

# Care Home COVID-19 Vaccine information pack for Staff

17<sup>th</sup> February 2021

NHS England and NHS Improvement



# How to use this pack

This resource pack has been developed to provide clear guidance Care Homes about the COVID-19 vaccine, and bring useful resources and information together in one place.

Please note that information and process are continuing to develop, please continue to follow local process and guidance.

## Topics covered in this resource pack:

[Key messages](#)

[Vaccine programme overview](#)

[What are vaccines?](#)

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[How does the Oxford/AstraZeneca vaccine work?](#)

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# Key messages

- Residents in **care homes for older adults** have been very badly affected by COVID-19. Care home staff are at increased personal risk of catching COVID-19, and passing it on to vulnerable people
- Vaccines are only approved if they are **safe and effective**
- You get the vaccine in two doses
- The vaccine is one tool to help prevent COVID-19 – **keep up all your hard work** in infection prevention control, wearing PPE and testing
- Some residents might not have capacity to consent to have the vaccine – **the same process** should be followed as for other interventions such as the flu jab

This is why they have been prioritised to receive the vaccine

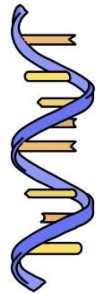
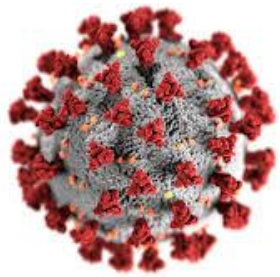


# What are vaccines?

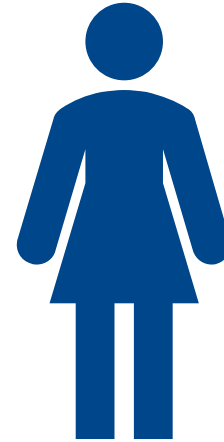
- Vaccines are a medicine
- Instead of treating things when they have happened – it **prevents** them from happening in the first place
- They prevent people from getting a serious and avoidable infection / disease



# How does the Pfizer/BioNTech vaccine work?

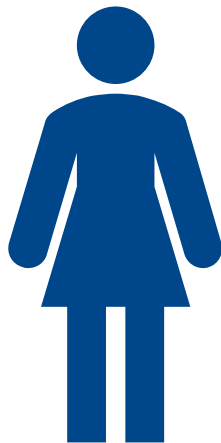
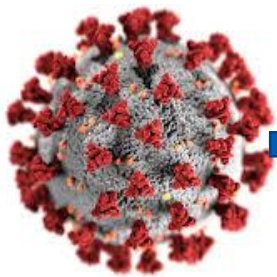


The scientist takes part of the virus to make the vaccine. This part of the virus **cannot** give you COVID-19

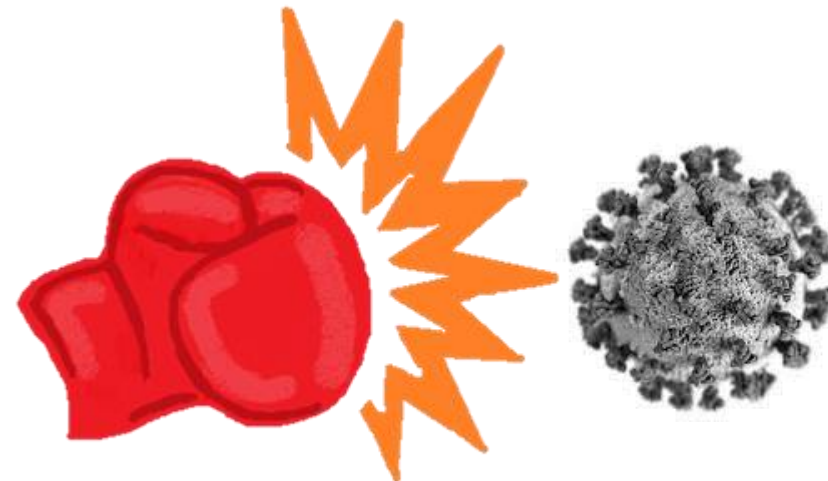


Once injected the immune system produces **virus fighters** called anti-bodies and T-Cells

