**COVID-19 vaccination**

**Frequently Asked Questions (FAQs)**

**Updated: 02/03/2022**

These FAQs refer primarily to the Pfizer BioNtech and Oxford/AstraZeneca vaccines.

This is an iterative document that is updated regularly in response to feedback from those using it. If you have a question that is not covered in this document, please email the City and Hackney Public Health Team on: [testandtrace@hackney.gov.uk](mailto:testandtrace@hackney.gov.uk)

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# **General information**

## **What COVID-19 vaccines are currently available?**

In the UK, four COVID-19 vaccines have been authorised by the MHRA for use.

* The COVID-19 mRNA Vaccine BNT162b2 (manufactured by Pfizer BioNTech)
* The COVID-19 Vaccine AstraZeneca
* The COVID-19 Vaccine Moderna
* Janssen's single-dose COVID-19 vaccine (available later in the year 2021)

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
* 17 million doses of the Moderna vaccine
* 20 Million doses of the Janssen single dose vaccine.

Trials of other vaccinations are in progress and may be available soon.

The aim of the COVID-19 vaccination programme is to protect those who are at most risk from serious illness or death from COVID-19 or those at risk of transmitting infection to multiple vulnerable persons. As set out by the [JCVI (Joint Committee on Vaccination and Immunisation)](https://www.gov.uk/government/publications/priority-groups-for-coronavirus-covid-19-vaccination-advice-from-the-jcvi-30-december-2020/joint-committee-on-vaccination-and-immunisation-advice-on-priority-groups-for-covid-19-vaccination-30-december-2020).

## **Can I choose which vaccine I have?**

You can’t usually choose which vaccine to have, and when you book you’ll be offered appointments for vaccines that are suitable for you. Most people can have any of the vaccines, but some people are only offered certain vaccines:

* Pregnant women are usually offered the Pfizer/BioNTech or Moderna vaccine
* Under 40s are usually offered the Pfizer/BioNTech or Moderna vaccine
* Under 18s are offered the Pfizer/BioNTech vaccine
* Booster vaccines are given in the form of the Pfizer/BioNTech or Moderna vaccine

## **How many doses of the vaccine do I need?**

You should have 2 doses of the vaccine, while the booster programme for third doses is being expanded. It is now available to all healthy individuals aged 18 and over, as well as clinically vulnerable 16-17 year old.

Those between the ages of 12-17 are now offered two doses of the vaccine, 3 months apart, while the JCVI have recommended a booster for healthy 16-17 year olds (this is yet to be rolled out)

At present there is no guidance on the interchangeability of the different COVID-19 vaccines, although studies are underway.

Every effort should be made to complete the two dose course of the same vaccine.

## **Have second doses been moved forward? What do I need to do ?**

Second doses are really important to give you maximum protection from COVID-19. Given the increase in cases of the Delta variant, giving people the best possible protection from COVID-19 is vital. Emerging evidence, based on real-world data, suggests a better immune response when doses are given at least 8 weeks apart.

Those aged over 18 should be able to obtain their second dose from 8 weeks after their first.

## **What should I do if I received my first dose of a COVID-19 vaccination abroad?**

If a person has received a first dose of COVID-19 vaccine overseas that is also available in the UK, they should receive the same vaccine for their second dose. If the vaccine they received for their first dose is not available in the UK, the most similar alternative should be offered as per [this guidance](https://www.gov.uk/government/publications/covid-19-vaccination-programme-guidance-for-healthcare-practitioners) (see section on vaccine interchangeability guidance).

If the vaccine given for the first dose is not included in the list of approved vaccines by the MHRA, a full course of the locally-available COVID-19 vaccine is advised based on local provision.

Some individuals who were vaccinated as part of clinical trials are being offered a full course of an MHRA-approved vaccine, depending on which vaccine they received in clinical trials.

## **Can you catch COVID-19 between the two vaccine doses?**

Two doses (of the double dose vaccines) are essential, and there is currently no strong evidence to expect that the immune response from the vaccines would differ substantially from each other. Between the doses of the vaccines, please remember to follow public health guidance and key messages - even after you have had the vaccine.

There is now evidence that the immunity following the second dose wanes over time, hence the need for the booster dose which is now available to all over 18s. Booster doses are not specific to the COVID-19 vaccine, having been given to fight against other viruses like hepatitis B for many years.

## **How long will it take to become effective?**

The COVID-19 vaccines reduce the chance of suffering from severe COVID-19 disease. It may take a week or two for your body to build up some protection from the first dose of vaccine. Like all medicines, no vaccine is completely effective, so you should continue to take recommended precautions to avoid infection. Some people may still get COVID-19 despite having a vaccination, but this should be less severe.

The term ‘fully-vaccinated’ usually applies to individuals who received their second vaccine dose at least two weeks ago.

## **How effective is the vaccine?**

The vaccines that have been approved for use are classed as highly effective, even from just the first dose.

