

# Health and social care worker seasonal flu & COVID-19 vaccinations

#### **Communications Toolkit**

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## 1. Introduction

It is important that health and social care workers get vaccinated with both the COVID-19 and flu vaccines to protect themselves and their patients; the viruses can be life-threatening and getting both flu and COVID-19 increases risk of serious illness.

The flu vaccine and the COVID-19 autumn booster vaccination will be available from September, and providers should do all they can to encourage staff to get the best protection, to also better support their patients and the people they care for, by getting both essential winter vaccines this autumn.

All frontline health care and social care workers should be offered vaccination by their employer. This is an employer's responsibility to help protect their staff and patients or clients and ensure the overall safe running of services. Employers should commission or implement a service which makes access to the vaccine easy for all frontline staff, encourages staff to get vaccinated, and monitors the delivery of their programme.

This communications toolkit has been designed to support a proactive approach to staff engagement and overcoming any hesitancy and contains useful resources and information to help maximise uptake.



## 2. Core script

For some people flu and COVID-19 can be serious, and as a health or social care worker, you're more likely to be exposed to the flu and COVID-19 viruses. With winter on the way, now it's time to top up your immunity with an autumn COVID-19 booster and an annual flu vaccine to keep yourself and those you care for safe.

More people get these viruses over winter, which is why it's important that health and social care workers get their flu & COVID-19 autumn vaccines as soon as it is available from September. It's the best protection against getting seriously ill from flu and COVID-19 and spreading it to others, including their colleagues, the people they care for and friends and family.

It is important to come forward as soon as possible after you are invited to ensure you have the best protection from COVID-19 and flu before they start circulating. Your COVID-19 booster must be at least three months since you had your last dose of COVID-19 vaccine.

If you have not had your earlier doses of the COVID-19 vaccine, it's not too late to come forward and you can get these at any time.

The COVID-19 booster and the flu vaccine can be given on the same day for health and social care workers that are eligible for both. There may be some opportunities to have them in a single appointment, although this will not always be possible. It is important that staff get both vaccinations as soon as they can, even if it means getting the flu and COVID-19 vaccines separately, to make sure they are protected as early as possible this winter.

Please help to keep yourself, and those you care for, safe from getting flu and COVID-19 by getting vaccinated as soon as you can.



## 3. Key messages

- As a health or social care worker, you're more likely to be exposed to the flu and COVID-19 viruses, which can be life threatening. You also care for people who may be at greater risk and it's easy to pass these viruses on without knowing.
- Having your COVID-19 autumn booster and your flu vaccine will help protect you and your family and friends from potentially serious illness, as well as the people you provide care for.
- It is essential that all health and social care workers have the best protection against these viruses as we go into winter. The flu jab and the COVID-19 autumn vaccine are the best defence we have against them.
- All frontline health and social care workers, including clinical and non-clinical staff, should be offered both the COVID-19 and seasonal flu vaccine. For flu, this should be offered as part of an organisations policy to prevent the transmission of infection.
- The COVID-19 booster may be offered through your employer or you can book through the <u>National Booking Service</u>/calling 119 or find a walk-in appointment through the <u>online vaccination walk-in finder</u>. Additionally, those working in care homes could be offered the opportunity to receive a COVID-19 or flu vaccine when roving teams visit care homes, however this may not always be possible.
- The seasonal flu vaccine, as first point of call, should be provided by employers as part of the organisation's policy to prevent the transmission of infection. Social care workers who are in direct contact with people who receive care and support services, should also have the vaccine provided by their employer. There are circumstances where frontline staff who do not have access to employer led occupational health schemes, can access the flu vaccine through the NHS free of charge. This includes staff that work at a CQC registered residential care or nursing home, a CQC registered domiciliary care provider, a voluntary managed hospice provider or if they provide social care via a direct Payment (personal budgets) or Personal Health Budgets, such as Personal Assistants.
- The complementary NHS flu vaccination offer for primary care staff has not been extended for the 2022 to 2023 flu season. Flu vaccinations for primary care staff, like other frontline healthcare staff, revert to being an employer's occupational health responsibility.
- Don't delay, get both vaccines as soon as they are available.
- Both vaccines have been given to millions of people worldwide with a good safety record. All vaccines must go through the same regulatory approval



process as any medicines to ensure they meet strict safety standards and offer high levels of protection.