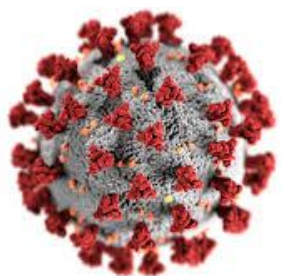
You have two injections 21-28 days apart



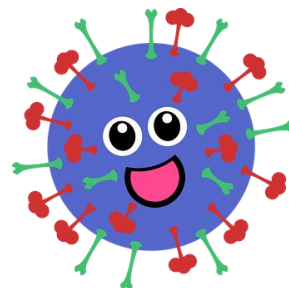
If you come into contact with COVID-19 the **virus fighters** (anti-bodies and T-Cells) remember it and can fight it



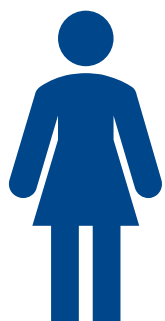
# How does the Oxford/AstraZeneca vaccine work?



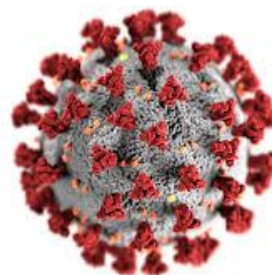
Instructions on how to make the protein are found on the surface of the COVID-19 virus



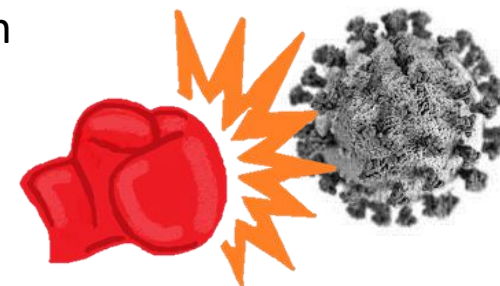
The instructions are added to a **safe virus** to make the vaccine



Once injected the vaccine stimulates your immune system to produce **virus fighters** called anti-bodies and T-Cells



If you come into contact with COVID-19. The **virus fighters** (anti-bodies and T-Cells) can fight it



You can find a video about the Oxford vaccine here:

<https://www.youtube.com/watch?v=DUTRaOOblI8&feature=youtu.be&app=desktop>

# Truths about the vaccine

You may have seen some false information about the vaccine on the internet. The below statements are **truths** about the vaccine

The vaccine only contains what it needs to produce the fighting cells, things to make it safe, able to be delivered, and able to be stored. Nothing goes into a vaccine unless it is absolutely needed

The vaccine only gets you to produce an immune response – the virus fighters

Vaccines are developed by taking parts of the virus itself. The parts of the virus in the vaccine cannot reproduce in your body and cannot give you COVID-19

The Pfizer/BioNTech vaccine trials were carried out in the United States, Europe, Turkey, South Africa, and South America. Participants included 9.6% black/African, 26.1% Hispanic/Latino and 3.4% Asian

The Oxford/AstraZeneca vaccine trials were carried out in Brazil, South Africa and the UK. 10.1% of trial recipients were Black and 3.5% Asian

Care home residents and staff are high priority to receive the vaccine due to the risk they have of catching COVID-19 (see the [who receives the vaccine slide](#))

The vaccine went through all the normal stages of development and approval – see the slide on [how was the vaccine approved](#)

# What are the possible side effects?

- Like all medicines, vaccines can cause side effects.
- Most are mild or moderate, tend to be less common in older people, and **go away within a few days**.
- If side effects such as pain and/or fever are troublesome, they can be treated by medicines for pain and fever such as paracetamol.

