

Healthwatch Halton Advisory Board

1.00pm Thursday 15 April 2021

Public Board Meeting Agenda

HW Advisory Public Board meetings include an opportunity for members of the public to feedback issues about local Health and Social Care issues at the end of the meeting.

		Item	Enclosure (Paper, Verbal etc)	Outcome (Noting, Decision etc)	Presenter
1.00pm		Private session to discuss confidential staffing/ operational issues. Closed Session- not open to the public.			
		Close private session and open Public HAB Meeting			
1.30pm	1	Welcome and Apologies	V		Chair
	2	Declaration of Interests	V		All
1.35pm	3	Minutes and Action log from Public Board Meeting update	V&P		Chair
1.40pm	4	Work Programme Project Updates <i>To update the Board and Public on the work undertaken to deliver the Work Programme including the Enter and View Programme</i>			Staff Team
1.55pm	5	Meeting feedback reports by HAB members <i>Meeting feedback reports and updates for the Board and Public including, feedback from the Health and Well-being Boards, Health and Social Care Overview and Scrutiny Committees, CCG/Acute Trust Board/Community services trust board, Safeguarding Board, Primary Care Commissioning Committee and other Strategic meetings and community feedback</i>			LHM
2.10pm	6	Intelligence/Feedback update – public issues <i>A report on the issues that are being reported to HW by the public, any feedback from partners and meetings with them and any operational meetings attended by the Manager of Healthwatch Halton</i>			LHM
2.25pm	7	Decisions to be made by the Advisory Board			
	7a	Escalation to HW England/ CQC			Chair
	7b	Publish a report/ agree a recommendation made in a report			Chair
	7c	Request information from commissioners/ providers			Chair
	7d	Which premises to Enter and View and when (Completion of the Enter and View visit checklist is required)			Chair
	7e	Decision about subcontracting/ commissioned work			Chair
	7f	Whether to report a matter concerning your activities to another person- e.g. CCG, Voluntary Sector, another Healthwatch, Advocacy services			Chair
	7g	Which health and social care services HW is looking at for priority project <i>(Completion of the Healthwatch Priority Project Decision Making Checklist is required)</i>			Chair
	7h	Refer a matter to Overview and Scrutiny committee			Chair
	7i	Breach/s of the decision-making process			Chair
2.40pm	8	Health and Social Care Issues from the public			Chair
2.50pm	9	Any other business			Chair
3.00pm	10	Date and Time of Next Meeting			

Chair – Healthwatch Advisory Board Chair

LHM – Local Healthwatch Manager

Action Log**Healthwatch Halton Advisory Board (HAB) Meeting****Date 15th April 2021**

Task Number	Agenda Item	Task Description	Assigned to	Status /due date
1.	Private meeting	Send out the MS Teams link with the HAB papers	CS	
2.	Private meeting	Dave O Connor and Dave Wilson to meet to discuss Whiston Patient Engagement Meeting attendance	DW	May
3.	4	Chase up recommendations from the Young Peoples Mental Health Report in October time	DW	Ok
4.	4	Share the completed maternity report with the Board	DW	End of April
5.	5	Chase up the policy for missing items at Whiston Hospital	JB	June
6.	Private meeting	DW to complete the decision making template for the Dentistry project and send to HAB	DW	End of April

Healthwatch Health Advisory Board
Held via MS Teams on 18th February 2021
Public Board Meeting Minutes

In attendance: Kath Parker (KP) HAB Chair

HAB members: Paul Cooke (PC)

Maureen Isherwood (MI),

Diane McCormick (DMc)

Jane Pritchard (JP)

Dave Wilson (DW, Manager, HWH), Louise Delooze (LD, Community Outreach Lead, HWH), Irene Bramwell (IB, HWH Community Outreach Lead), Clare Screeton (Board Clerk), Elizabeth Learoyd (ECS Director)

Apologies: Dave O'Connor

Invitees: Sue Conolly

Time		Item
1.00pm		Private session to discuss confidential staffing/ operational issues. <i>Closed Session- not open to the public.</i>
		Public HAB Meeting
1.30pm	1	The Chair welcomed Sue Conolly to the meeting. Apologies were received by Dave O Connor
	2	Declaration of Interests - None were noted
1.35pm	3	Minutes and Action log from Public Board Meeting update There was an error in public minutes that PC sent apologies for the meeting although he did attend. This has been amended. DW updated the HAB on the progress of the workplan IB and LD are working on Engagement plan and JB on the comms. They are using the priorities from other organisations such as One Halton and the local trusts quality accounts to shape their priorities. EL has also suggested a public survey. <ul style="list-style-type: none"> • Action – Completed workplan to be shared at next meeting in April. • Action – Conflict of interest document – completed. • Action – Calendar of strategic meetings shared with HAB – completed. • Action – JP confirmed she can attend more meetings. • Action – Maternity, this will be discussed with DMc at next meeting. • Action – Phlebotomy clinic still issues people queuing outside in cold and rain DW to contact the CCG
1.40pm	4	Work Programme Project Updates The zoom meetings held by LD with the 'Tuesday Chat' banner were very successful and had speakers from <ul style="list-style-type: none"> • Mind • Age UK Mid Mersey Other speakers that will be attending from <ul style="list-style-type: none"> • NightStop • Parents in Mind • Health Improvement Team • Government Census • Halton Health Hub

Time		Item
		<ul style="list-style-type: none"> • Medicines Management • End of Life / Palliative Care <p>Maternity Project - The team have spoken to 12 mums as part of the Maternity project and completed their patient stories. A large variety of experiences have been captured but all affected in different ways by the pandemic. A zoom session by Parents in Mind is to run alongside this project and may aid women who have struggled or are currently struggling. Final report will be shared at April meeting.</p> <p>Thrive project - The Thrive survey will be completed by Halton Speak Up groups during half term, before closing, as they wanted their group to feedback also. Also discussed and shared with the Youth Programme Manager from Halton BC as well as the many other organisations mentioned last time.</p> <p>GP Website Survey - We have completed the first part of the GP Website Audit and DW in the process of collating, verifying, and writing the draft report.</p> <p>Covid Action Feedback survey from HW England questions around if they have had the vaccine and if not why not? As the age brackets drop it will have a better view of the barriers that they face.</p>
1.55pm	5	<p>Meeting feedback reports by HAB members</p> <p>The Chair queried if PC attended the Commissioning and service development meeting as she had been invited. Only one representative from HW Halton need attend so it was agreed that PC would attend. PC did mention that the topics were based quite heavily around Warrington. DW said that they change the agenda as the needs arise. PC said he would attend and keep the Board advised.</p> <p>DMc had little to update as all her meetings are next week so will update in next report.</p>
2.10pm	6	<p>Intelligence/Feedback update – public issue</p> <p>LD raised the issues with 119 if you do not speak English. You often have to go through several options it is very confusing. Also you cannot access if you do not have a phone and are isolating. This has been escalated to NHS England and DW will report the response to the Board.</p> <p>DMc said that feedback about the vaccination centres was overwhelmingly positive online. The only issues that need to be raised is at the stadium for disabled patients as there are steps and a slope which can prove difficult this will be fed back. DMC also shared an example of good practice. Appleton Village Pharmacy had placed a post on their social media to say that they had appointments available for the vaccination. All the appointments were filled, and no vaccines were wasted.</p>
2.35pm	7	
	7a	<p>Escalation to HW England/ CQC – PC said that HW England had small grants for local HW and would be interested in seeing the reports of how the money was used. He questioned if Halton could possible apply for one. DW said that as they are often a very structured grants with specific targets at this moment in time the do not have capacity. The Board agreed.</p>
	7b	<p>Publish a report/ agree a recommendation made in a report</p>