Early data has shown that two doses of the vaccine are not as effective against the now widely circulating **Omicron variant**, especially if it has been a significant length of time since the second dose. As such, the booster vaccine programme has been expanded to include all adults over the age of 18 and some clinically vulnerable younger groups. A booster dose has shown to be of benefit in reducing the likelihood of COVID-19 symptoms, while the effectiveness against hospitalisation with Omicron is around 88% (78-93%).

It is important to note that all vaccines approved for use in the UK are highly effective and offer the best protection against coronavirus.

## **How long does the vaccine last for?**

At this point it is difficult to say as the vaccine trials were not set up to answer this question, and how the vaccine will be given in the future is still being established. It is really important to go back for your second dose as this will provide more durable protection, while the booster vaccine (now available to all over 18) should help to top-up or boost your immunity and provide further protection.

The effectiveness of the vaccines will be monitored, and may change with the discovery of new variants, and can change with the emergence of new variants, although so far the vaccine has proved effective in reducing the impact of COVID-19 in the UK.

## **What proportion of people who have had both vaccinations end up hospitalised or die as a result of COVID-19?**

ONS data looking at deaths from COVID-19 between February and October 2021 showed, when adjusted for age, that the risk of dying from COVID-19 for people who had received a second dose at least 21 days ago compared with unvaccinated individuals was 99% lower and 78% lower in these two months, respectively.

The reason for the variation could be due to changes in the composition of affected groups, the level of background COVID-19 cases in the two months, as well as changes in immunity from prior infection, the variant involved, seasonal changes and the waning of vaccine effectiveness over time.

## **Why are people who have been vaccinated becoming hospitalised and dying?**

Unfortunately, despite the successful vaccination programme, further deaths are expected because no vaccination is 100% effective, immunity takes time to build up following a vaccine dose, and coverage across the population isn’t perfect. Even with 100% vaccine coverage across the population, some individuals would still be hospitalised and

unfortunately die from COVID-19, however this number would be far smaller than without widespread vaccine coverage.

Vaccine uptake in England is high, meaning the numbers of people vaccinated outweigh the numbers of unvaccinated people significantly. The vaccine rollout also prioritised high-risk groups first, meaning vaccine coverage in the elderly, and clinically vulnerable, is particularly high.

Although the vaccine has been shown to be very effective at preventing hospitalisation and death from COVID-19, some individuals at very high risk of illness and complications with the virus would still be more likely to be hospitalised and die than some unvaccinated individuals who are young, with few underlying conditions.

As such, it is likely we will continue to see a number of individuals who have been vaccinated being hospitalised and dying from COVID-19, however this number is far smaller than what would have been seen without high vaccination rates across the country.

## **What is the booster programme and how do I get a booster vaccine?**

Like with other vaccines, levels of protection may begin to decline over time, therefore a booster dose helps to extend the protection gained from the first two vaccine doses, leading to longer term protection.

This will reduce the risk of hospitalisation over the winter period. The vaccine offered as a booster will be either the Pfizer/BioNtech or Moderna vaccine. As of 29/11/21, some 17.5 million booster doses have already been administered.

To obtain the booster vaccine it must have been 3 months since your second dose and you must meet one of the following criteria as of 30/11/21:

* Be over 18
* Be aged over 16 with a health condition putting you at high risk of getting seriously ill from COVID-19
* Be aged 16 and over and be a main carer for someone at high risk of getting seriously ill from COVID-19
* Be aged 16 and over and live with someone who is more likely to get infections (such as someone with HIV, or who has had a transplant or is having certain treatments for cancer, lupus or rheumatoid arthritis
* People who are pregnant and in 1 of the eligible groups can also get a booster dose.

NB Health and social care workers and residents were prioritised during the booster rollout

For most people, you should wait to be contacted by your GP and invited for your booster dose. Some people however can book online, including:

* Frontline health or social care workers
* Those over 50
* Those 16 and over with health conditions that put you at high risk

The NHS is working on the booking system to increase bookable boosters to those over 18, while the JCVI, who advise the Government on vaccination now recommend that boosters are offered to healthy 16-17 year olds.

## **Can children be vaccinated?**

Routine vaccination for all children between the ages of 12-17 is now recommended, in addition to clinically extremely vulnerable groups who have been invited for their vaccination already.

Following infection, almost all children will have asymptomatic infection or mild disease, however the decision to vaccinate these groups incorporates the wider impact of COVID-19 on children, such as educational disruption and reducing spread to others.

The vaccine has been given to millions of 12 to 15 year olds in a number of countries, including 8 million in the United States. Data from these countries show that the vaccine has a good safety record.

The following can currently book a vaccine:

* Young people aged 12 to 18 years old are eligible for 2 doses of the vaccine.
* 16+ and adults over 18 are also eligible for the booster vaccination.
* 3rd doses and boosters (4th doses) for people with a severely weakened immune system aged 16+.

Whilst there are plans to introduce vaccination of 5-11 year olds, this has not been implemented in Hackney yet.

