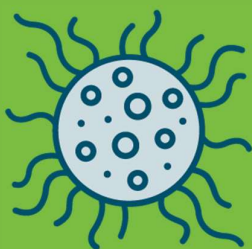


What are people telling us about COVID-19 vaccines?

Key messages from our evidence: May 2021



About

This briefing aims to update 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:

- Experience of the vaccine roll-out
- Reasons for low vaccine confidence
- Access to the vaccine
- Access to the second dose

This update is informed by:

- The views of over 2000 people in local Healthwatch reports;
- The views of 1847 people responding to Healthwatch England's national survey; and
- Data from 39 local Healthwatch services across England, providing the feedback of 242 individuals on the COVID-19 vaccine delivery.

Key Messages

Following the vaccine attitudes survey Healthwatch England ran in March 2021, which we discussed in the last vaccine briefing, an updated survey ran between 22 April and 21 May 2021. 1847 people took the time to share their thoughts and experiences of the vaccine roll-out.

We asked people about their experiences of the COVID-19 vaccine, including any difficulties they had booking and attending appointments, their thoughts on information about the vaccine, and whether they had concerns about the vaccine.

Level of vaccination

54% (999) of people who answered our survey had received both doses of the vaccine. 37% (690) of respondents to this survey had received the first dose of the COVID-19 vaccine. 8% (140) of respondents had not had either dose.

81% of this cohort were White British, and 9% were from another White background making the ethnicity of the total cohort 90% White. 1.6% of the people who responded to this survey were from Asian backgrounds, and 1% were Black.

Experiences of the vaccine

96% (1620) of people who had received either one or both doses of the COVID-19 vaccine stated that they had positive experiences at their appointments. This largely positive perception was also reflected in the public feedback we received from local Healthwatch services between 17 April and 20 May 2021. For example, [Healthwatch East Sussex](#) found that from 1,558 people, 82% said there were no problems in attending their vaccination appointment. The most common barriers for those who did have problems related to car parking, travel time, public transport, private transport and travel costs. A quarter of all respondents felt vaccination sites did not offer suitable waiting areas, and 8% said they felt like they did not have enough time to read and understand the information provided before consenting to the vaccination.

The national survey reported broadly positive experiences of vaccination appointments:

"I would praise the whole experience as being run like a military operation that gave me a lot of confidence in the system and receiving the vaccine. This is the same sentiments for my husband as well, extremely impressed with how well organised everything was, which helped with reassurance and confidence that this was the right thing to do and being very grateful for all the hard work and effort that was put into the whole operation. Well done everyone. 2 very grateful people" - Healthwatch Sunderland, 50 to 64, White British, Female

Only 5% (92) of people experienced difficulties booking or attending their appointment. The most common challenges faced were using the online or telephone booking systems, booking an appointment close to home, and getting to their appointment.

People also reported having their appointments cancelled or rescheduled with very little notice, sometimes when they had already left to go to their appointment.

Disability access at vaccine centres

Nearly a quarter (24%) of people who responded to our national survey considered themselves to have a disability. These people commonly reported inadequate disability access at vaccine centres.

People who found it difficult to stand reported having to queue for long periods. People who use wheelchairs were unable to get into vaccine centres, and there were reports of limited disabled parking being made available.

“Being disabled I had trouble queuing outside because of the cold, a lady did come out when she saw the queue and take me in the tent to wait my turn there.” - Woman, 65-79 years.

Some people with disabilities who had had their first dose reported concerns about the accessibility of vaccine centres when getting their second dose, often due to having had a bad experience at their first appointment.

“[I am concerned] about size of building exiting and needing 2 nurses and wheelchair again, Disability should be considered. heart condition.” - Woman, 65 - 79 years.

Concerns about the second dose

We asked people who had only had their first dose of the vaccine if they had any concerns about their second appointment:

- 37% (690) of respondents to this survey had received the first dose of the COVID-19 vaccine.
- 23% (157) had concerns about their second appointment.