Common side effects: may affect more than 1 in 10 people

- having a painful, heavy feeling and tenderness in the arm where you had your injection. This tends to be worst around 1-2 days after the vaccine
- feeling tired
- headache
- general aches, or mild flu like symptoms

Although feeling feverish is not uncommon for two to three days, a high temperature is unusual

You can find further information on the [vaccine information leaflets](#)



# How was the vaccine approved?

- The NHS will offer a COVID-19 vaccination **only** when it has been approved by the Medicines and Healthcare products Regulatory Agency (MHRA), the official UK regulator, like all other medicines and devices.
- Vaccines go through three phases of clinical trials – in the third phase the Pfizer vaccine was given to 21,000 volunteers including older people with **no serious safety concerns**
- There had been vaccine work on other coronaviruses
- There was no waiting for funding
- Development stages were run in parallel
- This video explains how COVID-19 vaccines were developed quickly:  
<https://www.youtube.com/watch?v=ddDiyIKUP0M&app=desktop>  
[top](#)
- You can also find a video from the MHRA here:  
<https://youtu.be/3HPpWelo1ro>



# Why should people receive a vaccine?

## Staff:

- Care home staff are at increased personal risk of getting COVID-19 due to their work
- If care home staff get COVID-19 they are at risk of passing it on to residents
- The more people that get vaccinated, the more we can protect the most vulnerable people including your own family

## Residents:

- Residents are at higher risk of getting COVID-19 due to the environment that they live in
- Residents are more likely to become seriously unwell and more likely to die from COVID-19 due to their age and underlying health conditions



# Who is receiving the vaccine?

The Joint Committee on Vaccination (JCVI) and Immunisation advises UK health departments on immunisation

The JCVI advises that the first priorities of any COVID-19 vaccination programme should be the prevention of death from COVID-19 and the protection social care and health care staff.

- Residents in **care homes for older adults** have been very affected by COVID-19
- Care home staff are at increased personal risk of catching COVID-19, and of passing it on to vulnerable people

The JCVI priority groups are:

- residents in a **care home for older adults** and **their carers**
- all those 80 years of age and over and frontline health and social care workers
- all those 75 years of age and over
- all those 70 years of age and over and clinically extremely vulnerable individuals – this includes adults with Down’s syndrome
- all those 65 years of age and over
- all individuals aged 16 years to 64 years with **underlying health conditions** which put them at higher risk of serious disease and mortality – **this includes people with severe mental illness and people with severe and profound learning disabilities**
- all those 60 years of age and over
- all those 55 years of age and over
- all those 50 years of age and over

The full information is here: [Priority groups for coronavirus covid-19 vaccination](#)

# What is the process of getting a vaccine?

The specific details e.g. bookings are arranged **locally**

In summary:

Staff /residents invited to have their vaccine



Receive first vaccine

Given vaccine record card – take a photo in case you lose it



Given 2<sup>nd</sup> vaccine dose: 3-12 weeks after Pfizer/BioNtech  
4-12 weeks after Oxford/AstraZeneca

Please note there should be a gap of at least 7 days between the flu and COVID-19 vaccine



# Changes in dose timings

The NHS is now prioritising giving the first dose of the vaccine to as many people as possible – this will protect the greatest number of people in the shortest possible time

Protection against symptomatic/severe COVID-19 after one dose (and time for it to work e.g. 2 weeks) is estimated at 89% for Pfizer/Biotech and estimated at 73% for Oxford/AstraZeneca – see page 5 of the [green book](#) for further information

## **For comparison Flu jab around 60-70% effective**

- The second dose of the Pfizer/BioNTech vaccine may be given between 3 to 12 weeks following the first dose
- The second dose of the Oxford/AstraZeneca vaccine may be given between 4 to 12 weeks following the first dose

It is likely that second doses will be given towards the end of the recommended times (e.g. 12 weeks) in order to give as many people as possible the first dose

Some people who have had their second dose appointment booked may have it changed to nearer 12 weeks after the first dose – this is being managed locally