Time		Item
		None 2 will be published in April
	7c	Request information from commissioners/ providers DW is exploring priorities with other providers
	7d	Which premises to Enter and View and when (Completion of the Enter and View visit checklist is required) No progress made as yet to the plans for visits to Care Homes DW has contacted providers to see if they can engage digitally. Digital inclusion is proving difficult with hard to reach groups. Deafness resource have engaged well and got involved in the 111 consultation. They will continue to do targeted engagement. Deb Faulks from ECS will share the work that she has done around digital inclusion.
	7e	Decision about subcontracting/ commissioned work DW updated the HAB on the Woodview feedback that they started pre lockdown. 500 parents were invited to feedback about the service. The main issues being around assessment. Report will be published and presented at next meeting.
	7f	Whether to report a matter concerning your activities to another person- e.g. CCG, Voluntary Sector, another Healthwatch, Advocacy services None
	7g	Which health and social care services HW is looking at for priority project The Chair asked the HAB at the last meeting to think about priorities for upcoming year and asked for suggestions and feedback. Dentistry – All agreed that they could look at this and the effect that this had on oral health during lock. JP said that people felt they had no other choice but t Refugees/asylum seekers – All agreed and IB already has connections within the community for outreach Buddhist Temple – IB and LD will contact the leaders to see if the would like to engage. Care Home Visit – All agreed that we could look at this IB expressed safeguarding concerns for residents that have no contact with their relatives in care homes as it has a detrimental effect on their mental health. Domestic Violence and Rape – DW said that this, may be out of the HW remit. <ul style="list-style-type: none"> • Action – DW to explore outreach with victims of domestic abuse and whether this falls within the HW remit • Action – Dentistry Decision making checklist
	7h	Refer a matter to Overview and Scrutiny committee DW said that it is not always each to raise an issue. There needs to be a more structured avenue for HW to get on the Agenda when an issue is raised this has not been delivered.
	7i	Breach/s of the decision-making process None
2.45pm	8	Health and Social Care Issues from the public DMc shared feedback from parents of children with additional needs that appear to be bounced around the system. The schools are referring to Woodview and when they are not accepted,

Time		Item
		<p>they are sent back to the school that say they do not have capacity. The parents are frustrated, and the children are considered vulnerable. DW advised the parents to make formal complaints with the local authority.</p> <p>MerseyCare and Northwest Boroughs merger is on hold due to lockdown. This may affect the service which is already under immense pressure due to mental health cases rising due to the pandemic. DW advised all the HAB to encourage people to feedback to HW so that they can take it to commissioners. Or provide an advocate for complaints.</p>
2.50pm	9	<p>Any other business</p> <p>PC asked for an update on the PCNs as HW Halton had reached out to see if they could have their vaccination plans but as yet he has had no response.</p>
3.00pm	10	<p>Date and Time of Next Public Meeting: 15th April 1.30pm – 3pm</p>



Vaccine attitudes report
March 2021

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DRAFT

Introduction

Healthwatch Halton is the independent voice of the public in health and social care services in Halton. We gather feedback from members of the public about their experiences of using health and social care services. We use that feedback to work with service providers and commissioners to find ways of improving services for the public. One of the ways that we collect feedback is through carrying out a focused project around particular services, conditions or groups within the community.

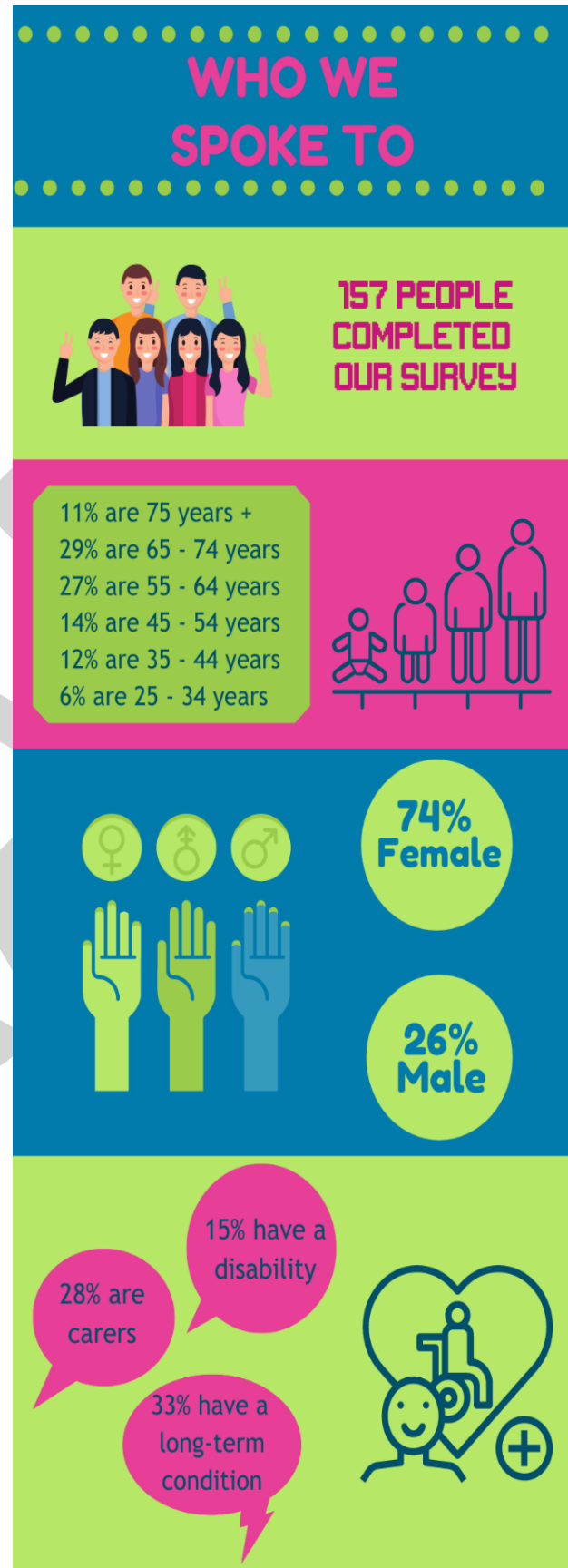
With the national rollout of the Covid-19 vaccination, we wanted to take this opportunity to assess how residents of Halton feel towards the vaccine and how the vaccination programme is being run locally, and to gather their experiences, ideas and concerns so that they can be represented to key stakeholders.

What we did

Due to the lockdown restrictions in place at the time, we were not able to speak to people on a face-to-face basis, so the feedback for this project was gathered using an online survey.

The survey was made up of 9 multiple-choice questions, and 6 open text questions that enabled respondents to expand on their responses. The survey was available online from Thursday January 28th 2021 until Thursday 11th March 2021.

