

## Vaccination as a condition of deployment in care homes Stakeholder Q&A

### About the regulations

#### Why is uptake of the vaccine so important?

- Vaccination is a safe and effective way of protecting people from being infected with COVID-19 and prevents severe disease and death in those who catch the virus.
- Real world data from [Public Health England](#) indicates that the COVID-19 vaccination programme has so far prevented 13,000 deaths and around 39,100 hospitalisations in older people in England, (up to 9 May).
- There is evidence to suggest that the vaccine also prevents those who catch the virus from infecting other people, thus preventing the spread.
- Public Health England's [Vivaldi study](#) found evidence that the COVID-19 vaccines were associated with a substantially reduced risk of infection in care home residents. It found that a single dose of either the Oxford-AstraZeneca or Pfizer vaccines was effective at preventing 56% of infections after four weeks, rising to 62% of infections after five weeks.
- The SIREN study has also shown an effectiveness against infection of 72% 21 days after the first dose of the Pfizer vaccine - this is similar to the effects seen in the AstraZeneca trials. The impact on transmission would therefore be expected to be at least this large because individuals who are not infected *should not* transmit.

#### Who will this policy apply to?

The regulations will apply to:

- Any individual working in a CQC-regulated care home in England which provides nursing or personal care, subject to certain exemptions. This includes:
  - All workers employed directly by the care home or care home provider (on a full-time or part-time basis)
  - All workers employed by an agency and deployed by the care home
  - Volunteers deployed in the care home.
- Anyone coming into care homes to do other work, for example healthcare workers, tradespeople, CQC inspectors, hairdressers and beauticians.

This will help ensure residents at high risk from COVID-19 either due to their age, underlying health conditions, or disability are better protected against the virus.

#### Who will this policy not apply to?

The regulations will not apply to:

- Anyone who has a medical reason that means they cannot have a vaccination
- Family and friends visiting a care home resident
- Essential Care Givers
- Any person providing emergency assistance
- Any member of the emergency services
- Anyone undertaking urgent maintenance work
- Any person under the age of 18.

**When will the new regulations come into force?**

Regulations will be laid before Parliament at the earliest opportunity. If approved by Parliament, there will be a minimum of a 16-week grace period from when the regulations are made to when they come into force to enable staff who haven't been vaccinated to take up the vaccine.

Once implemented we will keep the regulations under review to ensure they reflect the latest clinical guidance.

**Why have you singled out care homes?**

Care home workers do an amazing job to support the people they care for and protect those most at risk from COVID-19.

The Social Care Working Group of SAGE has advised that 80% of staff and 90% of residents in each individual care home setting need a first vaccination dose to provide a minimum level of protection against outbreaks of COVID-19, recognising that current or emergent variants may require even higher levels of coverage and/or new vaccines to sustain levels of protection. As of 9 June, only 65% of older adult homes in England are currently meeting this dual threshold for the first dose, and the proportion is lowest in London with only 44% reaching the dual threshold.

While the SAGE working group advice is specifically about first doses – it should be noted that for second doses, only 41% of homes are reaching this 80/90% level of coverage. London is the region with the lowest uptake levels, with only 23% of care homes reaching the dual threshold.

Without high uptake among staff in care homes there is a significant risk of the virus spreading further and causing harm to residents and those who cannot take the vaccine for medical reasons. Sustaining high levels of staff vaccination now and in the future as people enter the workforce is also important to minimise the risk of outbreaks.

We place conditions on those who work with people at risk such as background checks or wearing PPE when necessary. This is more important as vaccines provide high levels of protection and impact on transmission of infection.

**Why have you now extended this policy to all CQC regulated care homes?**

In response to the consultation, the Government is extending the policy to all CQC regulated care homes in England providing nursing or personal care. This is to ensure residents at high risk from COVID-19 either due to their age, underlying health conditions or disability are better protected against the virus.

Clinical experts from the Social Care Working Group of SAGE have identified care homes for adults with a severe disability at any age, as well as care homes for older adults, as being high risk settings for outbreaks of COVID-19 where maintaining high levels of staff vaccination could prevent severe disease and transmission.

Analysis by Public Health England has also showed that the pattern and number of deaths in care homes for people with learning disabilities is similar to the number of deaths in small care homes for older people.

**What proof will be needed by staff and visiting professionals to say they have a vaccine?**

Any staff or visiting professionals entering a care home would need to provide evidence of their vaccination or exemption status.