## **Can Pregnant women be vaccinated?**

The JCVI advises that all pregnant women are offered the Pfizer or Moderna vaccine (Pfier is preferred for those under 18 years) based on their age and clinical risk group. This decision was made following the study of real-world data from the US which showed about 90,000 pregnant women had been vaccinated without any safety concerns. Over 100,000 women in England & Scotland have now been vaccinated.

There have been no specific safety concerns identified with any brand of coronavirus (COVID-19) vaccines in relation to pregnancy, while recent data reveals that since July 2021, one in five COVID patients receiving treatment through a special lung-bypass machine were expectant mums who have not had their first jab. As with most pharmaceutical products, large clinical trials of COVID-19 vaccine in pregnancy have not been carried out.

In December 2021, following the recognition of pregnancy as a risk factor for severe COVID-19 infection and poor pregnancy outcomes during the Delta wave, pregnancy was added to the the clinical risk groups

## **Can breastfeeding women be vaccinated?**

## There is no known risk associated with being given a non-live vaccine whilst breastfeeding. JCVI advises that breastfeeding women may be offered any suitable COVID-19 vaccine.

The Green book states that emerging safety data is reassuring: mRNA was not detected in the breast milk of recently vaccinated women and protective antibodies have been detected in breast milk.

## **What is the second dose guidance for pregnant women?**

PHE’s Green Book advises that Pfizer and Moderna vaccines are the preferred vaccines for pregnant women of any age, because of more extensive experience of their use in pregnancy. Pregnant women who have already received a dose of AstraZeneca vaccine can complete with the same vaccine or with an mRNA product.

## **We have had lots of concerns with women who have been saying babies are being born with hearing loss. We have no idea if there is any evidence of this. Do you know of anything?**

We would need more information about this query, e.g. how many are "lots" and is a recent trend or historically. We will check local statistics to see if this information is confirmed by the data on the newborn hearing screening.

## **Does the vaccine affect periods/menstruation?**

There have been reports from women who have seen a change to their period cycle or symptoms after having their vaccination.

This joint statement from the Royal College of Obstetricians and Gynaecologists/Faculty of Sexual & Reproductive Health addresses these concerns:

[https://www.rcog.org.uk/en/news/rcogfsrh-responds-to-reports-of-30000-womens-periods-affected-after-COVID-19-vaccine/](https://www.rcog.org.uk/en/news/rcogfsrh-responds-to-reports-of-30000-womens-periods-affected-after-covid-19-vaccine/)

They acknowledge that changes to periods have been reported anecdotally following COVID-19 vaccination, however offer reassurance that these changes generally revert back to normal after one or two cycles. Women who experience unusually heavy bleeding, especially after the menopause, are encouraged to speak to a health professional.

There is no evidence that these temporary changes have an impact on a person’s future fertility, or their ability to have children, and it is especially important to get vaccinated if you are planning a pregnancy.

Further research is needed to establish what causes this temporary disruption in a woman’s menstrual cycle and at present there isn’t enough evidence to say that the vaccine is responsible as there are many causes of menstrual disruption, including COVID-19 infection itself, as well as stress.

The ZOE COVID Study also has some information that may be useful on this topic <https://covid.joinzoe.com/post/covid-vaccines-menstruation>

# 

# **New Variants**

## **What are New variants?**

All viruses naturally mutate over time, and SARS-CoV-2, the virus that causes COVID-19 disease, is no exception. Over time, changes can build up in the genetic code of the virus, and these new viral variants can be passed from person to person. Most of the time the changes are so small that they have little impact on the virus.

But every so often a virus mutates in a way that benefits it, for example allowing it to spread more quickly, and causes us to be concerned about changes in the way the virus might behave. In this case the variant may be considered a ‘Variant of Concern’ by the UK public health authorities.

Most mutations are not a cause for concern. Scientists around the world have been monitoring these throughout the pandemic. In the UK, we have a comprehensive genomics system which allows us to detect these different mutations.

Mutations of the virus can be officially designated as under investigation (VUI) or of concern (VOC). A VUI has mutations which are potentially concerning and UK or international community transmission. A VOC has demonstrated significant characteristics such as increased transmissibility, severity or ability to infect a person.

Currently, the B.1.617.2 variant of COVID-19, which has recently been renamed the Delta variant (the variant first identified in India), is the dominant variant of the virus in

the UK. This means that most people in the UK catching COVID-19, are catching this variant.

Public Health England have identified the spread of variants of COVID-19, in a number of localities across England. In order to gain a better understanding of the prevalence of the variants, and in order to suppress them, NHS Test and Trace may operate surge testing in certain postcode areas.

## **What is the Omicron variant?**

On 26 November 2021, the B.1.1.529 variant, named Omicron, was designated a variant of concern on the advice of the World Health Organisation (WHO). There are believed to be several mutations that may impact how easily it spreads or the severity of the illness it causes.

