



Vaccination as a condition of deployment (VCOD) for healthcare workers

Frequently asked questions
14 January 2022, Version 1

These FAQs accompany the [‘Vaccination as a condition of deployment \(VCOD\) for healthcare workers: Phase 1 – Planning and preparation’](#) and [Phase 2: VCOD Implementation Guidance](#) published by NHS England and NHS Improvement.

The FAQs apply to all trusts and foundation trusts, integrated care systems (ICSs), community interest companies (CICs), and all organisations registered with the Care Quality Commission (CQC) for the purposes of providing health care. However, some questions can also be generally applied to other organisations providing NHS-commissioned services, such as primary care services and to the independent sector.

It is noted that as independent employers, primary care providers may wish to seek individual legal advice.

FAQs will be updated accordingly.

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General questions

1. What is the purpose of the VCOD regulations and why is vaccine uptake important?

The VCOD regulations in health and adult social care settings (domiciliary care and other CQC regulated settings) are intended to:

- Protect all those that use health and social care services, a large number of whom are vulnerable, as well as the wider community.
- Protect workers through increasing vaccination uptake rates.
- Help reduce COVID-19 related sickness absences.

2. When do these regulations take effect and when will staff need to be vaccinated by?

The regulations will take effect from **1 April 2022**; however, there are a few dates that you must be aware of:

- Prior to the regulations taking effect, there will be a 12-week grace period commencing on **6 January 2022**. For those workers who are hesitant about being vaccinated against COVID-19, it is encouraged that they use this time to have supportive discussions with their line managers and access support provided by their employers.
- In order to comply with the regulations to be fully vaccinated against COVID-19 by 1 April 2022, in-scope workers will have had to receive their first vaccination dose by **3 February 2022**.
- In order to comply with the regulations to be fully vaccinated against COVID-19 by 1 April 2022, in-scope workers will have had to receive their second vaccination dose by **31 March 2022**.
- In scope workers who believe that they are exempt from having the COVID-19 vaccination must provide evidence of their exemption as soon as possible but at the latest by **31 March 2022** before the regulations take effect on 1 April 2022.

3. Who do these regulations apply to?

The requirement to be fully vaccinated and comply with the [VCOD regulations](#) will apply to:

- Health and social care workers who are deployed for the purpose of providing CQC regulated activities and have direct face-to-face contact with people receiving care. This includes general practice and dentistry.

- This includes individuals working in both clinical and non-clinical ancillary roles and regardless of contracted hours or employment arrangements, and as such applies to honorary, voluntary, locum, bank and agency workers, independent contractors, students, trainees and other temporary workers, in addition to employed staff.
- The guidance includes a [flowchart](#) to support identification of in-scope workers and supporting scenarios for different types of workers.

4. Who do these regulations not apply to?

[VCOD regulations](#) sets out the following five (5) exemptions that may apply to those deployed for the purpose of providing CQC regulated activities who would otherwise be in scope. Workers are required to provide all relevant evidence of their exemption prior to 1 April 2022 when the regulations take effect:

- Workers that do not have direct face-to-face contact with people receiving care
- Workers who are under the age of 18
- Workers who are participating/have participated in a clinical trial for a COVID-19 vaccine
- Workers who should not be vaccinated against COVID-19 for clinical/medical reasons
- Workers who are pregnant and have a temporary medical exemption which will be valid until 16 weeks following giving birth.

5. Do the regulations apply to services provided by community pharmacy?

Community pharmacy is regulated by the General Pharmaceutical Council. Only activities regulated by CQC are covered by the legislative provisions. However, it remains essential for community pharmacy staff with patient facing roles to protect patients, their colleagues, their families, and themselves by getting fully vaccinated, irrespective of where they work, including, for example, hospital outpatient dispensing facilities.

The General Pharmaceutical Council strongly urges pharmacy teams to get vaccinated. Community pharmacy staff who visit care homes to provide services must be vaccinated.

