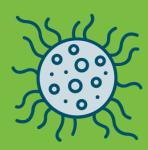
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# What are people telling us about COVID-19 vaccines?

Key messages from our evidence: March 2021





### **About**

This briefing aims to provide an update for national health and social care stakeholders about the COVID-19 vaccine roll-out. It draws on:

- Information and advice the public are asking us about
- Experiences and attitudes people have shared with us

It focuses on people's views, concerns and experiences of:

- Attitudes towards the vaccine
- Access to the vaccine for vulnerable groups
- Logistical access to the vaccine
- Second dose
- Experience of the roll-out

This update is informed by:

- The views of over 900 people in local Healthwatch reports, and
- Data from 37 local Healthwatch services across England, providing the feedback of 355 individuals on the COVID-19 vaccine delivery.

### **Key Messages**

### Attitudes towards the vaccine

Healthwatch England's national polling in January identified that men had more confidence in the vaccine compared to women. When asked "If you were offered a vaccine against COVID-19, and at no charge through the NHS, how likely would you be to get vaccinated?" 57% of men said they definitely would get vaccinated but only 50% of women said the same. Additionally, 8% of women said they 'definitely would not' in comparison to just 4% of men. The highest levels of 'definitely would not' answers were in the 25-34 year-old age group.

Fertility has been a commonly cited concern amongst women who have less vaccine confidence. Healthwatch Cheshire East carried out a *focus group* via zoom to look at the issue of fertility. Concern was expressed about the fact that there had been no research around the vaccine's impact on miscarriage as well as worries stemming from the Thalidomide tragedy, a drug given to pregnant women in the 1950s/60s that resulted in children being born with missing limbs. People



were concerned about having to have both doses of the vaccine even if they became pregnant after having the first dose. They reported mixed messages and scare stories that had made them question the vaccine's relationship to fertility. Whilst they often got information through trusted friends and family, they saw doctors on television as trusted voices to dispel myths.

Healthwatch Bexley carried out research into vaccine hesitancy within the *general population* as well as *care home staff*. Healthwatch Bexley found that the majority of people want to be vaccinated or had been vaccinated. However, approximately half of unvaccinated respondents do not feel they are at risk of catching COVID-19. Common concerns raised were around vaccine safety, effectiveness, make-up of the vaccine and long-term effects, with those who had low vaccine confidence wanting more information or to talk to their GP before agreeing to vaccination. They found that most care home staff had also been vaccinated or wanted the vaccine. However, many of the people who had not, were concerned about the long-term effects and side effects of the vaccine and wanted to wait and see if any emerged. They also believed that they weren't at risk or could manage the risk despite being in care roles.

<u>Healthwatch Surrey</u> carried out research into second dose appointments, which has increasingly become a topic of discussion. They found that of those who had received the first vaccination, 79% felt they had all the information they needed before attending the appointment and had a very positive experience generally. However, 60% of respondents did have questions about their second vaccination and around 50% lacked confidence they would receive all the information they needed before their second vaccine dose was due.

Nearly half (47%) of respondents had a question relating to their next appointment, such as, "when will I hear about my next appointment?" and "do I need to be proactive and contact my GP/book online for the second?". Fifteen percent of respondents had a question relating to the brand of vaccine offered for the next appointment, such as "Do the two doses have to be the same vaccine?" and "How can I be sure I will be offered the correct vaccine?" Fourteen percent of respondents also had questions about the side effects of their second vaccination. Healthwatch Surrey recommended that there should be a focus on communication about arrangements for appointments. This would reassure individuals that they would be contacted in due course, give guidance on what to do if they have not been contacted in the expected timeframe and inform them that the system will allocate them the correct vaccine.