- Healthcare workers were not invited for a COVID-19 spring booster, unless they had a medical condition or other situation that made them eligible, and for many, it will be over 6 months since their last dose. Effectiveness wanes over time, therefore it is now essential that all staff take up the autumn COVID-19 vaccination offer to offer the best protection for themselves, their colleagues and their patients.
- To better protect yourself and others, we advise health and social care workers also:
  - Where advised, wear a face mask
  - Wash your hands carefully and frequently
  - Open windows to let fresh air in
  - Continue to follow the current guidance
- Providers have the flexibility to determine the timing of vaccination, and health and social care workers will continue to be able to book COVID-19 vaccine appointments by self-declaring through the NHS COVID-19 National Booking Service.
- By having your seasonal flu and COVID-19 vaccinations, you are helping to
  protect yourself and the patients you are working with. We want to encourage
  as many eligible members of the public to also get vaccinated and would urge
  health and social care workers to encourage anyone that they care for, who is
  eligible, to get their flu and COVID-19 vaccinations.
- We would specifically ask you to proactively consider this conversation where
  the people you care for have a learning disability, are from ethnic minority
  communities or are pregnant. Uptake can be lower in these groups and we
  know that 1-2-1 conversations with a trusted health and social care
  professional are extremely important and can make a difference.



## 4. Intranet copy/staff newsletter copy

As a health or social care worker, you're more likely to be exposed to the flu and COVID-19 viruses. You also care for people who may be at greater risk and it's easy to pass these viruses on without knowing.

Both flu and COVID-19 can be life-threatening and getting both flu and COVID-19 increases risk of serious illness. Even if you are healthy, you can still catch these viruses and spread them to your patients.

The flu and COVID-19 vaccines are vital for helping to protect our staff and those they care for, and they are the best defence we have against these potentially life-threatening viruses.

The flu vaccine and the COVID-19 autumn booster vaccination will be available from September. Those who have not started or completed their primary course of the COVID-19 vaccine are urged to get their vaccinations as soon as possible. Primary course doses can be started at any time.

The COVID-19 booster may be offered through your employer or you can book through the <u>National Booking Service</u>/calling 119 or find a walk-in appointment through the <u>online vaccination walk-in finder</u>. Additionally, those working in care homes could be offered opportunity when roving teams visits care homes, however this will not always be an option.

The seasonal flu vaccine, as first point of call, should be provided by employers as part of the organisation's policy to prevent the transmission of infection. Social care workers who are in direct contact with people who receive care and support services, should also have the vaccine provided by their employer. There are circumstances where frontline staff who do not have access to employer led occupational health schemes, can access the flu vaccine through the NHS free of charge.

This communications toolkit has been designed to support conversations about, and promotion of the staff facing winter vaccines campaign, encouraging staff to get both essential vaccinations. Campaign resources will be available on the <a href="Campaign">Campaign</a> Resource Centre (CRC) shortly. Communications resources will continue to be made available on the <a href="CommsLink">CommsLink</a> FutureNHS workspace.



## 5. Campaign assets

To help providers and communication teams with rolling out their winter vaccinations campaign to staff, there will be a suite of free digital campaign materials on the <u>Campaign Resource Centre</u> available shortly.



#### 6. FAQs

## Why is it so important that I receive both vaccines this year?

It's important that you receive the flu vaccination this year to help protect yourself and those around you. Flu is an unpredictable virus that can kill thousands of people during a flu season. There have been very low levels of flu circulating in the last two years due to measures that were in place to reduce COVID-19 infections, such as social distancing and mask-wearing. There is likely to be a resurgence of flu this winter similar to or higher than the levels before the pandemic because people will be mixing more. Flu and COVID-19 can both be life-threatening and spread more easily in winter when we are more likely to be indoors or in crowded spaces.