Who took part?

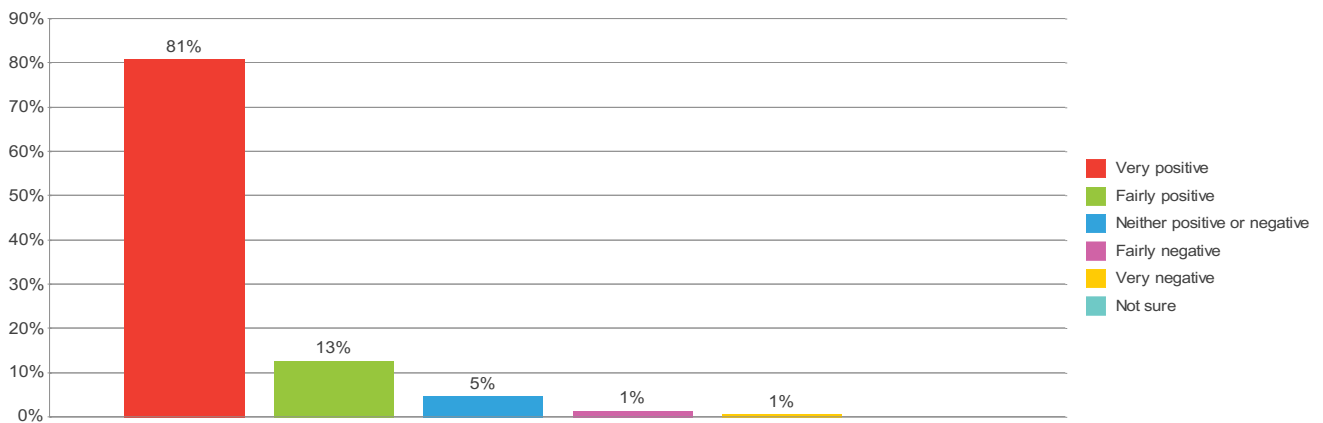


Findings

The survey was split into two sections, the first section asked participants their thoughts and feelings about getting the Covid-19 vaccine, and the second section asked participants their thoughts and feelings about the information provided about the Covid-19 vaccine.

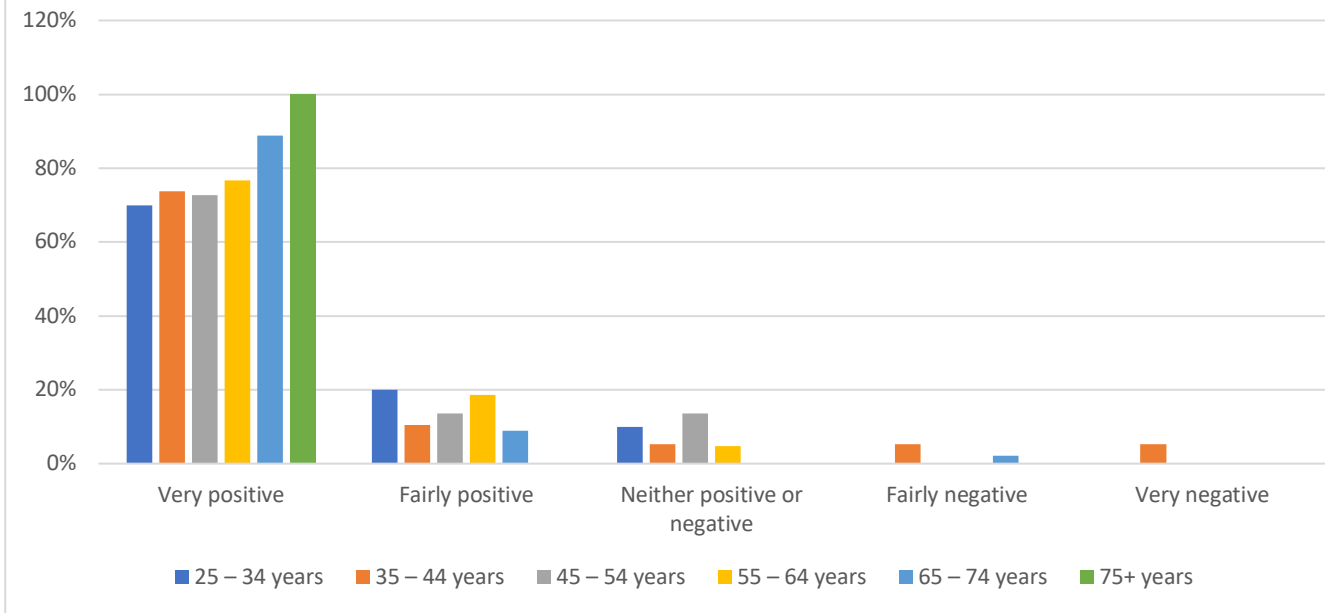
Participants were asked about their sentiment towards vaccinations in general and 81% of respondents indicated that they were held a *very positive* view, 13% held a *fairly positive* view, 5% held *neither a positive or negative* view, 1% held a *fairly negative* view, and 1% held a *very negative* view of vaccines.

Thinking of vaccinations in general, such as those given for flu, polio or tetanus is your view of vaccinations



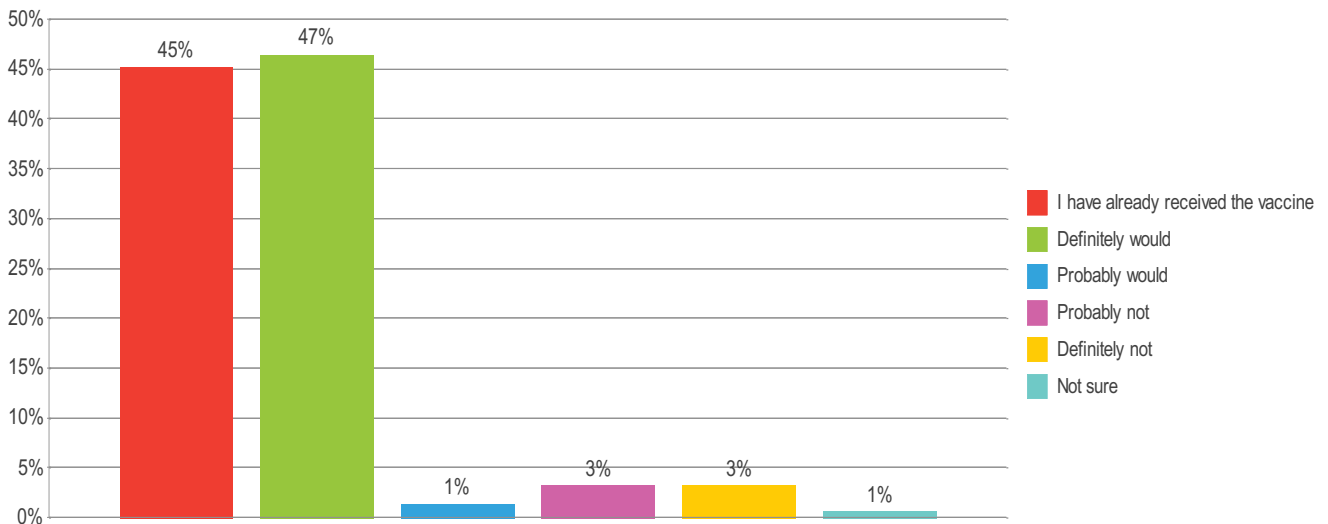
Age: All the age groups reported they held a *very positive* view of vaccinations more frequently than any of the other options, but the 75 years and over group reported this exclusively (100%). The most negative view towards vaccines was held by the 35 – 44 years age group, who reported that they had a *fairly negative* view (5.3%) and a *very negative* view (5.3%), all the other age groups did not report any negative views except the 65 – 74 years age group who reported a *fairly negative* view (2.2%).