### Access to the vaccine

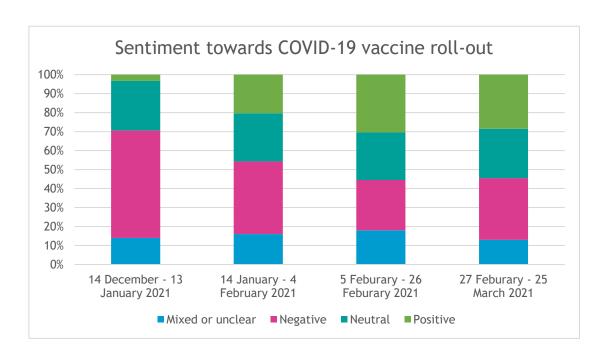
Between 27 February 2021 and 25 March 2021, 355 people shared their views with local Healthwatch regarding the COVID-19 vaccine and its roll-out.

- 26% (93) of responses expressed a broadly neutral sentiment
- 32.5% (115) of responses expressed a broadly negative sentiment



- 28.5% (101) of responses expressed a broadly positive sentiment
- 13% (46) of responses were mixed or unclear

While there has been a general trend towards less negative sentiment in public feedback as the roll-out has progressed, the last four weeks have shown a slight increase, demonstrated in the chart below..



The division of sentiment still follows the same trend, with people discussing their vaccination experience expressing broadly positive sentiment and those discussing access broadly negative or neutral sentiment. Over half of the feedback we received between 27 February and 25 March was about access to the COVID-19 roll-out.

The marginal increase in negative sentiment can be attributed to increased feedback on the following topics:

- access for vulnerable people
- booking systems
- location of vaccine appointment
- confusion around the second dose

### Access for vulnerable people

Some vulnerable people are still finding it difficult to access the vaccine and are expressing frustration for the priority grouping that they have been placed in. Most commonly, this has been expressed by individuals with ME or asthma.



"ME patient believes that GP has interpreted the vaccine guidance and Green Book to fit their own means rather than providing the vaccine to ME patients" - Healthwatch Gloucestershire, 25 to 49, Female

We have heard that housebound people are still struggling to access the vaccine despite being medically vulnerable. Some GPs do not always seem to be receptive to those expressing this distress.

"The caller was concerned that their elderly mother had not yet received the covid 19 vaccine. The caller's mother is 82 and housebound. On contacting the GP, the caller has been told guidelines have changed and they exclude housebound people at this time. The caller was not happy with this response." - Healthwatch Trafford

Some vulnerable individuals are being missed by the current roll-out, however, there is evidence of attempts being made in some areas to vaccinate housebound people when pressed.

"Caller's wife is not mobile; she was on the district nurse list to have a home visit back in January, but caller has not heard anything. Caller has tried his GP but cannot get through. With caller's permission I contacted the GP surgery. The receptionist talked to the practice manager and the caller's wife can now have her vaccination this Sunday evening. Caller is happy to take a taxi to the vaccination centre and wife has a walker she can use." - Healthwatch North Tyneside, 80+

There needs to be a proactive effort to enable vulnerable housebound individuals to make arrangements with GP surgeries to either receive the vaccine at home or be assisted to a vaccination centre.

There is also still some difficulty for unpaid carers in accessing the vaccine, who may also require logistical help to access it.

"I have a disabled son my husband is a full-time carer as I go out to work. I have found it extremely hard to get an appointment that allowed one of us to be at home with my son while the other was getting their vaccine. There were no appointments left for a weekend. I do think this needs to be thought of when a carer and their spouse are asked to have a vaccine." - Healthwatch Sunderland, 50 to 64, Female

### **Vaccine booking systems**

People have told us that vaccine booking systems have been overly congested and difficult. This has been particularly distressing for people who want their GP to give them the vaccine.



"Received a message to call to book covid vaccination. Caller was on the phone to surgery for 2 hours 24 minutes before the call was answered - started at number 40 in the queue. Caller doesn't understand why other people were called and he got a message. The call cost him £14 to sit and wait to get through. The queueing system obviously doesn't work, its common that its over 2 hours and he has a wife with advanced Alzheimer's." - Healthwatch Essex

The online booking system is also posing a challenge to some people, who believe it is overly complex.