The variant originated in South Africa and it is not yet clear whether it spreads more easily compared to other variants (including the most widely circulating Delta variant) or whether it causes more severe disease than other variants. Data that is available at the moment suggests that there are increasing rates of hospitalisation in South Africa, but this trend alone is not enough to say whether this is due to the specific effect of the variant itself.

Symptoms with Omicron tend to be similar to other variants, while there is some evidence that there might be an increased risk of reinfection with it even if you’ve had a previous infection with a different variant, but this evidence is limited. Evidence is likely to become clearer over the coming weeks and months.

## **Will the vaccine cover any mutations in the coronavirus?**

Researchers have been looking at the effectiveness of the vaccines against new strains and results indicate that the vaccines have been effective against mutations and variants so far, while evidence will become clearer over the coming weeks on their effectiveness against the **Omicron** variant.

Vaccination has so far been effective against symptomatic disease, particularly after two doses and even more effective at preventing severe disease and death. While no vaccine offers 100% protection for everyone, they are still our best line of defence. If you are eligible, we urge you to come forward and be vaccinated and remember that two doses provide significantly more protection than one.

Regarding Omicron itself, early data suggests that a booster dose is very important in reducing the risk of hospitalisation and death.

## **Will there be a yearly vaccination for COVID-19 ?**

Viruses, such as the winter flu virus, often branch into different strains but these small variations rarely render vaccines ineffective. Researchers are constantly evaluating the data and in the future we may need a yearly covid vaccination (like the flu jab) to account for variants.

## **Are there any tests you can have before the vaccine to check your immunity?**

No.

## **Is there any guidance on the new variants?**

Researchers have been looking at the effectiveness of the vaccines against new strains and results indicate that the vaccines are still effective against mutations and variants. Viruses, such as the winter flu virus, often branch into different strains but these small variations rarely render vaccines ineffective.

New guidance might appear in the future if new variants that require different guidance emerge.

# **Accessing the vaccine**

## **Who is being vaccinated now?**

Anyone aged over 12 years old can be vaccinated now. Whilst there are plans to introduce vaccination of 5-11 year olds, this has not been implemented in Hackney yet.

## **How to book a Vaccine? Those 16 and over:**

If you are aged 16 and over, you do not need to wait to be contacted by the NHS, and can book both vaccine doses at a large vaccination centre/pharmacy using the national booking system.

The National booking system requires an NHS number, up to date and matching demographic details as registered on GP records. If you are currently registered with a GP and your information has changed but you have not yet informed your practice, an appointment cannot be booked through the system until GP records have been updated.

Local vaccination sites are available for those potentially unable to access the national booking service ie. homeless, no NHS number, walk-in same day appointments.

Everyone is entitled to a vaccination and will be offered and supported to book a vaccination whether it be through the national booking system, by invitation, their local GP practice or local vaccination centre offering appointments to those who cannot book through the ‘usual’ channels.

**Book your appointment online** - When you become eligible for the vaccination you can book your appointment via the national portal by calling 119 or visiting: nhs.uk/coronavirus

If you had to delay booking your appointment and the government announces new eligible age groups, you can still book your appointment at any time using the national portal details or by speaking to your GP.

**Beware of scams** - The vaccine is only available through the NHS and it is free. You will never be asked to pay or asked for your bank details.

## **Key messages:**

* The easiest way to arrange a vaccination is through the national booking service which can be accessed at [www.nhs.uk/covid-vaccination](http://www.nhs.uk/covid-vaccination)
* The system allows patients to choose a time slot and location that suits them
* NHS number and GP registration is needed to book online ate present
* Anyone unable to book online can call 119 free of charge, anytime between 7am and 11pm seven days a week.
* Note for those between the age of 16 and within 3 months of their 18th birthday are eligible for **one** dose only

## **How to book a Vaccine? Those between aged 12-15**

For most children in this age group, vaccination will be offered in school or by invitation from a GP. For most however, vaccination appointments are available online, but this is worth checking as provision varies by area.

Alternatively, you can book a vaccination appointment quickly at a local vaccination centre or participating pharmacy through the national [NHS booking system](https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/book-coronavirus-vaccination/) or by calling 119.

There are also some local walk-in centres where you may not need to book an appointment. Use the [NHS Grab a Jab finder](https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/find-a-walk-in-coronavirus-covid-19-vaccination-site/) to find out where these are.

## **What should a person do if they’ve received their first dose of a COVID-19 vaccination abroad?**

If a person has received a first dose of COVID-19 vaccine overseas that is also available in the UK, they should receive the same vaccine for their second dose. If the vaccine they received for their first dose is not available in the UK, the most similar alternative should be offered as per [this guidance](https://www.gov.uk/government/publications/covid-19-vaccination-programme-guidance-for-healthcare-practitioners) (see section on vaccine interchangeability guidance).