6. Can the guidance and resources provided be used by independent healthcare providers?

Yes. Our guidance sets out principles and processes which can be followed by any healthcare provider deploying or engaging workers to carry out CQC regulated activities in England. Organisations outside the NHS should consider taking their own independent legal advice on their specific circumstances and contractual arrangements.

7. Are call centre staff considered 'in scope' of these regulations?

If call centre staff have face-to-face contact with people receiving care as part of their role, then they would be in scope. Many 111 or 999 call centre staff may rotate into face to face work as part of their role and thus it is required that they are vaccinated in order to comply with the regulations.

Workers

8. What do these regulations mean for me, as a healthcare worker?

From 1 April 2022, it will become law that any worker employed or engaged for the purposes of the provision of a CQC regulated activity and who has face-to-face contact with people receiving care must be fully vaccinated with an authorised COVID-19 vaccine or be able to demonstrate that they fall into the listed exemptions. Your employer will confirm whether your role is in scope of the new regulations and if so, you will only be able to continue working if you are vaccinated or are able to demonstrate that you fall within one of the exemptions listed in the VCOD regulations. Please ensure you have a supportive discussion with your line manager to discuss your circumstances and receive the support provided by your employer.

9. I'm not vaccinated, and I'm not sure if I want to be. Is there any support available? Can I take time to make a decision?

There is plenty of support available to help you make an informed decision about vaccination. Please talk to your line manager about any concerns you may have and access support available locally. Additionally, there are some nationally provided health and wellbeing resources that may also be of support to you and are available [here](#).

There is time for you to consider your options and explore and research the vaccine. However, please be aware that you will need to have had your **first vaccination dose by 3 February 2022** in order to have your second dose by 31 March 2022.

10. I can't have the vaccination due to medical reasons. What should I do?

There will be a small number of workers where the clinical advice is that the COVID-19 vaccination is not suitable for them. In such cases they will be able to apply for proof of their medical exemption status to ensure they comply with the regulations. Information about the formal exemption process can be found [here](#).

11. What are the criteria for medical exemptions?

The criteria for medical exemptions are based on advice from Joint Committee on Vaccination and Immunisation (JCVI) and the Green Book as well as consultation with senior clinicians.

Examples of medical exemptions from COVID-19 vaccination could include individuals:

- With learning disabilities or autistic individuals, or with a combination of impairments which result in the same distress, who find vaccination and testing distressing because of their condition and where vaccination cannot be achieved through reasonable adjustments such as provision of an accessible environment,
- With medical contraindications to the vaccines such as severe allergy to all COVID-19 vaccines or their constituents,
- Who have had adverse reactions to the first dose (eg myocarditis),
- Receiving end of life care where vaccination is not in the individual's interests.

Time-limited exemptions will also be available for those with short-term medical conditions (eg people receiving hospital care or receiving medication which may interact with the vaccination).

The criteria for exemptions is informed by the [Covid-19 section of the Green Book](#).

NHS organisations **are required** to record the vaccination status of individuals exempt from the VCOD regulations and therefore can access vaccination information about individuals provided by NHS England.

12. I'm not vaccinated and I'm pregnant, what does this mean for me?

JCVI has advised that pregnant women should be offered COVID-19 vaccines and that pregnant women should discuss the risks and benefits of vaccination with their healthcare professional, including the latest evidence on safety and which vaccines they should receive.

While the Royal College of Obstetricians and Gynaecologists (RCOG), the Royal College of Midwives (RCM) and the UK Tetralogy Service recommend the COVID-19 vaccination for pregnant and breastfeeding women, you can request a short-term exemption from vaccination, which expires 16 weeks following the birth of your child/children. This will allow you to become fully vaccinated after giving birth. Please refer to the [Royal College of Obstetricians and Gynaecologists](#) (RCOG) website for further information.