Respondents who had had their first dose, and were concerned about their second appointment, were asked to select option(s) expressing their concerns. The most common issues related to the potential side effects of the second dose. 57% (89) of people who were concerned had had side effects after their first dose, and 43% (68) of people were worried about the news around blood clots occurring after receiving the vaccine.

“Several people I know have had a bad reaction to their second jab. I worry that is going to happen to me.” - Woman, 55 - 64 years.

Despite having received their first dose, some respondents were also concerned about the vaccine's long-term impact.

“Although I will happily receive second dose I am concerned about possible impact down the line on my already pre-existing condition.” - Man, 45 - 54 years.

Vaccine Hesitancy

Of the 140 people who had not already had either one or both doses of the vaccine, 52% (73) stated they would “definitely not” get the vaccine when it was offered to them, and 19% (27) would “probably not.”

We asked people to tell us a little more about why they wouldn't have the vaccine when it became available. Most reasons cited related to safety issues. These included: long-term risks, blood clots, allergic reactions and questions around immunity.

The most mentioned issue was the lack of research on the long-term risks associated with the vaccine. People were concerned that the speed of vaccine development called into question how safe it was for public use. Multiple people also cited ongoing clinical trials monitoring the vaccine's safety as evidence that the vaccine is not safe for use.

"None of the vaccines presently available have had full challenge trials and subsequently NO ONE can be sure if there are any medium to long term side effects. We have already seen some short-term effects, e.g. the coagulation of the blood which has led to blood clots and unfortunately probably contributed to a very small number (admittedly an extremely small percentage 0.0001%) of fatalities. For a man of my age ... with no underlying health conditions, given the present prevalence of the virus the risk of catching and dying from COVID 19 is 0.0001666%. In my opinion and past experience, I am happy to wait until we understand the longer term effects of these vaccines much better." - Man, 55 - 64 years

There was also concern about the news coverage on blood clots from the AstraZeneca vaccines.

"It's not been tested enough if it had than it would have been known to cause blood clot always on the news" - Woman, 55 - 64

Another reason for refusing the COVID-19 vaccine was the belief that individuals already had immunity because they had previously contracted COVID-19.

"Because I've had the disease already and it gives you just as much immunity as the vaccine." - Woman, 65 - 79 years

Some individuals were also concerned if they had previously had an allergic reaction to a medication and some respondents also expressed mistrust of the government.

Whilst most people's views about the COVID-19 vaccine are very positive; there appears to be greater variation when we look at attitudes based on age. For example, [Healthwatch Haringey](#) found that those aged under 45 were less likely to say they would get the COVID-19 vaccine. Only 69% of 35-44 year olds said they would get the vaccine, whilst 15% said no, and 15% said don't know. For older age groups, there was a lot less hesitancy. 88% of 55-74 years said they would take the vaccine when offered and 100% of 75-84 year olds said the same.

Information about the vaccine

We also asked people how they were receiving information about the vaccine. The most common places people had seen or heard information was via NHS or government websites, television and radio, and social media.

When asked whether the information was broadly positive or negative,

- 72% (1,339) said it was positive towards the COVID-19 vaccine;
- 21% (380) said they had seen a mixture of positive and negative information; and
- 3% (49) said it was negative towards the COVID-19 vaccine

We also asked people if they thought information from the NHS and Government about the vaccine and its roll-out was communicated clearly and effectively.

- 86% (1593) agreed that information was communicated clearly and effectively;
- 7% (125) disagreed; and
- 6% (114) neither disagreed nor agreed.

Vaccine access

Between 17 April and 20 May 2021, 242 people shared their views with local Healthwatch regarding the COVID-19 vaccine and its roll-out.

- 32% (76) of responses expressed a broadly neutral sentiment
- 39% (95) of responses expressed a broadly negative sentiment
- 13% (30) of responses expressed a broadly positive sentiment
- 16% (41) 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 five weeks have shown a marked increase in negative sentiment and a decrease in positive sentiment.