The Government is working with NHSX to explore the use of the NHS App for demonstrating vaccination status, with web-based and non-digital alternatives provided for people who do not have access to a smartphone. We are also working on a simple process to allow people to prove their exemption status.

Service providers would need to ensure that they have a process of demonstrating to CQC that they are compliant with the regulations.

Further details will be outlined in guidance in due course.

**How will the regulations be enforced? Will you take action against homes that don't require their staff to be vaccinated?**

Any enforcement would be carried out by the regulator, the Care Quality Commission (CQC), which has a range of enforcement powers to act where a care home provider does not meet the requirements of this regulation.

CQC consider compliance with infection prevention and control measures, including testing for COVID-19, when carrying out their regulatory activity, and take proportionate action where they consider people using services/care home residents to be at risk of harm.

**Is there a precedent for this?**

Yes - some care home providers have already implemented their own policies requiring new or existing members of staff be vaccinated against COVID-19.

In addition, there is some precedent in the wider NHS. Medical staff such as some doctors in the NHS are strongly recommended to take the Hepatitis B vaccination and this is outlined in the Green Book and relevant employment contracts. In each case the need for these vaccines is judged based on the risk posed to both workers in these areas and those in their care.

**Most care home residents have been vaccinated. Why are we doing this when vaccines have proved so effective?**

Vaccines are the best way to protect people from coronavirus and have saved thousands of lives. Vaccinated people are less likely to get serious COVID-19, to be admitted to hospital, or to die from it. There is also evidence that they are less likely to pass the virus onto others.

Despite this there will always be some residents and people at risk from the virus who cannot take up the vaccine for medical reasons.

This requirement is designed to prevent COVID-19 from being brought into care homes and care settings where people are most at risk. Ensuring anyone entering a care home is vaccinated subject to specific exemptions, is the most effective way to prevent outbreaks and protect everyone who lives, works or visits a care home.

## Exemptions

**What happens if staff can't have the vaccine for medical reasons?**

There will be a small number of people where the clinical advice is that the COVID-19 vaccination is not suitable for them. Further details on this will be outlined in guidance, which we will provide in due course. This guidance will give more detail about exemptions, which will reflect the Green Book on Immunisation against infectious disease ([COVID-19: the green book, chapter 14a](#)) and clinical advice from The Joint Committee of Vaccination and Immunisation (JCVI).

### **What about care home workers who are pregnant?**

The Joint Committee on Vaccination and Immunisation (JCVI) has advised that pregnant women should be offered the COVID-19 vaccine at the same time as the rest of the population, based on their age and clinical risk group.

There have been no specific safety concerns identified with any brand of COVID-19 vaccines in relation to pregnancy. Real-world data from the United States show that around 90,000 pregnant women have been vaccinated, mainly with mRNA vaccines including Pfizer-BioNTech and Moderna, without any safety concerns being raised. Based on this data, the JCVI advises that it is preferable for pregnant women in the UK to be offered the Pfizer-BioNTech or Moderna vaccines where available.

The regulations will apply to all staff working in a CQC-regulated care home for people requiring nursing or personal care in England, including those who are pregnant, unless they have a medical reason not to be vaccinated.

Further details will be outlined in guidance, which we will provide in due course.

### **What about care home workers who are breastfeeding, or trying to get pregnant?**

The regulations will apply to all staff working in a CQC-regulated care home for people requiring nursing or personal care in England, including those who are breastfeeding or planning to get pregnant, unless they have a medical reason not to be vaccinated.

Women who are planning pregnancy, are in the immediate postpartum, or are breastfeeding can be vaccinated with any vaccine, depending on their age and clinical risk group.

All the vaccines are subject to rigorous testing before they can be given to the public. There is no evidence to suggest the vaccines can cause problems with fertility. The British Fertility Society (BFS) and Association of Reproductive and Clinical Scientists (ARCS) say there is absolutely no evidence, and no theoretical reason, that any of the vaccines can affect the fertility of women or men.

### **How will care home workers prove they are medically exempt?**

The Government is working with NHSX to explore the use of the NHS App for demonstrating vaccination status, with web-based and non-digital alternatives provided for people who do not have access to a smartphone. We are also working on a simple process to allow people to prove their exemption status.

Further details will be outlined in guidance in due course.

### **Why are family and friends visiting people in care homes not required to take the vaccine?**

We recommend that anyone who can have the COVID-19 vaccine should take it up when they are advised to by their GP or by the NHS. However, there are no plans to extend any requirement to visiting friends and family.