"My wife and I had our first doses at Exeter's Westpoint Centre on 6th March. Our experience at the centre was excellent; all very efficient and safe. However, the online booking system isn't as straightforward as it might be. 1. It's not possible to book the first dose without booking for the second dose, despite no second dose appointments being available locally. We've had to book those in Taunton (we live in Exmouth) so intend to try to rearrange them nearer the time. 2. It appears impossible to check the availability of local appointments without cancelling our existing second dose appointments and starting again. This is risky; although Taunton isn't convenient, we'd rather have those appointments than nothing. 3. The solution seems to be to ring 119 but we're being discouraged from doing that and the literature tells us to book online if we possibly can! 4. Going back to the original booking process, when it became apparent, we couldn't book second dose appointments locally, we tried exiting the system with only our first appointments booked. It looked as if we had succeeded, and it was only later when we tried checking via 'Manage my appointment' that it was apparent that our bookings had been rejected." - Healthwatch Torbay

### Logistical access to the vaccine

Healthwatch England's <u>national polling</u> in January revealed that location of vaccine appointment was the biggest potential barrier for people that wanted to get the COVID-19 vaccine. This is now being shown as a consistent theme in the feedback that we are receiving. We have heard that people are not given a choice of having the vaccine in the most accessible venue for them.

"Caller contacted us to raise concerns about how he had been called for his vaccine, but no centre was accessible to him as a wheelchair user without transport. He has been shielding in Gloucester prior to an operation but was being called to Great Malvern as his nearest centre. The distance as the crow flies does not map to the proximity or the accessibility of venues. Caller was irate and threatening involvement of media and politicians if this was not sorted. His GP, who should be able to provide vaccines was



# filling up appointments with people who were lower priority." - Healthwatch Gloucestershire

The location of vaccine appointment is causing particular concern as some people are wary of getting public transport before they receive the vaccine and some rural areas have very poor transport links.

"I received a nhs book your vaccination letter in February. The only sites offered are 15+miles away if I had wings but much further by road or rail. These sites are located in areas of much higher incidence than locally and I am therefore very wary of travelling on public transport. There is [a] site – much lauded in the local and Google news – a 10-minute walk from my home. Why is no local person offered a visit to this site?" - Healthwatch North Yorkshire

Another reason that some people cited in our national polling as a potential barrier to vaccination was not being able to attend a vaccine appointment at their local GP surgery, this coupled with difficult location has been a source of confusion and frustration for some clinically vulnerable individuals.

Efforts should be made to enable those who are medically vulnerable, cannot travel long distances or have poor public transport links to receive the vaccine as locally as possible.

"I cannot get my vaccine from Cross Keys surgery despite being on the clinically vulnerable list and also being disabled and shielding I need to use the Princes Risborough vaccine centre. I have contacted the surgery over the last 3 weeks only to be told they have no appointments or vaccine and that only Unity health are vaccinating patients from all their surgeries. I know people of 60 who have had vaccine via Unity this week. This is an appalling and unfair situation for Cross Keys patients and needs addressing urgently as my complaint to the surgery is not being dealt with. Calling the national 119 line was of no help either and they said there were lots of problems with GP surgeries!" - Healthwatch Bucks

### **Second dose**

We have heard that people are concerned when they might receive their second dose. Some who are medically vulnerable have reported that they cannot book their second dose of the vaccine at the same place as their first dose.

"I have had my first dose at the Brighton racecourse (I am in the on the priority list and it suited me with my disabilities.) I am trying to book my second vaccine and find that the web pages only give me the Brighton centre." - Healthwatch Brighton & Hove



This speaks to more general confusion and concern about access to the second dose, feedback on which has greatly increased in the last three weeks.

"Concerned that 92-year-old grandmother has still not had 2nd dose Pfizer vaccine despite having 1st dose early December so now passed the 12 week suggested booster. Contacted the GP surgery and was informed that they do not have access to Pfizer vaccine so would have to continue to wait. Concerned about efficacy of vaccine due to delay" - Healthwatch Northumberland

There have been numerous cases of this happening, which is a concern as those most in need of the second dose may struggle with communication and booking systems.

