



The Adam Practice – Coronavirus Vaccination Programme

FAQ Sheet

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Q1. I'm eligible for the Vaccine, how can I book to receive this?

We will contact you to book your appointment. Our booking team are working through a list of patients and will contact you when it is your turn. However if you fall within one of the priority groups who have already been invited please call you surgery and they will be able to book you an appointment.

Q2. How will I be contacted by the Practice?

Our dedicated booking team will be calling patients using the telephone numbers provided on their medical record.

We have also begun inviting patients aged between 70 and 79 and those who are classed as being Clinically Extremely Vulnerable (i.e. patients who are 'shielding').

Some invitations have been sent via text message to allow those with a smartphone to book online. These text message invitations may be forwarded on to a close friend or family member to book on your behalf if you wish.

More information about these text messages to reassure patients can be found here: <https://support accurx.com/.../4794856-i-have-been...>

If you do not have a mobile phone or cannot book via this method, we will continue to telephone patients to book your appointment.

Q3. What If I miss a call from the booking team?

You will remain on the list and our team will continue to try and make contact with you.

Q4. How long will I have to wait?

We are working through a list of all priority patients as set out by the Government. We hope to vaccinate patients as quickly as possible, but speed of vaccination will depend on how many patients there are per group, how often we receive deliveries and the quantities of Vaccine per delivery.

For more information on priority groups please see the below webpages:

- [Joint Committee on Vaccination and Immunisation: advice on priority groups for COVID-19 vaccination, 30 December 2020 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/covid-19-vaccination-why-you-are-being-asked-to-wait/why-you-have-to-wait-for-your-covid-19-vaccine?priority-taxon=774cee22-d896-44c1-a611-e3109cce8eae)
- <https://www.gov.uk/government/publications/covid-19-vaccination-why-you-are-being-asked-to-wait/why-you-have-to-wait-for-your-covid-19-vaccine?priority-taxon=774cee22-d896-44c1-a611-e3109cce8eae>

Q5. Where will I be asked to go to have my vaccine?

We are working alongside 5 other GP practices to jointly deliver our vaccines at the Poole Ferry Port Passenger Lounge. The vaccines are being given in the lounge area, we are not providing a drive through service.



Q6. When are the vaccination clinics starting?

We will start vaccinations clinics at the Ferry Port on Friday 15th January and will continue over the weekend and into the week. Vaccinations will continue as and when we receive deliveries including on the weekend.

Q7. What times are the clinics running?

The clinics will be open between 0900-1830 and will include weekends. Although this will be dependant on our delivery dates.

Q8. Will I have to get out of my car at the Ferry Port?

Yes. Due to the nature of the Vaccine we are providing we are not able to a drive through service.

Q9. I have limited mobility and use a mobility aid, will there be support available?

Please bring your own mobility aids. Support will be available if required however this may be limited depending on staff and volunteer capacity. If mobility is a significant issue, we can arrange to vaccinate you at home.

Q10. What should I do when I arrive at the Ferry Port?

Please follow the signs and marshals will direct you to park near the Passenger Lounge. Once parked, make your way into the Lounge no sooner than 5 minutes before your booked time. Staff and volunteers will be on hand to direct you.

Q11. I don't drive or have any family to take me, how can I get my vaccine?

If it is impossible for you to get to the Ferry Port we can vaccinate you at home, and staff will add you to a list for this. However if you are able to, we ask that you make every effort to come to the Ferry port if possible, so not to delay receiving your vaccine.

Bournemouth, Christchurch and Poole councils are providing some transport options for vaccines, please see the below link and forms for more information.

<https://www.bcpCouncil.gov.uk/news-article.aspx?title=councils-offer-support-to-get-people-to-vaccinations-safely>

'To speak to someone about the travel support available, BCP Council residents should contact the community response helpline on 0300 1237052 or [complete the online form](#). Residents in the Dorset Council area should call 01305 221000 or [complete the online form](#).'

Q12. Which Vaccine are you giving to patients?

We will be giving both the Pfizer and AstraZeneca vaccines and will use whichever vaccine we have on the day of your vaccine. This will depend on stock and availability.



Q13. Can I choose which vaccine I receive?

Unfortunately not, you will receive the vaccine which is available at the time of your appointment.

Q14. How long will I have to wait at the Ferry Port?

Clinics are booked in such a way that patients should not need to wait, other than the required 15-minute observation period after receiving the vaccine. However delays can occur and we aim to keep these to a minimum. Patients can assist us by arriving no earlier than 5 minutes before their booking time and bringing their own mobility aids where required.

Q15. How will Housebound patients be vaccinated?

During the week 25th January we will begin to vaccinate housebound patients in their own home. We were previously not able to move the vaccine from our approved delivery site, however the legislation has now changed, which has enabled us to start vaccinating this group of patients.

The booking team will call housebound patients the day before a clinician will attend to vaccinate them.

