

## **URGENT WRITTEN STATEMENT TO THE ASSEMBLY BY HEALTH MINISTER ROBIN SWANN – WEDNESDAY 30 DECEMBER AT 3.30PM – COVID 19 VACCINATION PROGRAMME**

This statement provides an update on the latest developments relating to the COVID-19 vaccination programme.

Members will no doubt have heard that the Medicines & Healthcare products Regulatory Agency (MHRA) has now provided approval to supply a second COVID-19 vaccine within the UK, the AstraZeneca/Oxford coronavirus vaccine.

This is an excellent development and another hugely significant day for Northern Ireland's continuing battle to control the impact of coronavirus on our society. The Northern Ireland vaccination programme began on 8 December 2020 and the initial phase of the programme quite rightly focused on care home residents and staff which were the number one priority as recommended by the Joint Committee on Vaccination and Immunisation (JCVI). In addition health and social care staff in direct contact with vulnerable patients were also offered vaccination. Progress to date has been very good with over 80% of care homes visited which has resulted in 9,133 care home residents vaccinated as well as 10,701 care home staff and 16,890 HSC staff now vaccinated. In total over 36,724 individuals in Northern Ireland have now been vaccinated.

The approval by the MHRA paves the way for a significant acceleration of Northern Ireland's COVID-19 vaccination programme and means the GP led element of the vaccination programme can begin from 4<sup>th</sup> January, starting with those aged 80 years and over. Fifty thousand doses of the AstraZeneca vaccine have already been received in Northern Ireland and further supplies are expected early in the New Year. The GP led programme will be rolled out to others based on age and other clinical vulnerability factors. Prioritisation will continue to be guided by JCVI. See Annex A for JCVI priority groups.

For both the AstraZeneca/Oxford and Pfizer/BioNTech vaccines, data provided to MHRA demonstrate that efficacy is optimised when a second dose is administered, but both offer considerable protection after a single dose. For both vaccines the second dose completes the course and is important for longer term protection.

JCVI have issued a statement today recommending that as many people on the priority list as possible should be offered a first vaccine dose as the initial priority, while the second dose can be administered up to 12 weeks later. The clinical risk priority order for deployment of the vaccines remains unchanged and applies to both vaccines. Both are very effective vaccines and comparisons between the vaccine efficacies are unhelpful due to the different methodologies used and lack of data on long term protection and transmission reduction.

The Chief Medical Officer and his counterparts across the UK agree with JCVI that prioritising the first doses of vaccine for as many people as possible will deliver the greatest benefit overall in the shortest possible time, will have the greatest impact on reducing mortality and hospitalisations and protecting the health service, and is the right thing to do for public health. I fully agree and endorse this advice and from early January the main focus of the programme in NI will be on ensuring as many people as possible receive their first dose of a COVID-19 vaccine. Those who were due to receive their second dose from early January will be advised to return for their second dose at a later stage.

While today's developments are very welcome the coming weeks will be among the most challenging yet in the pandemic, with our health service under immense pressure. The COVID-19 vaccination programme has the potential to help transform the current situation but even with these latest developments, that will still take time to ensure the programme is delivered swiftly but safely. Between now and then, we need another big push to get through this winter. We can all help by playing our part and by encouraging everyone to follow the public health advice to help stop coronavirus spreading by strictly abiding by the current lockdown rules.

## Vaccine priority groups: advice on 30 December 2020

### *Phase 1 – direct prevention of mortality and supporting the NHS and social care system*

JCVI advises that the first priorities for the COVID-19 vaccination programme should be the prevention of mortality and the maintenance of the health and social care systems. As the risk of mortality from COVID-19 increases with age, prioritisation is primarily based on age. The order of priority for each group in the population corresponds with data on the number of individuals who would need to be vaccinated to prevent one death, estimated from UK data obtained from March to June 2020 (3)

1	Residents in a care home for older adults and their carers
2	All those 80 years of age and over Frontline health and social care workers
3	All those 75 years of age and over
4	All those 70 years of age and over Clinically extremely vulnerable individuals*
5	All those 65 years of age and over
6	All individuals aged 16 years** to 64 years with underlying health conditions which put them at higher risk of serious disease and mortality***
7	All those 60 years of age and over
8	All those 55 years of age and over
9	All those 50 years of age and over
*	Clinically extremely vulnerable individuals are described <a href="#">here</a> . This advice on vaccination does not include all pregnant women or those under the age of 16 years (see above)
**	The AstraZeneca vaccine is only authorised for use in those aged 18 years of age and over, however, JCVI is of the view that this vaccine may be used in those 16-17 years of age where there is no access or availability to an alternative approved COVID-19 vaccine
***	This also includes those who are in receipt of a carer's allowance, or those who are the main carer of an elderly or disabled person whose welfare may be at risk if the carer falls ill.

It is estimated that taken together, these groups represent around 99% of preventable mortality from COVID-19.