However, this is largely because we are hearing less from people about their experience of vaccine appointments, which are largely positive. The negative feedback reveals two helpful insights about vaccine access.

(1) Access to vaccine registration

There are still problems with certain groups accessing the COVID-19 vaccine, especially when people try to sign up via a GP to get vaccinated. From our feedback, this issue appears to be disproportionately affecting those from international backgrounds.

"Australian UK Resident looking to book Covid-19 vaccine for self & Mother. Need to be registered with a GP, went to local GP practice & was rudely turned away, told you are not UK residents (which she said they are) and to take it up with the government. Extremely rude and unhelpful. How can they get the vaccine?" - Healthwatch Essex, Female

We have also heard from people who are struggling to register on behalf of another person. Some of the concerns raised are worrying for those from an international background, with some accusations of discrimination.

"I employ several Polish workers who meet the age criteria for a Covid 19 vaccination. I want to get them vaccinated and so approached my GP (Hodnet Medical Centre) to get them registered. I was told that they could not be registered so I looked it up and found that they were eligible to be registered. I recontacted the practice and they agreed and sent me the forms which my employees filled out and I took down to the practice along with ID for the employees. When I got back home I found a message on my phone to say that in actual fact they could not be registered. I then double checked and got back to the practice and pointed out that yes indeed they were eligible to be registered. The practice then finally agreed and have told me they are registered and that they will now be able to book a vaccination appointment through 119. During these conversations I was told by one member of staff that the vaccinations were for British people first and so my Polish employees would still not get their vaccination, I'm appalled by this attitude. I keep ringing 119 to be told that my employees are not on the system and because they do not have a NHS number they can't be vaccinated, however the rules say that if you are registered with a GP all you need to know is your name, DoB and registered address. How can I get this sorted out, I have tried to speak to the Practice manager and was promised a call back but she never has. This is not the first time I have encountered this sort of racism in the NHS" - Healthwatch Shropshire

The problems some people from an international background have reported reflect a wider issue when it comes to non-UK citizens accessing health and care. Particular attention needs to be given to harder to reach communities in general, especially those who may not have English as a first language and those from travelling communities.

"Call received Caller 25, just moved on to a travellers site in Corby and has tried to contact 2 GPs surgeries to register. They have told her that she can not as she has no fixed address. HWN asked which doctors surgeries and she is unsure as she is

unable to read and write. HWN told them about the information on the access to health care cards and going to deliver some to them (unable to post due to there being no address.) She got our details from Corby Borough Council who we told about the access to health care cards. She has said that there are at least 9 caravans that will need the cards. She has 3 children who attend school and are also not registered with a GP. The name of one of the GP surgeries from yesterday was Great Oakley Medical Centre. They are Gypsy, Roma and Traveller." - Healthwatch Northamptonshire, Female, 25 to 49

A key theme of current feedback is that some people, especially those cared for by others, have unique problems in accessing the vaccine, whilst also ensuring their own safety.

"Devon Client has been living with disabilities for many years, but has managed to adapt her life to cope with this. She is a frequent user of CA services and has received a lot of input from the Healthwatch and Energy projects. Since March last year until quite recently, Client has been shielding as she is extremely clinically vulnerable. She relies on a team of two carers. She has two carer visits a day, and the carers work opposite ends of the week. Recently, both carers have informed client that they do not intend to have the Covid-19 vaccination. Client contacted CA to find out if she could do anything about this as she was very worried. She has been vaccinated, but her friends have told her they will not visit her if the carers are not vaccinated." - Healthwatch Torbay

(2) Access to the second dose

We have seen a rise in people reporting that they are struggling to access their second dose. The most common issues are either not being told when their second appointment will happen or not getting their second dose with the recommended 12-week period.