As a health or social care worker, you will be caring for people who may be at greater risk from these viruses. It's easy to pass on COVID-19 or flu without knowing. Even if you're healthy, you can still catch COVID-19 or flu and spread it to the people you care for causing severe illness which can lead to hospitalisation or even death. Getting vaccinated is the best way we have to protect yourself and those around you.

It is vital that we help maintain protection against severe illness from COVID-19 and flu this winter to avoid additional pressure on the NHS and social care systems during the busy winter period.

## Am I eligible for both vaccines this year?



Guidance from the Joint Committee on Vaccination and Immunisation (JCVI) on the COVID-19 vaccination booster programme for autumn 2022 states that vaccines should be offered to groups including older adult care home residents, frontline health and social care workers, unpaid carers and those aged 50 years or above. Anyone aged 5 - 49 years who is in a clinical risk group or are household contacts of people with immunosuppression, including pregnant women, are also eligible.

Frontline health and social care workers, including both clinical and non-clinical staff who have contact with patients, should also be offered the flu vaccine by their employer to help protect themselves and those they care for.

The COVID-19 booster may be offered through your employer; however, you can also book through the public <u>National Booking Service</u>/calling 119 or find a walk-in appointment through the <u>online vaccination walk-in finder</u>. Additionally, those working in care homes could be offered opportunity when roving teams visits care homes, although this will not always be an option.

The seasonal flu vaccine should be provided by employers as part of the organisation's policy to stop the spread. Social care workers who are in direct contact with people who receive care and support services should also have the flu vaccine, and this should be offered via their employer's occupational health scheme where these are in place.

There are circumstances where frontline staff, employed by specific social care providers without access to employer led occupational health schemes can access the vaccine through the NHS free of charge; where they are employed by a CQC-registered residential care or nursing home, CQC-registered domiciliary care provider, a voluntary managed hospice provider or via direct Payment (personal budgets) or Personal Health Budgets, such as Personal Assistants

The complementary NHS influenza vaccination offer for primary care staff has not been extended for the 2022 to 2023 influenza season. Influenza vaccinations for primary care staff, like other frontline healthcare staff, revert to being an employer's occupational health responsibility.

## How and when should I get my vaccines?

The flu and COVID-19 autumn booster vaccines are available from September, and all health and social care workers are advised to get both vaccinations as soon as possible. There may also be opportunities to get both together, although you should not delay getting the first one offered to you in order to wait for an opportunity to get both. Your employer will provide more information.

## Can I have my flu vaccine and COVID-19 booster in the same appointment?

The COVID-19 booster and the flu vaccine can be given on the same day and for health and social care workers that are eligible for both, there may be opportunities to have both vaccinations at the same appointment. We would encourage you to get



your vaccinations as soon as possible and help get protected as early as you can rather than waiting, as it may not always be possible to get them together.

#### Will the side effects be worse if I have both vaccines at the same time?

People who receive both vaccines at the same time may be slightly more likely to experience at least one side effect when both vaccines are given together, although these are typically mild, short-lived reactions. The vaccines are extremely safe and there is no evidence that giving both together is more likely to cause serious side effects.

#### Is the NHS confident the vaccines are safe?

Yes – 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.

## Is the flu vaccine and COVID-19 booster mandatory for staff?

No, having the COVID-19 or flu vaccine is not compulsory for health and social care staff, but helps to provide important protection for these individuals and those they come into contact with. Local employers will be working hard to ensure all staff can get the COVID and flu vaccines this autumn/winter, and we are confident that most of our staff will choose to protect themselves and those around them by getting the vaccines.

## Flu vaccine questions

## Am I eligible for a NHS flu vaccine this year?

All frontline health care and social care workers should be offered flu vaccination by their employer. This is an employer's responsibility to help protect their staff and patients or clients and ensure the overall safe running of services. Employers should commission or implement a service which makes access to the vaccine easy for all frontline staff, encourages staff to get vaccinated, and monitors the delivery of their programme.