Attitude towards vaccinations in general by age



When participants were asked the likelihood of them accepting the Covid-19 vaccination, 45% reported that had *already received the vaccine*. A further 47% stated that they *definitely would* have the vaccine, while 1% stated that they *probably would* have the vaccine, 3% stated that they would *probably not* have the vaccine, and 3% stated that they would *definitely not* have the vaccine. 1% of respondents stated that they were *not sure* whether they would have the vaccine or not.

If you were offered a vaccine against COVID-19 (Coronavirus), and at no charge through the NHS, how likely would you be to get vaccinated?



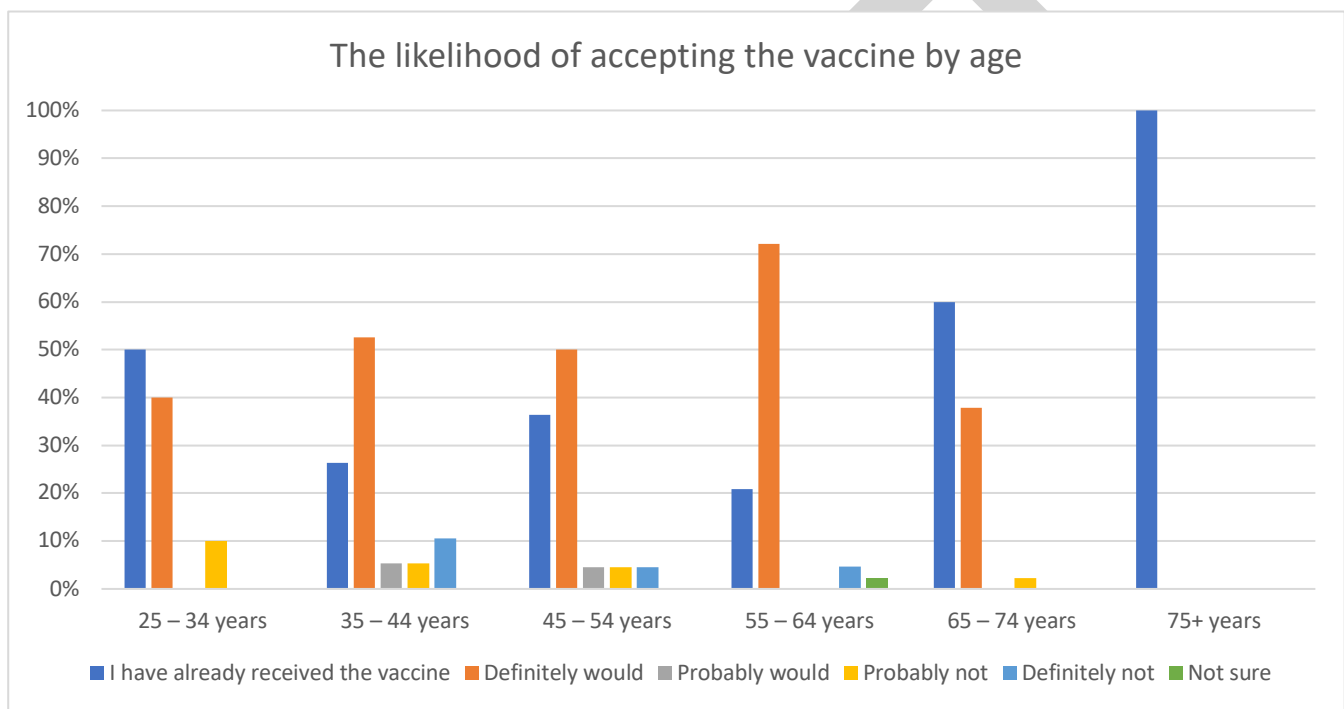
Age

Participants in all age categories reported that they had already received the vaccine, with 100% of the over 75 age group indicating this to be the case. In every other age category, the majority of participants who had not

already received the vaccine, reported that they *definitely would*, 50% of 25 – 34 years, 52.6% of 35-44 years, 50% of 45 – 54 years, 72.1% of 55 – 64 years, and 37.8% of 65 – 74 years.

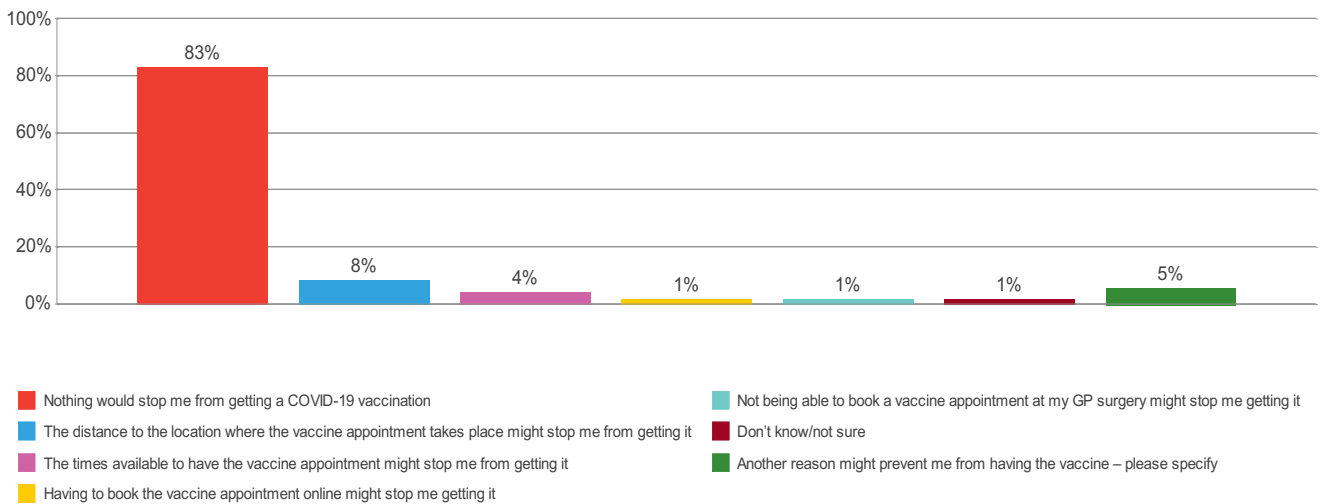
Respondents who reported that they *probably would* accept the vaccine belonged to two of the age categories, these were the 35 – 44 years (5.3%) and the 45 – 54 years (4.5%). Those who reported that they would *probably not* accept the vaccine belonged to four of the age categories, these were the 25 – 34 years (10%), the 35 – 44 years (5.3%), the 45 – 54 years (4.5%) and the 65 – 74 years (2.2%).