"I'm clinically vulnerable being severely immunosuppressed. I received my first jab of AZ February 24th here in Harrogate at the show ground. Having looked on line, the NHS national website says I've missed my 2nd dose appointment... I've never been offered a 2nd dose? My GP practice, Kingwood, has stopped answering the telephone so they can't offer any guidance in booking my 2nd jab locally. If I want one in THREE weeks I will need to travel to York or Leeds. It's simply not good enough." - Healthwatch North Yorkshire

Difficulties in communicating with GP practices have compounded these access issues. More needs to be done to accommodate those who may not be accustomed to using, or be able to access, online services.

"A patient rang as they had not received confirmation of a second vaccine appointment from their GP and the date for the next appointment was fast approaching. The patient has found it difficult to receive regular communication from his GP practice due to long waiting times on the phone and does not have email access, so is limited to checking updates on the practice website. The

patient has had to make adjustments to their lifestyle in order to maintain contact with the surgery and has invested in a different phone and call plan so that he is able to wait on the line when contacting his GP, which can often be up to an hour wait. Due to the challenges the patient has faced relating to communication and updates he is concerned that he may not hear from the practice for his second Covid-19 vaccine." - Healthwatch Solihull, Male, White British, 80+

Equally, those who face physical constraints such as housebound individuals need to be given extra attention to make sure they get their second dose.

"This person is housebound and had the first dose of their Covid-19 vaccine in February 2021. They have recently been contacted by Manor Park Surgery (not their surgery) to go to a vaccination site for their second dose. They explained that they are housebound and someone needs to visit them in their home to give them the second dose. About three weeks ago, they spoke with their GP surgery (Dovercourt Surgery) who told them someone will visit them in their home to give them the second dose. However, they haven't heard from anyone since and they haven't had their second dose yet. The CCG has been contacted about the issue." - Healthwatch Sheffield

We have also heard some complaints from those who care for vulnerable individuals.

" Person rang on behalf of their close family member to get advice on how they can complain about a late vaccination administration. Their relative, diagnosed with Down Syndrome, was administered 2nd Covid 19 dose in 14 week time by their local GP Surgery. Person believes that this approach is against the equality Act 2010, they feel frustrated and described this situation as 'disgusting'. They would like to deliver information about that, to make sure that the rights of the people with specific disabilities are protected." - Healthwatch Sheffield

There were complaints from some people who have attended their second vaccination appointment only to be turned away due to the surgery or centre running out of vaccine. This is particularly frustrating for those who have travelled a long distance.

"A member of the public rang with a concern about the situation around their 2nd vaccination appointment. They say that they have to travel 2 hours yesterday in Leyburn, however, 15 mins before their actual appointment time, they had a phone call that their appointment had been cancelled, regarding the run out of AstraZeneca vaccine in the place. They were reassured that their vaccination is rescheduled for this Sunday, at the same time. The person has to accept that offer, however, later on they've understood that this change has caused a big difficulty, because from the village they are living in is not any bus communication to Leyburn on Sunday. The people are experiencing a big stress, regarding how to get vaccinated, based on the national invitation this Sunday, to attend of which they have required some support to travel based on a private transport for 2

hours each way. or try to book the vaccination through their local GP, which involves a big delay at the moment. They said: 'I was in the garden last morning and our GP walked near my garden with a box of vaccines, how it works that if I will be pushed to change my vaccination regarding a transport issue, that I'll have to wait for ages in our small village to get vaccinated?' - Healthwatch North Yorkshire

While people's experiences attending appointments are overwhelmingly positive, more needs to be done to improve equality of access at every stage of the vaccination process. Services need to ensure that those who may already face barriers to healthcare are actively reached out to, such as those who do not have English as a first language and travelling communities. Additionally, vaccine centres need to be accessible for those who are disabled and, if they cannot be made so, disabled patients should be offered an appointment at an accessible location. Communication also needs to be improved for those waiting for their second dose, especially for medically vulnerable or housebound patients.

Talk to us

If you have a question about this update, please contact a member of our [Policy or Research and Insight teams](#) or email CV19Enquiries@Healthwatch.co.uk