We are still required to deliver vaccines to housebound patients who fall into the related to the first 4 age cohorts as set by JVCI, this currently being the over 70s.

Q16. I have received an NHS letter to book a vaccination, how do I do this?

The NHS is opening mass vaccination centres across the country. The closest to our patients is now the Bournemouth International Centre (BIC). You may receive a letter invite if you live within driving distance of one of these centres. These letters have now been sent out to everyone in the top 4 priority groups, most recently those who are over 70 and who are over 18 and Clinically Extremely Vulnerable (CEV).

Please use the booking information on the letter if you are planning to attend.

If you would prefer to receive your vaccine locally by your GP. Then please ignore this letter and await contact from your surgery.

If you have already received your vaccine locally i.e. by your GP, please ignore the letter.

Q17. I've contacted the national booking service but I can't travel to one of the locations that are available, what should I do?

More locations will become available in the coming weeks' so you could try again later. Alternatively, you can choose to wait until your GP service invites you for the vaccine. If you are housebound and unable to leave the house to travel to any appointment, and cannot arrange for someone to help you, your local NHS services i.e. your GP, will be in contact with you.



Q18. I've already had my first vaccine at the BIC can I cancel my second appointment and re-book at the Ferry Port.

No. Please keep your second vaccine booking and continue through the BIC vaccination programme.

Q19. I'm a Health/Social care worker, can I get my vaccine through my GP?

We previously sent a text message to patients asking them to identify themselves as a Health or Social Care Worker and have been inviting some Health and Social Care Workers to our first clinics. However, employers of health and social care have now been granted access to send employees to the Mass Vaccination Centre at Bournemouth International Centre please see letter on our [webpage](#). For more information on who classifies as a Frontline Health/Social care worker please see the Appendix.

Q20. I'm not in one of the current priority groups but I would like to have my vaccine as soon as possible?

We will be vaccinating patients in order of priority group i.e. those being the most at risk first. Unfortunately we are unable to vaccinate any patients who fall out of the main vaccination criteria as set out by the Government. For more information please see the links in Q4.

Q21. I'm eligible for the vaccine based on the Government's criteria, but I'm pregnant, can I still have it?

Not at this time. Although the available data do not indicate any harm to pregnancy, there is insufficient evidence to recommend the routine use of COVID-19 vaccines during pregnancy. However, some consideration can be given if the risk of Covid-19 exposure is significantly high and cannot be avoided, or if the mother has underlying health problems which puts them at high risk of serious complications from contracting the Covid-19 virus.

Q22. I've received a text but I think it may be a scam?

We are aware of a number of vaccination scams going round. Including those asking for payment via **noreply@nhs.gov.uk**. Please remember the vaccine will always been free on the NHS and our staff will never ask for payment in any form. Further information can be found at: [advice on protecting yourself from COVID-19 scams](#).

Q23. I've had my first vaccine how can I book my second appointment?

We have yet to book patients in for their 2nd vaccines. Please wait to be contacted by our booking team.

**Please remember we will contact you when it is your turn to be vaccinated.
Please do NOT contact your surgery unless specifically advised to do.**



APPENDIX

Frontline Healthcare Staff Criteria

This includes the following groups:

Staff involved in direct patient care

This includes staff who have frequent face-to-face clinical contact with patients and who are directly involved in patient care in either secondary or primary care/community settings. This includes doctors, dentists, midwives and nurses, paramedics and ambulance drivers, pharmacists, optometrists, occupational therapists, physiotherapists and radiographers. It should also include those working in independent, voluntary and non-standard healthcare settings such as hospices, and community-based mental health or addiction services. Temporary staff, including those working in the COVID-19 vaccination programme, students, trainees and volunteers who are working with patients must also be included.

Non-clinical staff in secondary or primary care/community healthcare settings

This includes non-clinical ancillary staff who may have social contact with patients but are not directly involved in patient care. This group includes receptionists, ward clerks, porters and cleaners.

Laboratory and pathology staff

Hospital-based laboratory and mortuary staff who frequently handle SARS-CoV-2 or collect or handle potentially infected specimens, including respiratory, gastrointestinal and blood specimens should be eligible as they may also have social contact with patients. This may also include cleaners, porters, secretaries and receptionists in laboratories. Frontline funeral operatives and mortuary technicians / embalmers are both at risk of exposure and likely to spend a considerable amount of time in care homes and hospital settings where they may also expose multiple patients. Staff working in non-hospital-based laboratories and those academic or commercial research laboratories who handle clinical specimens or potentially infected samples will be able to use effective protective equipment in their work and should be at low risk of exposure.

Frontline social care workers

This would include:

- those working in long-stay residential and nursing care homes or other long-stay care facilities where rapid spread is likely to follow introduction of infection and cause high morbidity and mortality
- social care staff directly involved in the care of their patients or clients
- others involved directly in delivering social care such that they and vulnerable patients/ clients are at increased risk of exposure Young people age 16-18 years, who are employed in, studying or in training for health and social care work



should be offered vaccination alongside their colleagues if a suitable vaccine is available.