Frontline staff employed by the following types of social care providers without employer led occupational health scheme are eligible for an NHS flu vaccination through general practice or community pharmacy:

- a registered residential care or nursing home
- registered domiciliary care provider
- a voluntary managed hospice provider
- Direct Payment (personal budgets) or Personal Health Budgets, such as Personal Assistants

The complementary NHS influenza vaccination offer for primary care staff has not been extended for the 2022 to 2023 influenza season. Influenza vaccinations for



primary care staff, like other frontline healthcare staff, revert to being an employer's occupational health responsibility.

#### How effective is the flu vaccine?

The flu vaccine is your best protection against the virus. It will not stop all flu viruses but if you do get flu after vaccination, it's likely that if you do still catch the flu the disease will be milder and shorter-lived than it would otherwise have been. It takes the immune response about two weeks to fully develop after vaccination.

## Will I get any side effects from the flu vaccine?

Flu vaccines have a good safety record. All adult flu vaccines are given by injection into the muscle of the upper arm.

Most side effects are mild and only last for a day or so, such as:

- slightly raised temperature
- muscle aches
- sore arm where the needle went in this is more likely to happen with the vaccine for people aged 65 and over

Try these tips to help reduce the discomfort:

- continue to move your arm regularly
- take a painkiller, such as <u>paracetamol</u> or <u>ibuprofen</u> some people, including those who are pregnant, should not take ibuprofen unless a doctor recommends it.

## Will the flu jab give me flu?

No. The injected vaccine used for adults does not contain any live viruses, so it cannot cause flu. Some people get a slightly raised temperature and aching muscles for a couple of days afterwards, and you may feel sore at the injection site.

## Can I have the flu vaccine if I'm pregnant or breastfeeding?

JCVI advice recommends that you should have a flu vaccine if you are eligible. You should have the flu vaccine if you're pregnant to help protect you and your baby. It's safe to have the flu vaccine at any stage of pregnancy from the first few weeks up to your expected due date. Women who have had the flu vaccine while pregnant also pass some protection on to their babies, which lasts for the first few months of their lives. It's safe for women who are breastfeeding to have the vaccine.

## Is there anyone that shouldn't get the flu vaccine?



There will be a small number of people where it is advised that you should not have a flu vaccine, for example if you have ever had a serious allergy to the vaccine, or any of its ingredients. If you are allergic to eggs or have a condition that weakens your immune system, you may not be able to have certain types of flu vaccine — check with your vaccinator. If you have a fever, the vaccination may be delayed until you are better.

## I had the flu vaccination last year. Do I need to have it again?

Yes, because the viruses that cause flu can change every year. This means the flu (and the vaccine) this year may be different from last year. If you had the flu vaccine last year, either because you were and health and social care worker, pregnant or because you're in a vulnerable group, you need to have it again this year.

## Do I still need to get my flu jab if I've had all of my COVID-19 vaccines?

Yes, the COVID-19 vaccine does not protect you from flu, and *vice versa*. As you are eligible for both vaccines you should have them both.

## I've recently had COVID-19, can I still have my flu vaccine?

If you've had COVID-19, it's still safe to have the flu vaccine, however you may wish to reschedule your appointment if you are currently experiencing a high temperature or acute illness on the day of the appointment. It will still be effective at helping to prevent flu.

For advice and information about the flu vaccination, visit www.nhs.uk/flujab

## **COVID-19 seasonal vaccination questions**

## Health and care workers were not eligible for a spring booster, why has advice now changed for the autumn booster programme?

We continue to be guided by the JCVI and vaccinate in line with JCVI guidance. As a precautionary strategy to maintain high levels of immunity, JCVI advised an additional spring booster dose for the most vulnerable individuals in the population.

The JCVI has stated that winter will remain the season when the threat from COVID-19 is greatest for individuals and for health communities. As with the 2021 autumn COVID-19 booster programme, the primary objective of the 2022 autumn vaccination programme will be to augment population immunity and protection against severe COVID-19 disease over winter 2022 to 2023.

## How effective is the COVID-19 vaccine?

The COVID-19 vaccination will reduce the chance of you suffering serious ill health due to COVID-19.