You can read more information about this here: <https://www.gov.uk/government/news/statement-from-the-uk-chief-medical-officers-on-the-prioritisation-of-first-doses-of-covid-19-vaccines>

# What happens after the vaccine?

The vaccine is just one tool in our tool box to prevent COVID-19

- ✓ Continue to wear PPE
- ✓ Continue to follow infection prevention control guidance
- ✓ Continue with testing
- ✓ Continue to follow guidance if anyone has [symptoms of COVID-19](#)



You can find lots of useful information on the above in the [COVID care home resource pack](#)

# Care home managers – preparing for staff vaccines

## This includes agency staff

Care home managers have been asked to:

- Put together **staff lists** – including basic details (name, gender, date of birth, ethnicity, NHS number, GP details) for each staff member. If staff don't have their NHS number the vaccine hubs can find this out, as long as their details with their GP are up to date
- Be ready to provide each staff member with a **letter confirming their employment** in the care sector
- Keep staff records of vaccinations and report via the **Capacity Tracker** (as you do with flu vaccination) – see the [Capacity Tracker slide](#)
- Consider the **logistics of releasing staff to receive** their vaccine, while maintaining staffing levels within the home.

## Do talk to staff about the vaccine

- Do use the resources in this pack
- You may find the [Q&A video](#) for social care staff useful
- You may find the London care home COVID vaccine FAQs useful (please contact [england.londonehchprogramme@nhs.net](mailto:england.londonehchprogramme@nhs.net) if you do not have a copy of the FAQs)

# Care home staff receiving the vaccine



**NHS England and NHS Improvement** @NHSEngland · Dec 8  
Pillay has been working in his local care home since 2008, and today he got his Covid-19 vaccine.

He told our Medical Director of Primary Care @NikkiKF and @croydonhealth CEO Matthew Kershaw that he's 'looking forward to a better 2021'.



1 18 65



**St George's NHS FT** @StGeorgesTrust · Dec 8  
#CovidVaccine number 1 at St George's!

Here is the moment Arezou, one of our vaccination team, administered the first vaccine to our very first patient - Tharmini, who works in a local care home.



3 34 180

Video on Lennox House care home staff receiving the vaccine:

<https://www.youtube.com/watch?v=yI8pbEe3q8M&feature=youtu.be>



# Don't forget about the flu jab

*“A care home can be a centre for infection to flourish!”*

- There were **2,751 flu outbreaks in care homes in 2019/20**, around 70% of all outbreaks in England. However, less than a third of eligible care home staff were vaccinated for flu last winter.
- In 2017 a **care home** in Sutton **experienced a flu outbreak** in their home. This short film based on true events, shows the impact of the flu outbreak to staff and residents at the home: <https://www.youtube.com/watch?v=cyrYR1z-oRI&t=1s>

Why should care home staff get the flu jab?

- The flu vaccine is an extension of the PPE you have been using to protect yourself and others
- You are protecting the people you look after. You are interrupting the spread of flu by not passing flu onto the people in your care.
- You are also helping your co-workers by not being off sick – which can increase their workload. They will be doing the same for you.
- You are reducing the risk of flu outbreaks in the care home.
- You are also protecting yourself and your family from flu and the possibility of co-infection with COVID-19

**The protective measures we all take against flu, by getting vaccinated, are as important for protecting ourselves, our loved ones and those we care for, as wearing PPE is for protecting against COVID-19**

Please note there should be a gap of at least 7 days between the flu and COVID-19 vaccine

# Additional FAQs

*Will district nurses be able to deliver the vaccine?*

There will be local decisions made on workforce (who is giving the vaccine). This could include district nurses. People giving the vaccine will have the training that they need.

*Can residents be vaccinated by a GP who is not a GP at the practice they registered to?*

Yes, temporary registration with the GP practice delivering the vaccine at the care home enables this to happen.