"A lady rang the HWS office with regards to her father's 2nd dose of the COVID-19 vaccine. Her father had his 1st dose on the 1st December and was due his 2nd dose however no one has contacted him yet. He received the Pfizer vaccine for his 1st dose so was unable to go through the 119 helpline." - Healthwatch Sunderland

A proactive approach must be taken to ensure that everyone, especially those who are elderly or vulnerable, get their second dose within the recommended efficacy period. There is also a need for clear communication on whether the first and second dose need to be the same vaccine brand as it has been the most frequent information request to local Healthwatch.

"Concerned as elderly parents due to get 2nd dose of vaccine this afternoon and are anxious that may get different type of vaccine to 1st dose which was Pfizer vaccine. They rang GP surgery who told them that they were unsure so wanted some further information. Advised that as far as we were aware there was no mixing of different type of vaccines currently, there have been trials but not happening with public so should receive same type of vaccine for 2nd dose, however, if very concerned could contact 119 to query." - Healthwatch Northumberland

There is also concern from people who have not been told when their second dose appointment will take place. People who may have been called at the last moment due to no shows or a surplus of vaccine on a given day appear to be particularly concerned about this.

"I had my first Pfizer injection on the 17th January batch no ELO 739. I was put on a reserve list due to bad weather that weekend and I am working at goods of Harrogate funeral directors. Can you confirm I will be contacted for my second vaccination, i tried to ring 119 to book this but they couldn't help me" - Healthwatch North Yorkshire

There needs to be more clear communication on when people will be eligible for their second dose and how they will be contacted when required.



### Vaccine experience

The sentiment expressed by those who are giving feedback on their vaccine appointment experience remains overwhelmingly positive.

"I went to St Leonard's hospital and it was very efficiently organised. Lots of parking. Straight in then small wait in the corridor before jab. Excellently organised and felt very safe." - Healthwatch Dorset

However, we have also heard negative experiences. Most frequently, these have concerned a lack of social distancing at vaccine centres.

"I felt really unsafe having my first vaccination dose today, the venue did not seem fit for purpose, too crowded and noisy inside, little social distancing possible. It was a portacabin set in an abandoned Lidl supermarket carpark. Organisation outside good, but indoors was scary. I had to squeeze past several people sitting having their jabs, no screens, no gangway to separate areas. I was stuck in a corner with one person on the computer and a second perched behind him who gave the jab. We had to shout to communicate because of the noise of so many people, then I had to walk back past the other patients again to the exit. This was very much the opposite of what we see on TV news with lofty conference halls and wide aisles. My husband and older friends and family have had excellent experiences in such places, so I am appreciative of the efforts being made by all providers and volunteers in this vaccination programme. However, I am dreading going to Knaresborough again for my next jab in June. There needs to be a review of the set up and layout." - Healthwatch North Yorkshire

There have also been a couple of cases of people under the age of 18 receiving the AstraZeneca vaccine.

"I am the father and carer for my son M who has Down Syndrome and is on the Extremely vulnerable list. He is 17 and recently went for his Covid vaccine. Only when I went for my vaccine, I read the leaflet and identified that the Astra vaccine is not suitable for adolescents. Which M was also injected with. I have spoken to Astra Zeneca help line, they stated they would flag to their safety team, but said all future input/support should come from my GP. I have spoken to my GP surgery receptionist who acknowledged the seriousness of the issue but asked that I email them the facts. I emailed them on the 3rd March and have heard nothing back since. I have serious concerns over: 1. The neglect from the surgery. 2. The effectiveness of the untested vaccine on an adolescent. 3. The confusion of what his second vaccine should now be. Astra have stated it should only be another Astra, but of course this is for only 18+ And said it is a decision for the GP. Help!" - Healthwatch Bristol



There has also been a case of mixed vaccine doses, with little reassurance for why this happened or the impact of it.