If the vaccine given for the first dose is not included in the list of approved vaccines

## **Who cannot have the vaccine?**

The vaccine should not be given to:

* Anyone who currently has a fever
* Anyone who has previously had a severe systemic allergic reaction to a previous dose of the same vaccine or any components of the Pfizer vaccine.  
  Further information can be found [here.](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/955548/Greenbook_chapter_14a_v6.pdf)

The vaccine is safe if you have diabetes, heart disease, high blood pressure, asthma and high cholesterol. The vaccine is safe if you are taking blood thinning medications e.g. warfarin, but you do need to tell the person giving the vaccine that you take these medications. If you are not sure or have any concerns, please speak to your doctor.

## **Can I have the vaccine if I am allergic to penicillin?**

Yes, there are no known harmful effects of having the Pfizer/BioNTech or AstraZeneca COVID-19 vaccines if you are allergic to penicillin.

## **What if I have an allergy to the vaccine?**

Vaccines are extremely safe and are given to millions of people every year without any problems. Most reactions are because of some other component of the vaccine, such as egg protein, if the person is severely allergic. When your vaccine is given, we will observe you for 15 minutes and have the ability to treat any reaction.

## **Can the vaccine overload your immune system?**

The vaccine will not overload your immune system. Your immune system kills millions of germs a day that enter your body, your immune system can manage the vaccine very easily.

## **Are vaccines artificial?**

Vaccines are man-made, but vaccines can prevent very serious conditions including COVID-19, meningitis and measles. These diseases used to kill millions of people but vaccines helped prevent this. Vaccines have saved billions of lives worldwide and are one of the best ways of taking action to look after your health.

The Moderna and Pfizer/BioNTech COVID-19 vaccines contain a segment of genetic material of the SARS-CoV-2 virus, which causes COVID-19. The genetic material ‘RNA’, codes for a specific viral protein. When administered, your cells use the genetic material from the vaccines to make the protein, which is recognised by your immune system and triggers a specific response.

The University of Oxford/AstraZeneca vaccine uses an unrelated harmless virus (the viral vector) to deliver SARS-CoV-2 genetic material. When administered, our cells use the genetic material to produce a specific viral protein, which is recognised by our immune system and triggers a response.

Both vaccines build immune memory, so your body can fight off SARS-CoV-2 in future.

## **Can the vaccine cause autism?**

No, there have been many studies to look at the link between vaccines and autism and none of them have shown any connection between the two.

## **Should I get the vaccine if I have already had coronavirus?**

Yes, we anticipate that immunity from the vaccine may be longer lasting than natural immunity. You should wait for **4 weeks** after you symptoms finished (or **4 weeks** after a positive test result if you had no symptoms) before you get the vaccine. The current guidance does not suggest any evidence of 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 the COVID-19 vaccine when it is their time to do so.

## **Should I have the vaccine if I have long COVID-19 symptoms?**

Yes, if you are in a priority group identified by JCVI. The MHRA have looked at this and decided that getting vaccinated is just as important for those who have already had COVID-19 as it is for those who haven’t, including those who have mild residual symptoms. Where people are suffering significant ongoing complications from Covid they should discuss whether or not to have a vaccine now with a clinician.

## **Should I have the vaccine if I have a cold/flu?**

People who are suffering from a fever-type illness should postpone having the vaccine until they have recovered.

## **Should I have the vaccine if I currently have COVID-19?**

You should wait until at least 4 weeks after you had symptoms, or 4 weeks after your positive test if you didn’t have any symptoms, and until you have recovered from your COVID-19 infection, before having the vaccine.

## **Does the flu vaccine protect me from COVID-19?**

No. The flu vaccine does not protect you from COVID-19**.** Some people may be eligible for both the flu and the COVID-19 booster vaccines, and if you’re offered both vaccines, it's safe to have them at the same time

## **Do you have to pay for the vaccine? And do you need identification?**

No. Everyone who is eligible for the vaccine can get one free of charge. Even if someone is not registered with a GP, they do not need to pay (however this would be a great opportunity to register!).

## **What if I have No Recourse to Public Funds (NRPF)?**

Those with no recourse to public funds are also eligible for the free vaccine. You do not have to have an NHS number or formal ID to receive the vaccine.Unregistered patients who are eligible for vaccination, and who request a vaccination will be assessed for eligibility and vaccinated. They should not be turned away or signposted elsewhere.

If you are eligible for the vaccine you can call 119 – a manual record will be completed so that you can access the vaccine (calls to 119 are free of charge, call anytime between 7am and 11pm seven days a week).

Local vaccination sites are available for those unable to access the national booking service ie. homeless, no NHS number, and offers walk-in same day appointments.

## **Migrant health: Can I get the vaccine ?**

Yes. Overseas visitors to England, including anyone living in the UK without permission, will not be charged for:

* testing for COVID-19 (even if the test shows they do not have COVID-19)
* treatment for COVID-19, including for a related problem called multisystem inflammatory syndrome that affects some children
* vaccination against COVID-19

No immigration checks are needed for overseas visitors if they are only tested, treated or vaccinated for COVID-19.

