

**Revoking vaccination as a condition of deployment across all health and social care**

**Royal Pharmaceutical Society response**

**Question**

**It is a statutory requirement that CQC-registered persons only permit those individuals who are vaccinated against COVID-19, unless otherwise exempt:**

1. **to be deployed for the provision of a CQC-regulated activity in health and/or social care and;**
2. **to enter CQC-registered care home premises**

**Which of the following best describes your preference for this requirement?**

* I feel strongly that the requirement should be revoked
* I would prefer that the requirement is revoked
* I don’t mind either way
* I would prefer that the requirement is not revoked
* I feel strongly that the requirement should not be revoked
* I don’t know

**Question**

**Thinking about yourself, your colleagues, your staff or care providers who are hesitant to get vaccinated, do you believe there are other steps (other than those set out in the**[**original consultation**](https://www.gov.uk/government/consultations/making-vaccination-a-condition-of-deployment-in-the-health-and-wider-social-care-sector/making-vaccination-a-condition-of-deployment-in-the-health-and-wider-social-care-sector#annex-a)**) the government and the health and care sector could take to increase vaccine uptake?**

* yes
* no
* I don’t know

**If yes, what specific actions do you believe government and the health and social care sector should be taking to further increase vaccine uptake?**

There are several things that the government can do to promote uptake of vaccinations:

* Ongoing promotion of the benefits of being vaccinated and targeted to groups that are currently not taking up vaccinations
* Understanding the issues / barriers to being vaccinated and providing an open space to discuss and resolve them
* Targeted emails to vulnerable health and care staff
* Supporting line managers and employers to have conversations about vaccinations
* Enabling access to clinicians for those who have questions around safety and efficacy of vaccinations
* Making vaccinations accessible outside of working hours
* Making vaccinations free of charge to all frontline health and social care staff
* Strong messages about responsibilities to patients and duty of care

We are aware that some of this is happening already

**Question**

**Are there particular groups of people, such as those with protected characteristics, who would be particularly negatively affected by a COVID-19 vaccination not being a condition of deployment in healthcare and social care**?

* yes
* no
* not sure

**If, yes, which particular groups might be negatively impacted and why?**

**Question**

**Are there particular groups of people, such as those with protected characteristics, who would particularly benefit from a COVID-19 vaccination not being a condition of deployment in healthcare and social care?**

* yes
* no
* not sure

**If yes, which particular groups might be positively impacted and why?**

Employees with a disability could be exempt from Covid-19 vaccinations for medical reasons, but if not, they will be positively impacted by this condition being removed.

Similarly, employees from the Black Asian and Minority Ethnic Groups where there is higher vaccination hesitancy and pregnant women, where there remains hesitancy in getting the vaccine are likely to be positively impacted. Mandating the vaccine would disproportionality affect these groups but removing this mandate obviously removes that impact. These employees / people will no longer lose their jobs and this could also have potentially increased gender / ethnicity pay gaps.

If the condition to be vaccinated were to continue then this could result in a two-tier workforce and the risk of parts of the workforce being excluded from particular activities. The overall negative impact on the workforce, were vaccinations to continue to be a condition of deployment, could be significant.

**Question**

**What actions can the government and the health and social care sectors take to protect those with protected characteristics, or the groups you’ve identified, if COVID-19 vaccination is not a condition of deployment?**

Adequate ventilation, consideration of operational capacity and ways of working, social distancing, hygiene and adequate PPE can reduce the transmission of both covid-19 and flu and health and care settings should ensure they have adequate measures in place. PPE should continue to be provided free of charge to health and social care workers.

If prevalence rises within communities then wider public measures will need to be undertaken to protect everyone within those communities.

Regular testing for those working in health and social care environments should also be maintained and tests continue to be made freely available.

Initial risk assessments should be undertaken so those who are most vulnerable can be identified and supported. Redeployment options, regular risk assessments after the initial risk assessment, regular discussions and campaigns to encourage and support staff should continue.

Where possible, employers should be encouraged to explore options for vulnerable people to work from home. Covid peaks should be monitored and during this time, those that are more vulnerable should be moved to safer places of work or work from home.

There is also the possibility that people who are vaccinated no longer take adequate precautions such as wearing face masks and regular hand washing, thereby increasing the risk of transmission.