" My husband had his first covid vaccine 20/1/21 and was given the Pfizer dose he is 31 with no underlying health condition, he works for a pharmacy and so was offered it as a key worker. He had the vaccine dose from his GP. Yesterday he went for his 2nd dose, he took his card along and gave it to the receptionist, who then preceded to hand it to 3 other members of staff before he eventually had the 2nd injection. He went back into the waiting room afterwards and looked at the card to realise he had been given the Oxford vaccine instead of Pfizer .... He then went to the reception who forwarded the query to the person giving the vaccines who couldn't explain why this had happened only that they must've missed it on his card! They then couldn't tell him if he was going to be okay as it had not been tested to mix doses yet and that they thought he might be ok. Today 18/03/21, he has woken up and cannot move properly, he cannot get out of bed, his arm around the injection site is swollen and bruised and he has had a fever. The doctors are supposed to be completing an incident report on the matter. But we feel that there has been medical negligence, also working in the field he does, he has now missed his days' pay and most likely the next few days too. We just need advice if possible how to raise this through the proper channels so that it doesn't happen to others before trials are actually tested as successful in mixing vaccines." - Healthwatch Essex

Regardless of the speed of the roll out, it is important that all health care professionals are still maintaining the highest standards of care and safety.

"A lady rang HWS regarding the covid-19 vaccination. She and her husband attended the Bunny Hill Primary Care Centre recently for their first vaccination. She had her injection first and then her husband. Her husband was asked if he was allergic to anything, but she was not asked. She is allergic to penicillin and has been unwell since. They both received the AstraZeneca covid-19 vaccination. She rang her GP to tell them about this but they told her to get in touch with Healthwatch Sunderland." - Healthwatch Sunderland

There have also been a few pieces of feedback from housebound people. Firstly, some are feeling overlooked by the process entirely. However, a couple who did receive the vaccine at home felt they were treated as an inconvenience.

"I contact Healthwatch to raise my concerns about how I was treated by the nurse who came to give me my covid vaccination in January. I am homebound and considered to be at end of life due to COPD. When the nurse arrived, I was outside with my daughter who was supporting me to go to the cemetery as it was the anniversary of my mother's death. The nurse arrived and was rude. I asked if the vaccination contains Covid, she said that she did not have time to answer questions and did I want it or not. I had the vaccination, she then left paperwork on the settee. I contacted the surgery in February to ask if my



daughter could have the vaccination to support me as a carer - it was at this point I was told that I am not classified as homebound anymore as it was changed on the system after my visit from the nurse as I was outside." - Healthwatch Rochdale

It is important that everyone is felt that they are well respected in the vaccine process and have access to any relevant information that they want. This is particularly important to ensure that people take up the second dose of the vaccine as well as the first.

Healthwatch Tower Hamlets carried out research into those living with a disability or serious long-term condition and their attitude towards the COVID-19 vaccine. Most have already had the vaccine or intend to get it when it is made available to them and prefer to receive information from their GP. A majority preferred to be contacted about the vaccine via email or text. They suggested that communication about the vaccine needs to be simple, use infographics and come in a variety of formats to cater to different audiences. They made recommendations on making vaccination sites accessible by avoiding overcrowding, allow carers to accompany patients, keep them as local as possible, use ramps/lifts/wheelchair accessible, disabled parking on site, transport service, home visits for those who can't travel, clear signage in large text, signage with images and symbols, toilets on the same floor and a quiet waiting space.

The overwhelming sentiment for vaccination appointment experience remains positive. However, more needs to be done to ensure all needs are met especially for those that are housebound or medically vulnerable. Both so that they can attend a vaccine appointment and so that arrangements are safe when they do so. There needs to be further clarity on how and when people can get the second dose of the vaccine to ensure that it has as high uptake as the first dose. Location of vaccine appointment is also very important, as it may prevent uptake for some people. For those who cannot travel due to medical conditions and in areas where there are poor public transport links, efforts should be made to give them the vaccine locally as soon as possible.

### Talk to us

If you have a question about the contents of this update, please either contact a member of our <u>Policy or Research and Insight teams</u> or email CV19Enquiries@Healthwatch.co.uk