With both flu and COVID-19 expected to be circulating this winter, it's important to boost your immunity and help protect yourself and others.



## Can I still catch COVID-19 after having the vaccine?

The COVID-19 vaccination will reduce the chance of you suffering from severe COVID-19 disease. It may take a few days for your body to build up some protection from the booster.

Like all medicines, no vaccine gives a 100% guarantee of not catching the virus – some people may still get COVID-19 despite getting vaccinated but this should be less severe.

## I've already had COVID-19 and have built up natural immunity. Why do I still need the vaccine?

The COVID-19 vaccine and natural infection stimulate different parts of the immune system, so they are complementary. Both wane over time, and it is not clear how much protection an infection from one variant provides against other strains of COVID-19. Following COVID-19 infection, you will also get significant extra protection from the vaccine although, to reduce side effects, you will need to wait at least 4 weeks after infection before getting vaccinated.

## Has the COVID-19 booster been given to people like me?

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.

Each of the vaccines are tested on tens of thousands of people across the world. They are tested on both men and women, on people from different ethnic backgrounds, and of all age groups.

<u>Latest data</u> from UKHSA show that six months after receiving a second dose, two doses provide between 60% and 70% protection from needing to be hospitalised for COVID-19. This increases to around 90% protection shortly after having the booster, around 85% at four to six months and remains around 70% six months after the booster.

## Will there be any side effects from the autumn booster vaccine?

Common side effects are the same for all COVID-19 vaccines used in the UK, and include:

- having a painful, heavy feeling and tenderness in the arm where you had your injection. This tends to be worst around a day or two following the vaccination
- feeling tired
- headache general aches, or mild flu like symptoms

You can rest and take paracetamol (follow the dose advice in the packaging) to help make you feel better. Although feeling feverish is not uncommon for 2 to 3 days, a



high temperature is unusual and may indicate you have COVID-19 or another infection.

Although a fever can occur within a day or 2 of vaccination, if you have any other COVID-19 symptoms or your fever lasts longer, stay at home, and arrange to have a test. Symptoms following vaccination normally last less than a week. If your symptoms seem to get worse or if you are concerned, you can call NHS 111.

If you had serious side effects after any previous dose you may be advised to avoid or delay further vaccination. You should discuss this with your doctor or specialist.

## Do the vaccines contain animal products?

The approved COVID-19 vaccines do not contain any animal products or egg.

Vaccines only contain ingredients that are essential to make them safe and effective. Any ingredients with potential to cause harm (e.g. allergy) are listed even if present in such small amounts. Read more about COVID-19 vaccine ingredients here.

## Are there any serious side effects to having the COVID-19 vaccine?

Worldwide, there have been very rare cases of inflammation of the heart called myocarditis or pericarditis reported after some vaccinations.

These cases have been seen mostly in younger men within several days after vaccination. Most of these people recovered and felt better following rest and simple treatments.

You should seek medical advice urgently if, after vaccination, you experience:

- chest pain
- shortness of breath
- feelings of having a fast-beating, fluttering, or pounding heart

## I've only just had my first or second COVID-19 vaccine, can I have the autumn booster jab?

The JCVI advises that the booster vaccine should be offered **no earlier than three months** after completion of the primary vaccine course.

## Can I have the booster if I haven't completed the primary vaccination course?

No, you need to finish the first ('primary') course of vaccination. The booster vaccination is available from 3 months (91 days) after your second dose.

## I haven't yet had the COVID-19 vaccination, can I still get my first jabs?

Everyone that is eligible that hasn't already had their first or second COVID-19 vaccination will still be able to get vaccinated, even when the COVID-19 autumn booster programme begins.



## How do I get my COVID-19 booster?

Your employer should provide more information on how to get your flu vaccine and COVID-19 booster.

Do not wait to try and schedule both vaccinations at the same time as this may not be possible and could delay your protection for the winter ahead. However, if offered, it is safe to have both at the same time.