13. What is the process for applying for a medical exemption?

Individuals in scope of the regulations, who believe they are exempt from the requirement to be vaccinated should apply for a formal COVID-19 medical exemption to comply with the regulations. This can be done by ringing 119 (you should not ask your GP for an application form. If you do go to your GP before you get your application form, you'll be asked to call the NHS COVID Pass service on 119), and requesting an NHS COVID Pass medical exemption application form.

The possible reasons for exemptions are limited. Your application will be clinically reviewed by a doctor, specialist clinician or midwife and you will automatically get the results of your application by post 2 to 3 weeks after applying.

Pregnant women can alternatively use MAT B1 certificates as an alternative to applying for a medical exemption.

If you wish to apply for a formal medical exemption, please do so as soon as possible and inform your line manager of the outcome of your application.

14. I'm not vaccinated and I'm currently on sick leave, what does this mean for me?

You should immediately discuss your current circumstances with your line manager to discuss any clinical/medical exemptions you may have.

15. If I am not fully vaccinated by 1 April 2022, can I be redeployed to another role?

We would firstly encourage all eligible members of staff to take up the option of having their COVID vaccinations. This still remains the best course of action to protect yourself, patients, and colleagues against severe illness. If you have any concerns, please talk to your line manager about receiving the vaccination and access the support provided by your employer.

If you choose not to be vaccinated, your line manager will discuss with you any reasonable possibilities for redeployment. However, please be aware that redeployment opportunities will be limited, and this will not be a guaranteed option.

Also, redeployment opportunities may not be on the same/similar terms and conditions you currently hold eg there may be changes to your band, pay and working arrangements.

16. If I choose to remain unvaccinated, can I be dismissed?

Yes. If, following one-to-one conversations, you decide to remain unvaccinated and if no redeployment opportunities are available, a possible outcome is that your employment will cease effective 1 April 2022 or after in line with your organisation's policies and procedures.

17. I've been vaccinated abroad; do I meet the vaccination requirements of the regulations?

Individuals who are vaccinated abroad will be required to provide evidence of their vaccination status and, where necessary, have a top-up dose with a UK authorised vaccine consistent with the UK Health Security Agency (UKHSA) guidance on vaccines. To avoid doubt, mixed doses (that is, where different vaccines have been administered to complete the dose schedule) will be accepted for the purposes of the vaccination requirements. For further information, please see the following link detailing [vaccinations received abroad](#).

Managers

18. What does this regulation mean for me, as a manager?

As a manager, your role will be to support your team and escalate any concerns to the appropriate person within your organisation. This will involve having supportive conversations with team members and signposting them to the vaccine information and staff support services, to encourage them to take up the offer of the vaccine where eligible. You will be expected to undertake risk assessments for your staff and determine which roles fall in or out of scope of the regulations for your area utilising the published [phase 1 guidance](#). As a manager and member of staff, you will also be encouraged to have the vaccine if your role falls within scope of the policy.

19. How can I support staff in my team who are not vaccinated?

You can support your staff in a number of different ways. First and foremost, ensure you have an individual conversation with members of your team to understand any concerns or answer any specific queries. You should provide accurate information on the safety of the vaccine and the benefits of having it. You should also [signpost](#) staff to any specific queries they may have eg having the vaccine while breastfeeding. You should undertake risk assessments for all members of staff to ensure appropriate mitigations are in place and follow local guidance on keeping staff safe in the workplace.

Health and wellbeing of staff is of utmost importance and we realise the additional pressures placed upon the workforce at this time. We have produced some health and wellbeing [tools](#) to support your team.

It is important to ensure that workers who are currently unvaccinated are treated with dignity and respect and that managers who are working towards compliance with the regulations are mindful that many factors, including cultural and religious or philosophical factors or lived experience, may influence a person's decision about vaccination.

20. What if an individual reports that they have recently been tested positive for COVID-19 and unable to receive a first vaccination dose prior to 3 Feb deadline?