Younger people who are taking part in health and social care work as volunteers, interns or for the purposes of work experience, should make all efforts to avoid exposure to infection; vaccination would **not** normally be required.

The above information has been taken from Chapter 14a of the Government's Green book on Covid-19-SARS-Cov-2.

Priority Group 6 – Those with underlying health conditions

The below information has been taken from Chapter 14a of the Government's Green book on Covid-19-SARS-Cov-2.

Underlying Health Conditions/other eligibility criteria included in Group 6 –

Table 3 Clinical risk groups 16 years of age and over who should receive COVID-19 immunisation.

Chronic respiratory disease	Individuals with a severe lung condition, including those with asthma that requires continuous or repeated use of systemic steroids or with previous exacerbations requiring hospital admission, and chronic obstructive pulmonary disease (COPD) including chronic bronchitis and emphysema; bronchiectasis, cystic fibrosis, interstitial lung fibrosis, pneumoconiosis and bronchopulmonary dysplasia (BPD).
Chronic heart disease and vascular disease	Congenital heart disease, hypertension with cardiac complications, chronic heart failure, individuals requiring regular medication and/or follow-up for ischaemic heart disease. This includes individuals with atrial fibrillation, peripheral vascular disease or a history of venous thromboembolism.
Chronic kidney disease	Chronic kidney disease at stage 3, 4 or 5, chronic kidney failure, nephrotic syndrome, kidney transplantation.
Chronic liver disease	Cirrhosis, biliary atresia, chronic hepatitis.
Chronic neurological disease	Stroke, transient ischaemic attack (TIA). Conditions in which respiratory function may be compromised due to neurological disease (e.g. polio syndrome sufferers). This includes individuals with cerebral palsy, severe or profound learning disabilities, Down's Syndrome, multiple sclerosis, epilepsy, dementia, Parkinson's disease, motor neurone disease and related or similar conditions; or hereditary and degenerative disease of the nervous system or muscles; or severe neurological disability.
Diabetes mellitus	Any diabetes, including diet-controlled diabetes.



Immunosuppression	<p>Immunosuppression due to disease or treatment, including patients undergoing chemotherapy leading to immunosuppression, patients undergoing radical radiotherapy, solid organ transplant recipients, bone marrow or stem cell transplant recipients, HIV infection at all stages, multiple myeloma or genetic disorders affecting the immune system (e.g. IRAK-4, NEMO, complement disorder, SCID).</p> <p>Individuals who are receiving immunosuppressive or immunomodulating biological therapy including, but not limited to, anti-TNF, alemtuzumab, ofatumumab, rituximab, patients receiving protein kinase inhibitors or PARP inhibitors, and individuals treated with steroid sparing agents such as cyclophosphamide and mycophenolate mofetil.</p> <p>Individuals treated with or likely to be treated with systemic steroids for more than a month at a dose equivalent to prednisolone at 20mg or more per day for adults.</p> <p>Anyone with a history of haematological malignancy, including leukaemia, lymphoma, and myeloma and those with systemic lupus erythematosus and rheumatoid arthritis, and psoriasis who may require long term immunosuppressive treatments.</p> <p>Most of the more severely immunosuppressed individuals in this group should already be flagged as CEV. Individuals who are not yet on the CEV list but who are about to receive highly immunosuppressive interventions or those whose level of immunosuppression is about to increase may be therefore be offered vaccine alongside the CEV group, if therapy can be safely delayed or there is sufficient time (ideally two weeks) before therapy commences.</p> <p>Some immunosuppressed patients may have a suboptimal immunological response to the vaccine (see Immunosuppression and HIV).</p>
Asplenia or dysfunction of the spleen	<p>This also includes conditions that may lead to splenic dysfunction, such as homozygous sickle cell disease, thalassemia major and coeliac syndrome.</p>
Morbid obesity	<p>Adults with a Body Mass Index ≥ 40 kg/m².</p>
Severe mental illness	<p>Individuals with schizophrenia or bipolar disorder, or any mental illness that causes severe functional impairment.</p>
Adult carers	<p>Those who are eligible for a carer's allowance, or those who are the sole or primary carer of an elderly or disabled person who is at increased risk of COVID-19 mortality and therefore clinically vulnerable.¹</p>
Younger adults in long-stay nursing and residential care settings	<p>Many younger adults in residential care settings will be eligible for vaccination because they fall into one of the clinical risk groups above (for example learning disabilities). Given the likely high risk of exposure in these settings, where a high proportion of the population would be considered eligible, vaccination of the whole resident population is recommended.</p> <p>Younger residents in care homes for the elderly will be at high risk of exposure, and although they may be at lower risk of mortality than older residents should not be excluded from vaccination programmes (see priority 1 above).</p> <p>For consideration of children under 16 see below.</p>