccination to take part in the COVID trial, as it will give you important protection.

*(Specific FAQs relating to being part of the COVID vaccine studies can be found at <https://bepartofresearch.nihr.ac.uk/vaccine-studies/>)*