For more information please see [COVID-19: migrant health guide.](https://www.gov.uk/guidance/covid-19-migrant-health-guide?utm_medium=email&utm_campaign=govuk-notifications&utm_source=dd011d41-85ec-4944-9435-aeaac37e4dd2&utm_content=daily)

## **Do I need any tests before I have the vaccine?**

No, there are no tests which need to be done before the vaccine. You do not need a coronavirus test or a coronavirus antibody test.

## **If I have the vaccine, can I still pass COVID-19 on to others?**

It is vital that everyone follows the national guidance. While the vaccine will reduce your chance of becoming seriously ill it does not give 100% protection and we do not yet know whether it will stop you from catching and passing on the virus, so it is still important to follow the guidance in your local area to protect those around you.

National guidance will continue to be reviewed by the Government and updated when appropriate. Please find the latest guidance [here.](https://www.gov.uk/guidance/national-lockdown-stay-at-home)

# **Safety and understanding the Clinical Trials**

## **How has Hackney reacted to the vaccine hesitancy?**

The Council, the NHS and local community organisations are working really hard to ensure people from all backgrounds feel confident to take the vaccine when it is offered to them.

The Council and local partners are doing a number of things to increase vaccine uptake locally this includes:

* a [poster campaign](https://drive.google.com/file/d/12XCPkZvtZcrJV5cFsPZLvqCmi20R14wJ/view?usp=sharing) right across the borough using local GPs
* a [booklet](https://drive.google.com/file/d/1-xCLK0TBhrbZMu_08r1b1gg44wCOiEIM/view?usp=sharing) sent to each home in the borough, which is also being translated and printed in five widely used community languages (French, Spanish, Arabic, Bengali, Turkish)
* four pages of content in Council publications [Hackney Life](https://drive.google.com/file/d/1I4KTz9yxRla39oc3PEsUetgqHS9DJC70/view) and Hackney Today sent to all homes.
* Community webinars, including ones for [Black communities in Hackney](https://www.hackneycitizen.co.uk/2021/02/12/video-campaigner-former-hackney-councillor-covid-vaccine/), Bengali and [Kurdish and Turkish,](https://new.enfield.gov.uk/news-and-events/london-councils-to-host-covid-19-vaccine-informati/) with more planned through HCVS.
* [A school curriculum](https://www.hackneycitizen.co.uk/2021/02/11/lessons-covid-19-anti-vaccine-movement-hackney-schools/) to help young people understand why the vaccine is important
* Over 30 videos produced by local medical professionals, faith and community leaders to answer FAQs on the vaccine and encourage uptake (these can be seen on the [Council youtube](https://www.youtube.com/channel/UCI8Co08m7snne_v8zs6MUWg))
* A social media and digital advert campaign
* Using almost 200 [community champions,](https://www.vchackney.org/phcc/) who are volunteers from right across hackney, to share messages directly through community whatsapp and other message platforms
* Helping the NHS set up community vaccine takeover clinics such as the one for the [Orthodox Jewish community](https://jewishnews.timesofisrael.com/more-than-350-charedim-attended-mass-vaccination-event-after-shabbat/)
* Working with TfL to ensure information on how to get to the mass vaccination centres is in place in Hackney’s stations and promoting the [jabs journey planner](http://tfl.gov.uk/jabs) on Council channels
* Working with NHS partners to ensure that vaccines will be offered at locations and venues that are convenient and comfortable for Hackney’s diverse community groups

## **How has turnout improved and have people from BAME communities made reservations for the Covid Vaccine?**

People in Hackney from all different backgrounds are taking the vaccine, we will have to wait to see how our efforts to inform and encourage people to take the vaccine has affected the uptake data as this takes time to be reflected in the data. The Council is currently working with the NHS so residents can see the data on the Council website, this is set to be published soon and will be updated regularly:<https://hackney.gov.uk/coronavirus-data>

## **How do we know the vaccine is safe?**

The vaccines have gone through thorough clinical trials and the MHRA, the official UK regulator, has said that both of these vaccines have good safety profiles and offer a high level of protection, and we have full confidence in their expert judgement and processes.

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.

## **How has the vaccine been developed so quickly?**

Scientists and researchers have been studying coronaviruses for many years and so the vaccine development process did not start from scratch. In addition clinical trials were able to be completed quickly due to large financial support from governments and a large volume of participants recruited in a short space of time. The process is just as rigorous and no corners have been cut in the process. Lots of people and leading scientists came together to support this work.

## **Was the trial pool as large as you would usually expect?**

Yes, a lot of work on coronaviruses has happened over the past ten years which has been built upon since March 2020 in the development of the COVID-19 vaccine.

## **What is the evidence to show the vaccine is safe for all communities?**

The phase three study of the Pfizer BioNTech COVID-19 vaccine demonstrated a vaccine efficacy of 95%, with consistent efficacy across age, gender and ethnicity. The participants were White, Black or African American, Hispanic/Latino, Asian and Native American/Alaskan.

The safety data for the AstraZeneca vaccine from over 20,000 participants enrolled across four clinical trials in the UK and Brazil and South Africa has shown that there were no serious safety events related to the vaccine. Participants were from diverse communities who are healthy or have stable underlying medical conditions.