The SAGE Social Care Working Group has advised that ensuring and sustaining very high levels of vaccination of people living and working in care homes is essential to reduce the risk of outbreaks. This is because environments in which the same group of people come into close contact with one another, numerous times a day, will lead to faster and more comprehensive transmission of the virus to all occupants (workers and residents) than other more open settings.

Visits from family and friends, however, are a crucial part of ensuring people living in care homes have a good quality of life and maintain a positive wellbeing. Public Health England

has advised that while this group should be encouraged to get vaccinated, if they cannot or will not, it would be unjustifiably detrimental to residents to deprive them of contact with, and care from, their loved ones. There is no replacement for someone's friends or family members. In these cases, other Infection Prevention and Control mitigations should be used which is why those visiting friends or family will still be required to adhere to testing guidelines when attending a care home.

### **Why are all care home residents not required to have the vaccine, particularly new residents just joining a care home?**

The vast majority of care home residents have taken up the COVID-19 vaccine but there will be some residents who cannot take the vaccine due to medical reasons. These regulations will help to prevent COVID-19 from being brought into care homes and care settings where people are most at risk.

All care home residents are required to undergo testing before being admitted to a new care home and participate in regular testing in line with the latest Government guidance to minimise the risk of infection. This is currently monthly outside of outbreaks scenarios.

### **Does this impact unpaid carers?**

The Regulations will not apply to friends or relatives who are visiting a care home resident, including 'essential care givers', being those friends or relatives who have agreed with the care home that they will visit regularly and provide personal care.

## **Staffing**

### **What happens if staff refuse the vaccine?**

The majority of those who work in care homes have already taken up the vaccine and we will continue to encourage the remaining staff to take it up voluntarily until the regulations are introduced. If someone is eligible for the vaccine and decides not to comply with the new guidelines, then they may be asked to find alternative employment that does not involve working in a care home. Under the regulations, unless a person satisfies one of the exemptions, they will not be permitted to enter the care home.

### **What are you doing to support care homes to ensure they can maintain safe staffing levels?**

The majority of care home staff have already taken up the vaccine and there is time for staff who have yet to be vaccinated to have both jabs between now and implementation. This includes the 16-week grace period, which not only provides time for staff to be vaccinated but also for care homes to manage staff transitions if this is necessary.

We are also working with Skills for Care to ensure that resources such as guidance and best practice are available to support providers and local authorities with capacity and workforce planning, recruitment and well-being. Skills for Care will also provide local and national workforce support to local authorities and employers. We will also work with local authorities to ensure they are contingency planning and accessing additional support, as well as promoting joint working across a region to assist with targeted recruitment.

### **What happens if staff can't get a vaccine?**

Any staff who have not yet received their vaccine can make an appointment at one of hundreds of vaccination centres across England through the [NHS National Booking Service](#) online, or via their GP.

## **Health and social care consultation**

### **What about the NHS and wider social care settings?**

Vaccination remains the best way to protect the most at risk from COVID-19 infection and serious disease. It is vital that all health and social care workers take up the vaccine to protect themselves, their colleagues and those in their care.

While residents in care homes are most at risk from COVID-19, the responses to the consultation on care homes identified a clear public health rationale to consider extending this policy beyond care homes to other settings where people vulnerable to COVID-19 may also receive care.

The Government will therefore be launching a further public consultation on whether or not to make COVID-19 vaccination a condition of deployment in healthcare and the wider social care sector, to protect patients and the people they care for from becoming seriously ill or dying from the virus.

This is a complex and important issue which must be considered as part of a new consultation. Which is why we want to gather a wide range of perspectives from across both sectors about whether such a requirement should be introduced and how it could be implemented. The proposals need to be looked at carefully to take account of potential differences between certain health and social care settings.

The consultation will also explore whether flu vaccination should also be a condition of deployment for staff working in health and social care settings.

### **Are you considering requiring staff to take other vaccinations alongside COVID, such as the annual flu vaccine?**

Vaccines are a safe and effective way of managing infectious disease and we strongly recommend having the annual flu vaccine.

The Government is considering making both COVID-19 vaccination and flu vaccination a condition of deployment in health and social care to protect patients and the people they care for from becoming seriously ill or dying from these deadly diseases.

Flu is a serious illness for older people, people of all ages with certain medical conditions such as diabetes or chronic asthma, and pregnant women. Outbreaks of flu in care settings are common most winters and it is important we explore this option to protect those at risk and reduce the level of annual winter flu deaths.

This is a complex and important issue which is why we will be launching a public consultation in the coming weeks so we can gather a wide range of perspectives from across the health and care sector about whether this should be introduced and how it would be implemented.