For more information or to book your COVID-19 booster, visit www.nhs.uk

## I've already had COVID-19, why do I need a booster?

Getting vaccinated is just as important for those who have already had COVID-19 as it is for those who haven't.

The COVID-19 vaccine provides additional protection, beyond that of natural immunity from previous infection alone, against serious complications of infection. You should also have some protection from the mild symptoms and protection against severe disease is expected to remain high against future variants.

If you have had COVID-19 you will still get extra protection from the vaccine, but you will need to wait 4 weeks before getting vaccinated.

## Is there anyone who shouldn't have a COVID-19 booster?

There are very few people who should not have a booster.

If you have had a severe reaction to a previous dose of the vaccine you should discuss this with your doctor.

## Can I use the National Booking Service (NBS) to book my COVID-19 booster?

Many Trusts have local booking systems which they use to invite healthcare workers for a COVID-19 vaccination. Your employer will confirm if they are using this approach.

Health and social care workers can also book booster vaccinations through the National Booking Service and attend vaccination centres, Hospital Hub+, and primary care settings to receive the COVID-19 vaccination.

If you are using the NBS you may need to provide official proof of status when you visit a vaccination site. Forms of identification that are accepted are either a workplace photo ID, a letter from your employer from the past three months, or a payslip from the past three months which shows your employer.

Information on COVID-19 vaccination and pregnancy



The COVID-19 Vaccination Communications team have developed a COVID-19 vaccination and pregnancy toolkit which contains key messages, FAQs, social media assets, case studies and other resources. This can be found here.

JCVI's advice on the COVID-19 autumn vaccination programme states that a top up jab should be offered to anyone aged 5 - 49 years who is in a clinical risk group or are household contacts of people with immunosuppression and pregnant women.

Vaccination remains the best way to protect against the known risks of COVID-19 in pregnancy for both mother and baby, including admission to intensive care and premature birth.

Health and social care workers planning pregnancy, or who are currently pregnant, are eligible for the autumn vaccination and should contact their GP or hospital consultant for further guidance where necessary.

For more information, the UK Health Security Agency (formerly Public Health England) has produced a helpful guide to <u>COVID-19 vaccination for all women of childbearing age</u>. This is available on their website.

The <u>Royal College of Obstetrics and Gynaecology</u> and the <u>Royal College of Midwives</u> have also produced information to help you make an informed choice about getting vaccinated.

If you are trying to conceive, this should not affect your decision about vaccination. There is no evidence that the vaccines cause problems with fertility, or that they will cause any problems for women wanting to become pregnant now or in the future. The Lowdown recently produced a Q&A with NHS England on the <a href="COVID-19">COVID-19</a> vaccine, periods and fertility.

A letter published on 30 July urges healthcare professionals to do all they can to raise awareness of the vaccine's benefits among pregnant women, reassure them about any concerns and encourage them to come forward, as well as making every contact count in maternity and primary care services.

## Information on immunosuppressed third primary doses

If you had a severely weakened immune system when you had your first two doses, you're eligible for an additional third dose to complete your primary course before any booster doses.

This will usually be at least 8 weeks after your second dose, but your GP or hospital specialist may suggest a different time if you're having treatment that affects your immune system. You should have your booster from 3 months after your primary course.

Following JCVI's recommendations, you can then get a further, seasonal dose if your last dose was at least 3 months ago.



If you need further guidance, healthcare workers with a severely weakened immune system can contact their GP or hospital consultant, where necessary.

The COVID-19 Vaccination Communications team have developed a poster and FAQ which can be found <a href="here">here</a>.



#### 7. Increasing health and social care worker vaccination uptake: Top tips

## Running a successful campaign

Communication colleagues are well-practiced in running vaccination uptake campaigns every year for flu and we would recommend that you apply the same principles for this year's joint winter vaccinations campaign.

Some key things you can do through your communications include:

- Keep staff updated throughout your campaign make sure they have all the information they need on the vaccines and that they know how they can receive both of their jabs.
- Publicise vaccine uptake rates from departments and teams acknowledge and profile staff who have had the vaccines.
- Challenge misconceptions show evidence and research that addresses safety and efficacy concerns.
- Publicise senior members of staff having their vaccinations use them as vaccine champions to spread key messages.
- Promote drop-in clinics and mobile vaccinations make it as easy as possible for staff to get vaccinated including unsociable hours shift workers.