The current guidance suggests that neither of the vaccines works differently in different ethnic groups.

## **Recent research has shown blood clots may be a side effect of the AstraZeneca vaccine. What should I do if I am contemplating having the vaccine?**

On 7 April 2021, the Joint Committee on Vaccination and Immunisation (JCVI), which advises the UK Government on immunisation, released a [statement on use of the AstraZeneca COVID-19 vaccine](https://www.gov.uk/government/publications/use-of-the-astrazeneca-covid-19-vaccine-jcvi-statement/jcvi-statement-on-use-of-the-astrazeneca-covid-19-vaccine-7-april-2021).

JCVI has weighed the relative balance of benefits and risks and advise that the benefits of prompt vaccination with the AstraZeneca COVID-19 vaccine far outweigh the risk of adverse events for individuals 40 years of age and over and those who have underlying health conditions which put them at higher risk of severe COVID-19 disease.

If you’re under 40, you can book your vaccine on the national booking system and you’ll only be shown appointments for the Pfizer/BioNTech or Moderna vaccine. If you contact one of the local call centres just make sure you state your age and we can book you into the correct session.

Health experts have said that for almost everyone, irrespective of their age, if they had a first dose of the AstraZeneca COVID-19 vaccine and not suffered a serious reaction then they should have their second dose of the same vaccine.

## **Are Covid tests safe? Can they cause cancer ?**

Both the Rapid (lateral flow) and PCR (polymerase chain reaction) tests are safe for use.  
Lateral flow tests have been rigorously tested and are safe to use on a regular basis. Any suggestion otherwise is inaccurate and [harmful misinformation](https://www.bbc.co.uk/news/56680399).

1-2ug/g of ethylene oxide is used in the swabs, this is a safe amount and does not cause cancer. Any suggestion otherwise is inaccurate and harmful misinformation. Ethylene oxide is only used in the sterilisation of swabs and it is one of the most commonly used sterilisation tools in the healthcare industry, principally applied by manufacturers to keep medical devices safe.

We are working in lockstep with social media platforms to ensure they are identifying and taking action to remove incorrect claims, such as this, about the pandemic, including deliberately false information that could endanger people's health.

The Medicines and Healthcare products Regulatory Agency (MHRA) is the UK’s regulator of medicines, medical devices and blood components for transfusion, responsible for ensuring their safety, quality and effectiveness.

# **Vaccination side effects**

## **What are the side effects of the vaccine?**

Like all vaccines the covid vaccines can cause side effects, although not everybody gets them.

The most common side effects of both vaccinations are:

* Pain and mild irritation around the vaccination site
* Tiredness
* Headache
* Muscle pain
* Chills
* Joint pain
* Fever

Most side effects are mild or moderate and go away within a few days of appearing. If side effects such as pain and/or fever are troublesome, they can be treated by medicines for pain and fever such as paracetamol.

## **Will the vaccine give me COVID-19 ?**

No, the vaccine does not have any virus in it. It only contains a component from the virus that will make your body recognise the virus if you ever encounter it in the future (think of it as memory). If you do pick up the virus in real life, your body will kill the virus straightaway and you shouldn’t feel unwell.

## **Will the vaccine change my DNA?**

No, the vaccine will never touch your DNA or genetic material, and as a result can’t interfere with your genes.

## **Are ethnic minority people more likely to get side effects from the vaccine?**

No, there is no evidence that ethnic minority people are more likely to get adverse effects. It is important that those from ethnic backgrounds access the vaccine when asked as we do know that COVID-19 does affect this group disproportionately.

## **Can I have the vaccine if I am on blood thinners eg Aspirin/Warfarin?**

Yes. If you take any medications that thin the blood e.g. warfarin, the vaccine is still safe, but you may be more likely to bruise after the vaccine. It is important to tell the person giving the vaccine that you take these medications and you may be asked about them at the vaccination centre. If you are not sure or have any concerns, please speak to your doctor.

## **Is the vaccine compatible with other medications?**

The vaccine is safe and has been tested extensively, so it can be taken by people with existing medical conditions, including those on medications.

## **How safe and effective is the vaccine for people who are immunocompromised?**

The vaccine is safe for people who are immunocompromised and is likely to provide some benefit. People who are immunocompromised may not build such a strong immune response as others but we do anticipate that the benefits of the vaccine will outweigh the risk of COVID-19 to these individuals.

## **If you are vaccinated can you get false positive PCR test results?**

No, the vaccine will not give a false positive swab test result.