Respondents reporting that they would *definitely not* accept the vaccine belonged to three of the age categories, these were the 35 – 44 years (10.5%), the 45 – 54 years (4.5%), and the 55 – 64 years (4.7%). Only 2.3% of respondents reported that they were *not sure* whether to accept the vaccine, and these belonged to the 55 – 64 years age group.



Participants were asked if there was anything that would prevent them from having the vaccine, and 83% selected the response *nothing would stop me from getting a Covid-19 vaccination*, 8% selected *the distance to the location where the vaccine appointment takes place might stop me from getting it*, 4% selected *the times available to have the vaccine appointment might stop me from getting it*, 1% selected *having to book the vaccine appointment online might stop me from getting it*, 1% selected *not being able to book a vaccine appointment at my GP surgery might stop me getting it*, 1% reported that they *don't know / not sure*, and 5% selected *another reason might prevent me from getting the vaccine*.

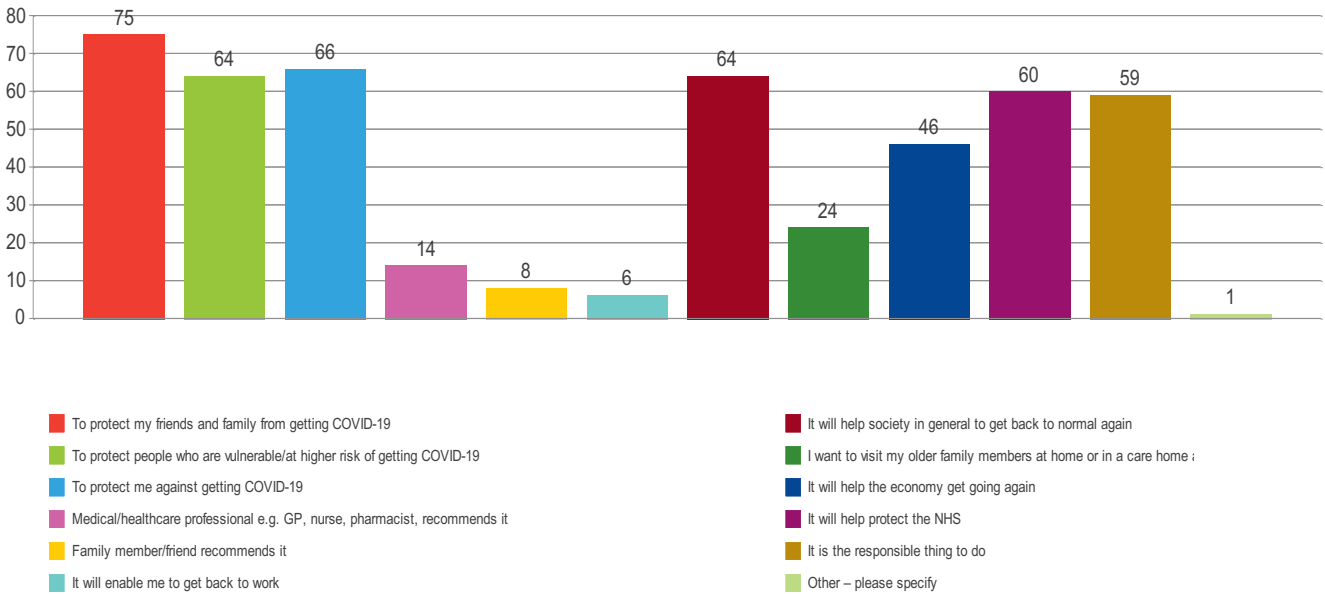
If you want to be vaccinated, is there anything that may stop you from receiving a vaccine when it is made available to you?



The participants who selected *another reason may prevent me from having the vaccine* were asked to specify what those reasons may be, one person reported that *'if a legitimate peer reviewed medical journal found compelling evidence it was not safe'* this would stop them from accepting the vaccine, and others stated that *'if they were medically unfit'*, or had *'allergies'* to the contents of the vaccine this would prevent them, another stated that it would *'depend on whether the vaccine will interact with other medication'* that they take, whilst another had concerns about having *'no transport home from the vaccination appointment'*.

Participants were asked the main reasons they want the Covid-19 vaccine and were asked to select as many of the response options as were relevant to them. 75 people selected *to protect my family and friends from getting Covid-19*, 64 people indicated that they want *to protect people who are vulnerable/at higher risk of getting Covid-19*, 66 people selected *protect me from getting Covid-19*, 14 people reported that *medical/healthcare professional recommends it*, 8 people want the vaccine because *family member/friend recommends it*, 6 people want the vaccine as *it will enable me to get back to work*, 64 people believe that *it will help society in general to get back to normal again*, 24 people stated that they want *to visit family members at home or in a care home*, 46 people believe that *it will help the economy get going again*, 60 people believe *it will help protect the NHS*, 59 people felt *it is the responsible thing to do*, and 1 person stated that it was for *other* reasons.

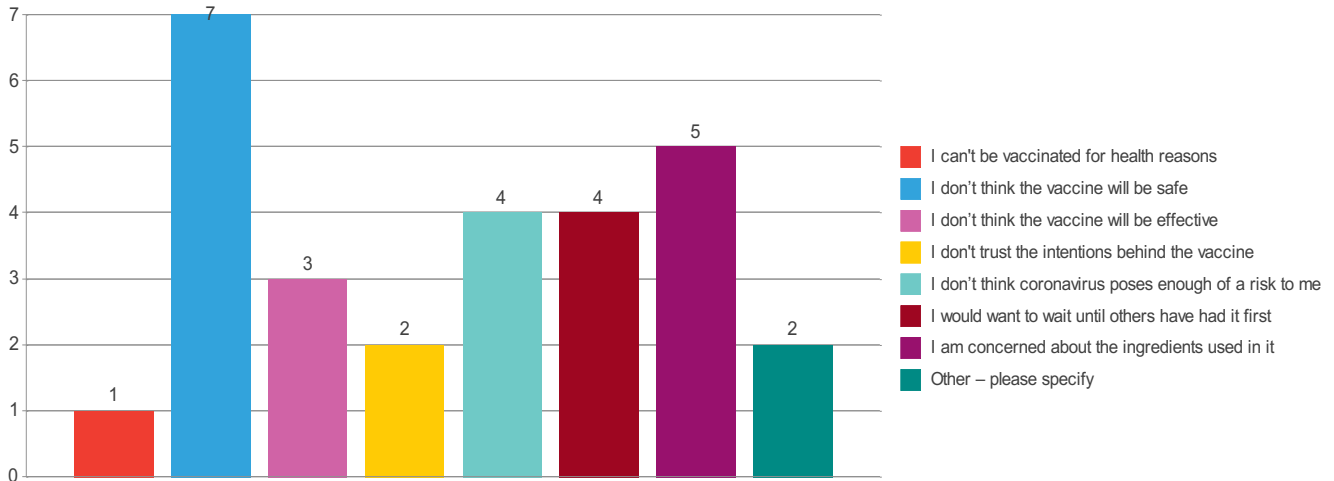
What are the main reasons you want the COVID-19 vaccine?