*Will pharmacists be delivering the vaccine?*

National talks are well advanced with community pharmacists to take part in the vaccination programme

*Will care home nurses be asked to administer the vaccine? Will this be done under patient group direction?*

There will be local decisions made on workforce (who is giving the vaccine). People giving the vaccine will receive the training that they need. If nursing staff in the care home are giving the vaccine it is expected that this would be done under a patient group direction – you can find out more information [here](#)

*Do care homes need to access training prior to the vaccination programme starting?*

People delivering the vaccine will receive the training that they need to safely administer the vaccine.

# Additional FAQs

*Do Power of Attorneys (health and welfare) have to fill out the consent form?*

If there is a deputy or attorney with relevant authority, then the health care professional can only give the vaccination if the deputy or attorney has first given their consent. A record of discussion e.g. via email is acceptable and should be stored in the residents records. Consent is recorded on the Pinnacle system by the staff giving the vaccine

*Will staff delivering the vaccine have epi pens?*

The staff delivering the vaccine will have any emergency drugs necessary

*Will GPs make sure everyone is suitable for the vaccine, for example, the people giving the vaccine might not have their medical records?*

There are very few medical reasons which would make someone unsuitable for the vaccine. If you are concerned about an individual residents suitability you could speak with their named GP. The MHRA has released some updated guidance stating that any person with a history of immediate-onset anaphylaxis to a vaccine, medicine or food should not receive the Pfizer/BioNTech or Oxford/AstraZeneca vaccine. You can read further information [here](#)

*Do we need to have anaphylaxis training?*

The staff administering the vaccine will have had anaphylaxis training. Please ensure staff have their mandatory training.

*Will the administration be staggered in care homes, so we don't have lots of residents or staff with side effects?*

Yes, where appropriate the vaccine can be given to a certain number of residents and staff at a time, so not everyone has it at once.

# Additional FAQs

*Will the vaccine be mandatory?*

There are no plans for a COVID-19 vaccine to be compulsory

*Does the vaccine contain animal products?*

The Pfizer/Biotech and Oxford/AstraZeneca vaccine **does not** contain any meat derivatives or porcine products. If, and when, further vaccines are approved we will publish information about known allergens or ingredients that are important for certain faiths, cultures and beliefs.

*Does the vaccine contain any blood products?*

The Pfizer/Biotech and Oxford/AstraZeneca vaccine **does not** contain any blood products. If, and when, further vaccines are approved we will publish information about known allergens or ingredients that are important for certain faiths, cultures and beliefs.

*The flu vaccine is also available as a nasal spray will it be possible to have the COVID-19 vaccine as a nasal spray as well?*

The COVID-19 vaccine is delivered by an injection.

*Do we need to have the vaccine if we have already had COVID-19 and if we have antibodies?*

Yes, we would recommend still getting the vaccine. The vaccine may offer longer protection than natural protection

*Will there be more antibody tests considered for people who already have antibodies, to find out when they will need the vaccine?*

We are not aware of any further plans for antibody tests. We would recommend getting the vaccine whether or not someone has antibodies, as the vaccine may offer longer protection.

# Additional FAQs

*What is an acceptable level of compliance for the vaccine to be successful?*

We do not yet know exactly.

*Can people with allergies have the vaccine?*

The MHRA has released some updated guidance stating that any person with a history of immediate-onset anaphylaxis to a vaccine, medicine or food should not receive the Pfizer/BioNTech vaccine. You can read further information [here](#)

*How long will the vaccine last for, will we need another one in a year?*

We expect these vaccines to work for at least a year – if not longer. This will be constantly monitored. Booster doses of COVID-19 vaccine are not yet recommended because the need for, and timing of, boosters has not yet been determined.

*Can residents have the vaccine if they currently have COVID-19?*

Provisional guidance from Public Health England says that vaccination should be delayed in those with confirmed infection to avoid confusing any symptoms. They recommend that vaccination should ideally be delayed until the person has recovered, and at least four weeks after symptoms or a positive test.