# **Logistics and life after vaccination**

## **Where can I get the vaccine?**

## You can’t attend a vaccination site without an appointment. In Hackney there are a number of vaccination sites: Bees Pharmacy, 199-201 Rushmore Road, Clapton, Hackney E5 0HD Boots Fleet Street – City of London, 120 Fleet St, EC4A 2BE Bocking Street Vaccination Centre, Hackney Central E8 3RU Clockwork Pharmacy, 398-400 Mare Street, Hackney E8 1HP Day Lewis Pharmacy – Stoke Newington, Stoke Newington Road, N16 8AD Haggerston Pharmacy, 201 Haggerston Road, E8 4HU John Scott Health Centre, Green Lanes, Hackney N4 2NU Silverfields Chemist, 141 Homerton High Street, E9 6AS Some residents will also be invited to attend the mass vaccination centres at: Westfield Shopping Centre, Stratford **Walk-in clinics**

Community groups across Hackney are running pop-up walk-in clinics for those 18+ who need their first dose and those who need their second dose of the Pfizer vaccine.  
  
To guarantee your appointment please ring 020 8356 3111. Walk-ins are available subject to availability. Please regularly check <https://hackney.gov.uk/coronavirus-vaccine> for regular updates on walk-in clinic dates.

## **Is it OK for voluntary sector organisations/community groups to refuse entry to unvaccinated service users?**

The organisations should follow the national guidance. If the guidance allows entry, they cannot refuse it but they could request users to wear a face covering or keep their distance. It must be made clear to users that this is voluntary and if requested organisations should provide a good reason for it, e.g. rising infection rates/safeguarding other users. If an organisation requests a user to wear a face covering when it is no longer a legal requirement to do so, they should consider providing the covering.

# Helping your community understand vaccines

## **How can we encourage our communities to take the vaccine?**

We need to emphasise the seriousness of the virus and how dangerous it is to vulnerable people. We should also be emphasising how effective the vaccine is and that it is safe and has been robustly tested in full clinical trials.

You can also [sign up to be a Public Health Community Champion](https://www.vchackney.org/phcc/) if you live, study, volunteer or work in City and Hackney.

## **Is the Vaccine Halal?**

The British Islamic Medical Association have produced a helpful guide for the Muslim community which can be found [here](https://britishima.org/pfizer-biontech-covid19-vaccine/).

## **Are the vaccines vegan/vegetarian friendly? Do they include any parts from foetal or animal origin?**

The vaccines do not contain any meat derivatives or porcine products or material of foetal or animal origin.

## **How can we ensure that we are giving factual information?**

Please use any of the resources we have provided you as community champions. We would recommend that you check all other sources of information that you read before sharing it. If you are not sure about the validity of any information, please email the City and Hackney Public Health Team: [testandtrace@hackney.gov.uk](mailto:testandtrace@hackney.gov.uk) and we can support you.

## **Where can I find out more?**

* Pfizer [patient information leaflet](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/940566/Information_for_UK_recipients_on_Pfizer_BioNTech_COVID-19_vaccine.pdf)
* Oxford/Astra Zeneca [patient information leaflet](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/948335/Information_for_UK_recipients_COVID-19_Vaccine_AstraZeneca.pdf)
* [East London HCP FAQ](https://www.eastlondonhcp.nhs.uk/ourplans/covid-19-vaccine-faqs.htm)
* Public Health England’s [Green Book Chapter 14a COVID-19 SARS-CoV-2](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/978508/Green_book_chapter_16April2021.pdf)
* [COVID-19 vaccination patient leaflet](https://www.healthpublications.gov.uk/ViewArticle.html?sp=Smaincovidvaccineleafletpatient)
* Patient leaflets on what to expect [after your COVID-19 vaccinations](https://www.healthpublications.gov.uk/ViewArticle.html?sp=Swhattoexpectaftermycovidvaccinationleaflet8pdla5)
* G[overnment leaflets available here](https://www.gov.uk/government/collections/covid-19-vaccination-programme)
* [Coronavirus Infection and Pregnancy](https://www.rcog.org.uk/en/guidelines-research-services/guidelines/coronavirus-pregnancy/covid-19-virus-infection-and-pregnancy/)
* [Coronavirus Vaccines, pregnancy and Breastfeeding](https://www.rcog.org.uk/en/guidelines-research-services/coronavirus-covid-19-pregnancy-and-womens-health/covid-19-vaccines-and-pregnancy/covid-19-vaccines-pregnancy-and-breastfeeding/)
* [Coronavirus and Fertility](https://www.bartshealth.nhs.uk/news/the-covid19-vaccines-do-not-affect-fertility-in-women-or-men-10161)
* [Covid Fertility and pregnancy FAQ](https://mcusercontent.com/ec5dea9536bde16d5a3153530/files/50653253-94a4-4162-91e0-189e837b7621/Fertility_pregnancy_FAQs_v9.pdf)
* [COVID-19 vaccination and blood clotting](https://www.gov.uk/government/publications/covid-19-vaccination-and-blood-clotting)
* Dr Husbands, Director of Public Health FAQ [Video](https://www.youtube.com/watch?v=kHpoYSGbB2A&feature=emb_title)
* Please contact [testandtrace@hackney.gov.uk](mailto:testandtrace@hackney.gov.uk) with any further specific queries.The inbox is staffed 9am-5pm Monday to Friday.