UKHSA advice states that where an individual aged 18 years old and over has recently been infected with COVID-19, they should wait for 28 days (4 weeks) before getting a dose of any vaccine. For the purposes of the Regulations, individuals will be considered temporarily exempt from the date of their positive test result on the basis that there are clinical reasons why they should not be vaccinated.

Their temporary exemption:

- Will start from the date of their positive test,

- Continues for 42 days from the date of their positive test result,
- The 42 days comprises a 28-day grace period based on clinical advice, and 14 days in which to receive their first dose of COVID-19 vaccine.

You should ask the individual to provide evidence of their positive test and date. This could include a text message after using a rapid lateral flow test kit, or the NHS App for proof of prior infection. You should also remind the individual to book their vaccine appointment after the 28-day period.

As the registered person, you should note that you will need to see evidence of an individual's vaccination status, unless medically exempt or covered by other exceptions, for them to continue providing CQC-regulated activities after the 42 days. After 42 days, you should no longer consider them as being temporarily exempt.

Following a period of 10 weeks from the date of their first vaccination, the registered person will no longer be able to employ or otherwise engage the individual for the provision of the regulated activity until the individual provides evidence of having been vaccinated with a complete course of doses of an authorised COVID-19 vaccine or are exempt from COVID-19 vaccination.

Volunteers

21. What do these regulations mean to me as a volunteer?

From 1 April 2022, as with workers, it will become law that any volunteer engaged for the purposes of the provision of a CQC regulated activity and who has face-to-face contact with people receiving care must be fully vaccinated with an authorised COVID-19 vaccine or be able to demonstrate that they fall into the listed exemptions. The registered or nominated person (eg NHS Trust Head of Volunteering) will have a discussion with you to confirm whether your role is in scope of the new regulations and if so, you will only be able to continue providing services if you are vaccinated or provide evidence of your exemption.

Information Governance

22. How can NHS organisations obtain evidence of vaccination?

There are a number of ways in which vaccination status can be obtained:

- Staff can be asked directly about their vaccination status.
- Organisations that have undertaken their own vaccination delivery programme can look up which staff have received vaccinations.

- Central databases that record vaccination data from the national vaccination programme can be used and integrated with staff records.

In order to reduce burdens on organisations and staff, a small number of designated members of staff in organisations (eg designated individuals in HR & OD teams) can be given access data about staff which has been recorded on the NHS England National Immunisation System (NIMS) database and linked to the NHS Electronic Staff Record (ESR) number. To be clear, the only clinical information that will be made available to NHS organisations from the national immunisation database is an individual's COVID-19 vaccination status. By getting this information from NHS England's immunisation database individuals will not need to provide evidence of their vaccination status, making it easier for both them and their managers.

The [Control of Patient Information \(COPI\) notices](#) issued by the Secretary of State for Health and Social Care under the Health Service (Control of Patient Information) Regulations 2002, provides a legal basis for NHS England to disclose this information to health and care organisations, and NHS organisations are required under the COPI notice to process what would otherwise be confidential patient information for 'COVID-19 purposes'. Further information is available on the legal framework which supports access to the vaccination data: [COPI notice - frequently asked questions](#).

23. Do organisations have to obtain the consent of staff before accessing the NIMS database to find out their COVID-19 vaccination status?

No. The COPI Notice provides a legal basis for NHS organisations to require access to confidential patient information needed to support the pandemic response. Organisations need to know the vaccination status of individuals in scope of VCOD regulations in order to protect patients and the workforce.

24. If the regulations do not come into force until 1 April, why are NHS organisations able to access information about the COVID-19 vaccination status of individuals now?

It is essential that organisations have access to the vaccination status of individuals now so that they can:

- Protect patients and the workforce from the risk of infection,
- Identify staff who have not yet been vaccinated in order to provide them with additional information and advice about the efficacy of the vaccines,
- Make arrangements for the possible redeployment of staff who remain unvaccinated after 1 April.