*How long do you have to wait between the flu jab and COVID vaccine?*

Provisional guidance from Public Health England recommends that there should be at least 7 days between another vaccine and the COVID vaccine.

*Is the vaccine a one-off dose?*

Both the Pfizer/BioNTech and Oxford/AstraZeneca vaccine require 2 doses.

# Additional FAQs

*How do we know if the vaccine has worked, is there a test afterwards?*

We are not aware of any tests for people to have afterwards to show the effectiveness. The Pfizer/BioNTech vaccine is reported to be 95% effective

*What happens if someone refuses the second jab?*

The vaccine is not mandatory, so people could refuse the second jab. The vaccine is delivered in two doses, so it would not be as effective if someone only has one dose.

*Are people going to get vaccine passports? So they can go to sporting events and travel abroad?*

The Government have said that there are no plans to introduce a vaccine passport to give people access to places such as pubs and restaurants.

*Will agency staff get the vaccine?*

Yes, agency staff are included as social care workers. Please do include agency staff in your local vaccine discussions.

*Can staff who are pregnant receive the vaccine?*

Vaccination with either vaccine in pregnancy should be considered where the risk of exposure COVID-19 infection is high and cannot be avoided, or where the woman has underlying conditions that place her at very high risk of serious complications of COVID-19. The risks and benefits of vaccination should be discussed. Those who are trying to become pregnant do not need to avoid pregnancy after vaccination, and breastfeeding women may be offered vaccination with either vaccine following consideration of the woman's clinical need for immunisation against COVID-19.

# Resources

- Standard operating procedure – [vaccine deployment in community services](#)
- Letter to care homes: <https://www.gov.uk/government/publications/covid-19-vaccinations-and-care-homes-programme-launch/covid-19-vaccinations-and-care-homes-programme-launch>
- COVID-19 vaccine information for [social care staff](#)
- COVID-19 vaccination guide for [healthcare workers](#)
- Leaflet on why you are being [asked to wait](#) for COVID-19 vaccination
- COVID-19 vaccination guide for [older adults](#)
- COVID-19 vaccine [pregnancy information leaflet](#)
- What to expect [after your COVID-19 vaccination](#)
- Consent [forms and letters](#)
- General vaccine fact sheets, which can be downloaded [here](#)
- [Guidance](#) for COVID-19 vaccination in care homes that have cases or outbreaks
- [Q&A video](#) for social care staff Download a zip file which has short videos (designed for social media) about the JvCI, what vaccines are, and the oxford vaccine [here](#)
- Video on [how the vaccine was made so quickly](#)

# Resources continued

- Useful tips on [COVID-19 vaccine for people with dementia](#)
- Myth busting Q&A on <https://www.coproducecare.com/vaccineqanda>
- Communications Toolkit to Support Vaccine Uptake in Adult Social Care on <https://docs.google.com/document/d/1EsrwYE3REE8-7glusFCbRmok4ZXkLV-B/edit>

## Learning disabilities

- NHS England Learning Disability and Autism Programme [social media clips on vaccination](#)
- [Assessing Capacity in people with learning disabilities](#)
- North East and Cumbria paper on [Delivering COVID-19 vaccine to adults with learning disability/autism](#)
- Information sheet [COVID-19 Vaccine Accessibility and reasonable adjustments for individuals with severe learning disabilities whose behaviour challenges](#)
- [Accessible Information from Mencap on the Vaccine](#)



# Vaccine information leaflets

- You can find documents relating to the COVID vaccination [here](#)
- COVID-19 vaccine information for [social care staff](#)
- COVID-19 vaccination guide for [healthcare workers](#)
- Leaflet on why you are being [asked to wait](#)
- COVID-19 vaccination guide for [older adults](#)
- COVID-19 vaccine [pregnancy information leaflet](#)
  
- There are template letters for residents and relatives – see the [consent form slide](#)
- Public Health England Leaflet - what to expect [after your COVID-19 vaccinations](#)
  
- [Accessible Information from Mencap on the Vaccine](#)