There was a subsequent open text box to this question to allow participants who had selected *other* to specify their response, whilst only one person selected other from the response options, two comments were received. One person stated that as *'a teacher'* they *'feel school staff have been treated dreadfully in all this. School is open we are all at risk and nowhere to be seen on the vaccine list'*, the other person stated that they are *'in group 6 vulnerable and whilst not told to shield formally, I was told by my cancer nurse to remain in my family bubble because of my immune system being low'*.

When asked what motivations would be for refusing the vaccine, the most frequently selected option was *I don't think the vaccine will be safe* with 7 people selecting this option. 5 people were *concerned about the ingredients used in it*, 4 people *don't think that Coronavirus poses enough of a risk*, 4 people *would want to wait until others have had it first*, 3 people *don't think the vaccine will be effective*, 2 people *don't trust the intentions behind the vaccine*, 2 people stated they did not want the vaccine for *other* reasons, and 1 person stated they *can't be vaccinated for health reasons*.

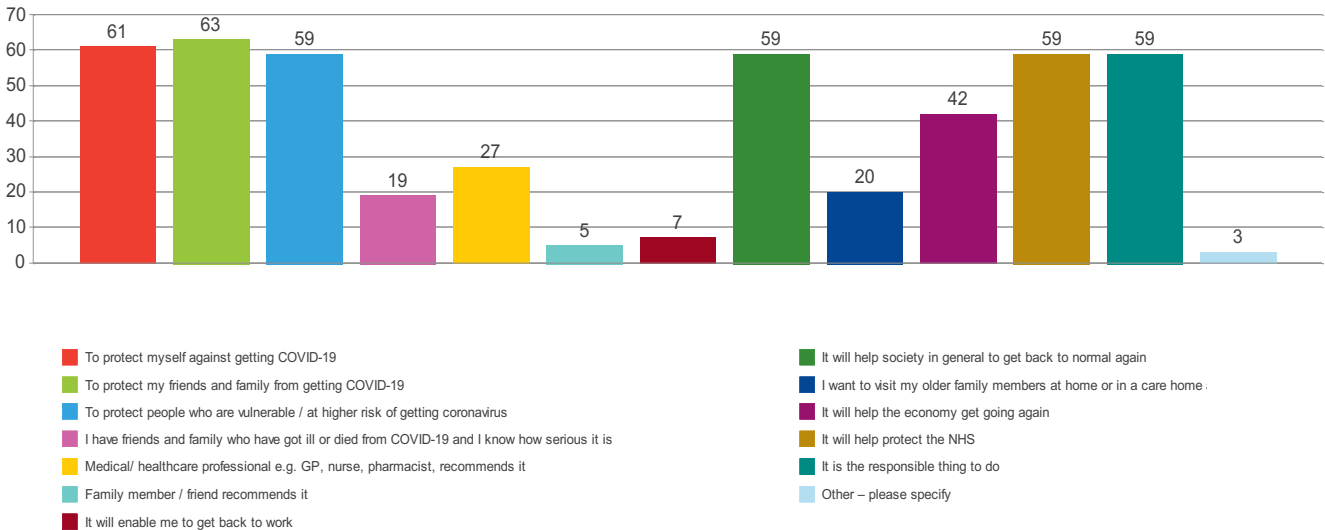
If you would not want to be vaccinated, what would be your motivation for refusing the vaccine?



There was an open text box following this question to allow participants who selected *other* as an option to specify their reasons for their selection, whilst 2 people selected *other* as a response, four comments were received. One person stated that *'With an ever mutating virus I'm not too sure we will ever be in a position where a vaccine will be effective enough without having to have an update one every year'* another stated that they are *'not willing to have the vaccine with the limited testing it has had and the varied different brands of it'*, another reported they are *'worried about any side effects which may only come to light in years ahead'* and the last reported that they *'don't think there has been enough research on either the virus or how effective the vaccine is, until that I may reserve judgement and avoid these current vaccines in use'*.

Participants were asked to select as many reasons why they decided to be vaccinated against Covid-19 as were applicable to their situation from a list of options. 61 people reported that they decided to get the vaccine *to protect myself against getting Covid-19*, 63 people selected *to protect my friends and family from getting Covid-19*, 59 people selected *to protect people who are vulnerable/at higher risk of getting coronavirus*, 19 people reported they *have friends and family who have got ill or died from Covid-19*, 27 people reported that *medical/healthcare professionals recommended it*, 5 people stated that *family member/friend recommends it*, 7 people stated that *it will enable me to get back to work*, 59 people felt that *it will help society in general to get back to normal again*, 20 people stated they *want to visit older family members at home or in a care home*, 42 people felt that *it will help the economy to get going again*, 59 people felt it *would help protect the NHS*, 59 people felt *it is the responsible thing to do*, and 3 people selected *other*.

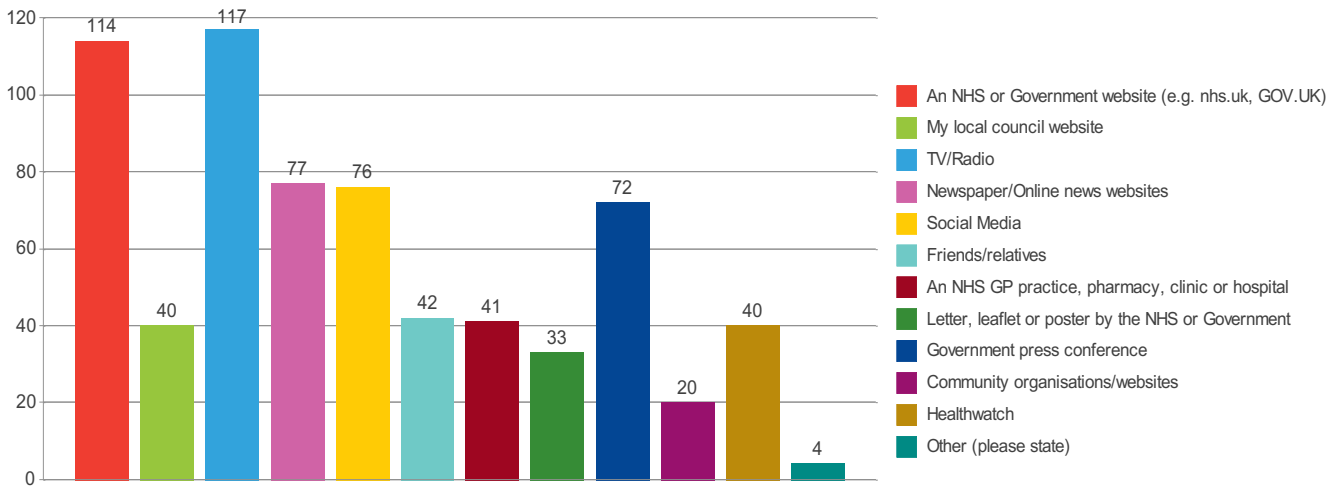
Which of the following are reasons why you decided to be vaccinated against COVID-19?