## Increasing healthcare worker vaccination uptake: five key tips

There are five key components of developing an effective staff vaccination programme. If useful, we have summarised these tips based on insight and what the most successful employers have done for flu and COVID-19 previously:



Tip	Further information	How can communications
1. Committed leadership	A successful healthcare worker vaccination programme is driven from the top. Boards and other governing bodies need to be seen to be committed to vaccinating the organisation's frontline workers.  Senior management should consider:  • Commitment to achieving 100% uptake ambition  • Evaluation of the programmes from the year before, including data, successes, challenges, and lessons learnt  • All board and senior management members having their vaccinations	<ul> <li>Publicise all board and senior management members having their flu vaccine and COVID-19 booster to staff</li> <li>Include a by-lined article signed from your Chief Exec or senior management members in internal communications – use this as an opportunity to encourage vaccination uptake, highlighting the importance of protecting patients, colleagues, and family and friends</li> <li>Host regular Q&amp;A sessions with members of the executive team to give staff a direct forum for asking questions and sharing concerns</li> </ul>
2. Easy access to vaccination	Working in health and social care is not a 9 to 5 job, and neither is it always based on one site.  Access needs to be as flexible as possible to ensure workers can access the vaccinations.  In healthcare settings, some things you can consider helping to increase flexibility include:  • Schedule extended hours easy access drop in clinics  • Physically deliver the vaccine to staff on wards, making it as easy as possible for them to be vaccinated  • Utilise staff who are on adapted working or light duties	<ul> <li>Issue clear communications to staff about how, and when, they can access either vaccine</li> <li>Create a dedicated intranet page for the vaccine which provides clear guidance on eligibility criteria and how to access the vaccine</li> <li>Emphasise the convenience of accessing vaccinations in all communications</li> <li>If staff are able to book vaccination via an internal booking platform, make sure the link is available to staff both online and offline – consider sending out texts with the link or producing handouts for staff with no access to a computer</li> </ul>



3. Balanced teams	When developing a staff vaccination campaign, it is important to involve as many different types of staff as possible to ensure good representation.  Put together a team of people responsible for ensuring the vaccinations are taken up by staff formed with representatives from all parts of your organisation, directorates, and staff groups.	<ul> <li>Personalise national campaign materials to feature images of people who work at the organisation</li> <li>Share images and stories from a diverse range of staff being vaccinated, include statements as to why the vaccines are so important to them</li> <li>Appoint a vaccination champion to each key work area or team and use them to share key information and messages amongst their colleagues</li> </ul>
4. Communications	Effective communications are vital for staff take up of the vaccinations. You should use all channels available to reach as wide an audience as possible. There are also some key activities you can include in your communications plan to help increase vaccination uptake.	<ul> <li>Publicise vaccination uptake rates and the comparative performance of individual departments or teams within the organisation</li> <li>Produce myth-buster content to challenge misconceptions and false information</li> <li>Use short films to help promote the vaccine including video tours of vaccine clinics so as staff know what to expect, or testimonials from staff who have had their jabs</li> <li>Carry out a mini staff survey to understand the reasons why some staff members have not yet received their vaccination, use this information to develop further communications</li> </ul>



## 5. Incentives and rewards

Staff appreciate recognition for their contributions to the health of others, including an incentive or reward aspect to a staff vaccination campaign can be effective.

Incentives don't need to cost a lot – you can be creative but ensure any reward fits in with your organisations culture and values.

Ensure that the board or governing body agrees on incentives and publicise that they do.

- Publish a regular break down of vaccination rates by different professional groups or departments, this might encourage a bit of healthy competition
- Recognise departments who have managed to get all their staff vaccinated
- Provide badges or stickers to staff who have had their vaccinations, something they can wear to indicate to others that they are vaccinated
- Be careful to get the balance correct between reward and perceived coercion.