There was a subsequent open text box for people who had selected *other* to specify their reasons, whilst there were only 3 people who selected this option, 7 comments were received in response. 4 people made comments that related to building herd immunity to Covid-19, one person stated that the vaccine will *'help society to build mechanisms to protect the entire human race'* another stated *'each vaccine has a minimum level of take-up to reach herd immunity, so it is essential that as many people as possible are vaccinated'* and another felt that the vaccine is *'part of society's response to the emergence of a new virus'*. 3 people made comments relating to care responsibilities, one reported that *'I am an unpaid carer for a family member'*, another stated they *'care for a vulnerable person so important'* to have the vaccine, and another felt that they had *'a duty to support the vulnerable adults I support within LA supported housing network'*.

Participants were asked where they had mainly seen or heard information about the Covid-19 vaccination and were asked to select as many as apply to their situation from a list of options. 117 people told us that *TV/radio* were their main sources of information, 114 people found information on *NHS or government websites*, 77 people selected *newspaper/online news websites*, 76 people found information from sources on *social media*, 72 people reported that they had followed the *government press conferences*, 42 people obtained information from *friends/relatives*, 41 people obtained information from their *GP practice, pharmacy, clinic or hospital*, 40 people selected their *local council website*, 40 people reported that *Healthwatch* were their main source of information, 33 people received a *letter, leaflet or poster by the NHS or government*, 20 people found information through *community organisations/websites*, and 4 people reported that they had found information from *other* sources.

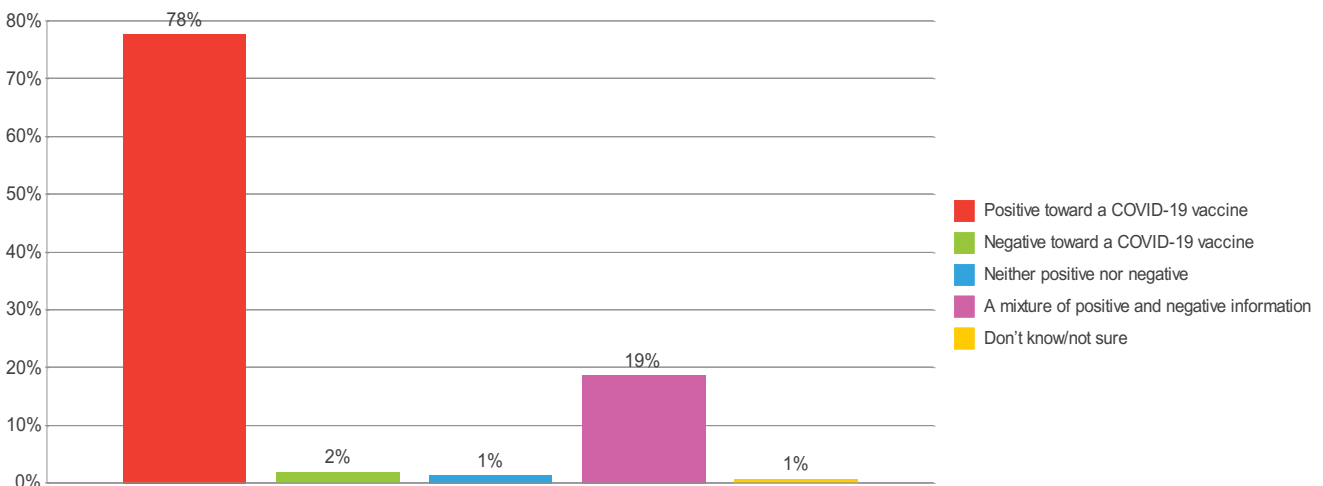
Where have you mainly seen or heard information about a COVID-19 vaccine recently?



The participants who selected other were asked to specify their answer in a separate open text box. We received 5 comments in response, one person received information through *'relatives in the health industry'*, another had found information *'through work'*, one person had received *'direct email advice'*, another was a *'member of GP surgery's Patient Participation Group'*, and one other person used *'google scholar to find peer reviewed papers on the vaccines'*.

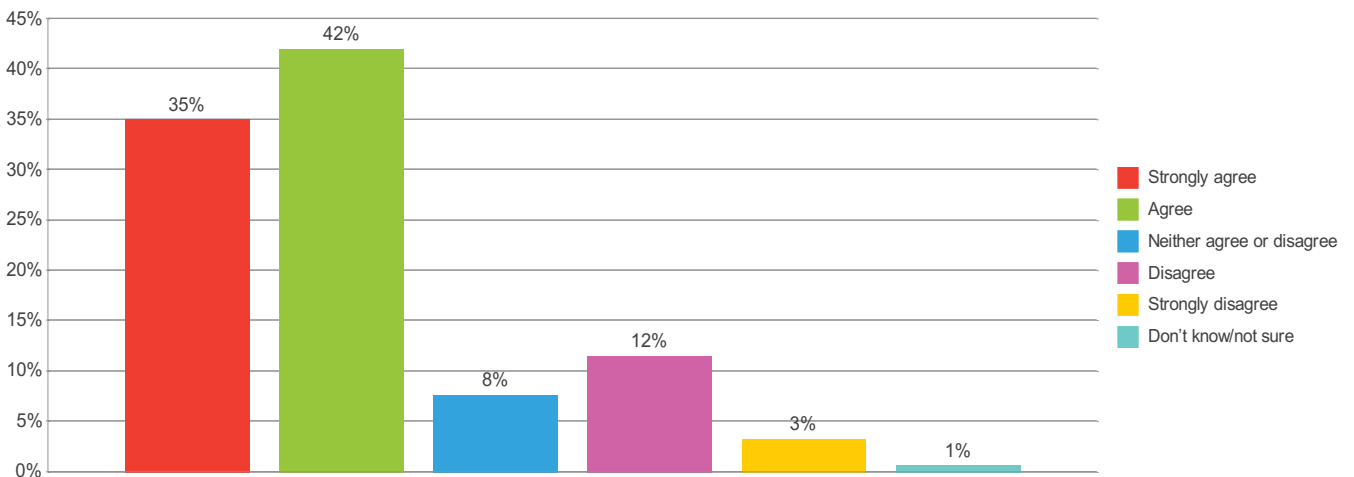
Participants were asked to rate how they had found the sentiment of the information that they had seen or heard recently and 78% reported that the information was *positive toward a Covid-19 vaccine*, 2% reported the information was *negative toward a Covid-19 vaccine*, 1% reported the information to be *neither positive nor negative*, 19% reported a *mixture of positive and negative information*, and 1% of respondents reported that they *don't know/aren't sure*.

Overall, was the information that you have seen or heard recently...

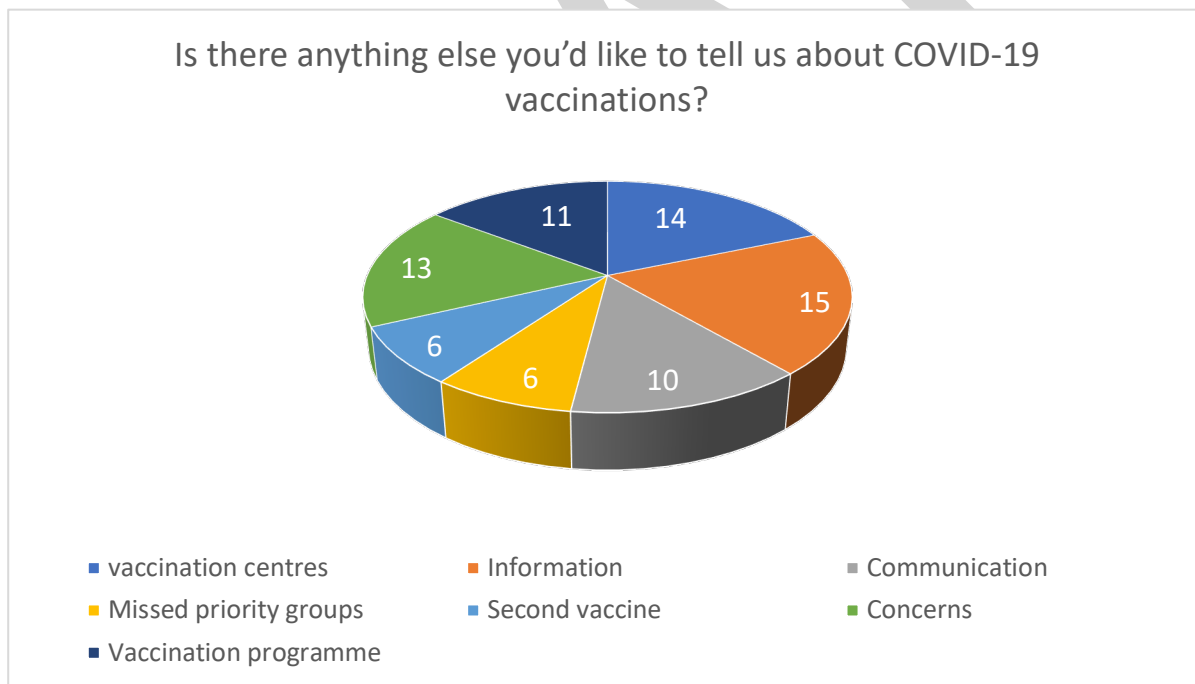


We asked respondents if they agreed that information from the NHS or government about the vaccine and its rollout has been communicated clearly and effectively. 42% of participants *agree* with this statement, 35% *strongly agree*, 12% *disagree*, 8% *neither agree nor disagree*, 3% *strongly disagree*, and 1% *don't know/not sure*.

Do you agree that information from the NHS or the Government about the vaccine and its roll out has been communicated clearly and effectively?



Finally, we asked participants if there was anything else they would like to tell us about Covid-19 vaccinations, this was an open text box and a total of 75 comments were received. Comments have been grouped according to similarity and 7 themes emerged from the data.



The most frequently reported theme related to *information* about the vaccinations and this theme received 15 comments, one person felt that *'not enough is being done to shut down misinformation on social media'*, another felt that *'the benefits of delaying the 2nd jab have not been explained in clear enough ways'*. With regard to information about the local vaccination programme, one participant stated they *'would appreciate a daily update regarding how many vaccinations has taken place in Halton'*, another stated that they *'cannot find out which group I have been allocated to so don't know when we can expect to be called'* and another reported that *'it could be clearer who will get the vaccine, when and where'*

Vaccination centres received 14 comments, all of which were positive about the experience people had when receiving their vaccination. One participant reported that they were *'impressed with the efficiency at the Stadium'* while another stated that *'everything went very smoothly, no waiting, very professional operation'* when they attended for their vaccine. One person felt that the vaccination programme locally is a *'very professional and efficient service by our Primary Care Network'*, another thought that *'using our GP's medical centre to administer the vaccine was brilliant. Very efficient and with minimum of fuss and waiting'*, and someone else *'was very impressed by the standards, the staff and volunteers were all extremely helpful, could not have been better'*.

13 people raised concerns in their comments regarding various issues, one person felt that *'more work needed on the anti-Vaccine group of people and general worriers who are unsure'*, and someone else felt that *'the websites that are allowing anti-vaccine and Covid deniers to post this dangerous misinformation should be forced to remove it'*. With regard to the vaccine itself one person stated they *'don't trust anything that has only been trialled for a short time'* another felt that *'the vaccine seems to be very rushed in its production - prompting doubts, while a third stated 'limited testing doesn't help to promote reassurances'*.

The vaccination programme locally was discussed by 11 respondents, one felt that *'Halton seems slow compared to people we know in Lancashire'* another stated that the programme *'needs be rolled out a lot faster'*, and a third stated they *'thought there was a strict order for the vaccination rollout, it seems not to be the case in Halton'*.

10 people discussed the communication they had about the vaccine, one person felt that *'it would be helpful if the local CCG/PCN could give better information about when people will be vaccinated'* and another stated *'communication from some local GP's in Halton has been poor'*.

6 people discussed the second vaccination in their comments, one person stated they feel that *'the gap between the two vaccinations needs to be shorter'*, and another felt that *'the second date for dose two should be given or you should be able to book it'*.

Missed priority groups were discussed by 6 people, one person stated that they *'have asthma and my husband has COPD, chronic diabetes and is morbidly obese, none of these conditions make us clinically vulnerable but we are at increased risk'* and another felt that *'groups who are working as key workers and have done all the way through the pandemic should be considered for the vaccine to keep them and their families safe and support the economy'*.

Summary and Conclusions

The findings show that the majority of people are positive about the Covid-19 vaccine and want to have it when they are offered it. The main reasons for this are to protect their friends and family, vulnerable people, and themselves from the Covid-19 virus.

There was exclusively positive feedback about the local vaccination centres and process from those that had already received their first Covid-19 vaccination, but these same respondents had concerns as they did not understand why the second vaccine was delayed for so long, that they may not receive their second appointment, or why they couldn't book the second appointment in advance. Feedback from those who had not yet received their first vaccine revealed similar concerns about being missed for their appointment, and not knowing how or when they will be contacted to make their first appointment. Participants also requested regular updates regarding the progression of the local vaccination programme.

The findings also showed that people have concerns about the consistency of information that is given through the various NHS sources and feel that some GP practices may not have the most recent information about the vaccine. Some are making comparisons with other areas as to progression of the vaccination programme, and others feel that the order of groups to be vaccinated is not being followed locally. People also have concerns about the side effects of the vaccine, the possible interaction it may have with other medication, and the speed with which the vaccine has been designed and produced.

Recommendations

1. Provide clear information for local people as to the process for booking first or second vaccination appointments.
2. Provide clear information about the method that will be used to contact patients to book their vaccine appointment.
3. Provide clear information as to the reasons for the delay between the first and second dose.
4. Provide clear information regarding the reasons why patients can't book the appointment for their second dose in advance.
5. Provide regular updates about the progress of the vaccination programme including numbers already vaccinated, and the reasons why other areas may be progressing at different rates.
6. Provide clear information about the order that different groups will be called for their vaccine.
7. Ensure that information from all NHS and local government sources is consistent, accurate and up to date.
8. Provide more information about the safety of the vaccine.
9. Provide more information about potential interaction with other medications.
10. Provide more information about any possible side effects of the vaccine.
11. Utilise TV, radio and online sources to communicate with patients where possible.

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