

Cultural leaders' forum: Q&A for Queensland Health COVID-19 Vaccination Taskforce

<p>Why is it so hard to book online?</p>	<ul style="list-style-type: none"> • The demand for vaccination with the Pfizer vaccine is currently higher than vaccine supply. This has resulted in limited available appointments. This is expected to improve as vaccine supply increases in the coming months. We ask for your patience during this time. • Given the current supply of Pfizer vaccine, Queensland Health is prioritising vaccination of frontline health workers and emergency services for their first dose, and anyone due for their second dose. • We are also undertaking work to provide a help page with frequently asked questions within the booking system. This will help address common difficulties consumers are experiencing when using the online booking system. • Future updates to the booking system are planned, to make the booking process easier and address other issues identified by consumers. • Additional booking support is available by calling 134 COVID (13 42 68). This line is available 24 hours a day, 7 days a week.
<p>Why can't people book second bookings? May we get clarification on what people waiting for second dose need to do?</p>	<ul style="list-style-type: none"> • There has been a significant increase in demand for appointments in the past few weeks leading to limited availability. This is expected to improve as vaccine supply increases in the coming months. We ask for your patience during this time. • People are encouraged to make a booking for their second dose, before they leave their first dose appointment. • If someone does not have a booking for their second dose, they can log onto the Queensland Health vaccine booking system (https://www.vaccinebookings.health.qld.gov.au/) using the username (their email address) and password they used to book their first appointment, and then following the prompts to book an appointment. • Where people do not have a username or booking system login, they can contact the Health Contact Centre on 134 COVID (13 42 68) for assistance. • There is a window of time to receive the second COVID-19 vaccination, which varies according to vaccine brand. For the Pfizer vaccine it is 21 to 42 days. For the AstraZeneca vaccine it is 28 to 90 days.
<p>The 134 COVID line is not accessible to non-English speakers due to timing of when an interpreter is engaged. Has all the translated material that has been developed regarding vaccination been updated to reflect the changes?</p>	<ul style="list-style-type: none"> • 134 COVID (13 42 68) is accessible 24/7 for all Queenslanders including those for who English is not their first language. • Queensland Health use the Australian Government Department of Home Affairs Translating and Interpreting Service (TIS) to assist consumers for who English is not their first language. • Consumers can either connect with TIS first or wait until answered by 134 COVID who will make the connection with the interpreter service for them. • When calling 134 COVID (13 42 68), please be prepared to wait for your call to be answered as current call volumes are very high. We apologise for the inconvenience and thank you for your patience.... • 134 COVID can assist with: <ul style="list-style-type: none"> ○ Making a booking at a QH vaccine clinic once a person has received their email inviting them to book <ul style="list-style-type: none"> – we cannot help people make a booking at a GP, respiratory clinic, community pharmacy or Aboriginal Controlled Community Health Service – consumers must use the National Eligibility Checker and Vaccine Clinic Finder to book for these options – https://covid-vaccine.healthdirect.gov.au/eligibility ○ Modifying a QH clinic booking to another location, date and/or time ○ General questions about the vaccine program ○ Nursing assessment if the consumer is concerned about a possible reaction to the vaccine. • Queensland Health is working with key representatives across the state to ensure that people from culturally and linguistically diverse (CALD) backgrounds have access to current, culturally sensitive, translated COVID-19 information. • The Australian Government website contains up-to-date translated information about the COVID-19 vaccine: https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/covid-19-vaccine-information-in-your-language • The Queensland Government website contains up-to-date translated information about COVID-19: https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19/support-and-resources/translated-resources

<p>If people have their number, DoB and address written on paper, will that be enough?</p>	<ul style="list-style-type: none"> • People can bring their details written down if that is easiest for them however, it is also important to bring: <ul style="list-style-type: none"> ○ photo identification (or employee identification if applicable) ○ Medicare card (if you have one). • Other things people should consider bringing to their COVID-19 vaccination, include: <ul style="list-style-type: none"> ○ their booking confirmation (if you have one) ○ information about any medical conditions they have or medications they are taking ○ information on any vaccines received in the past 14 days including any previous COVID-19 vaccines noting the brand and date it was administered.
<p>Is Astra Zeneca now recommended for over 60 and not over 50 anymore? Do people get a choice which vaccine they receive?</p>	<ul style="list-style-type: none"> • Yes, AstraZeneca is now recommended for people aged 60 years and older. • The change in advice is based on the increased risk of severe illness from COVID-19 the older you are (and thus increased benefit of vaccination) and the apparent lower risk of thrombosis with thrombocytopenia syndrome (TTS) following vaccination the older you are. • The AstraZeneca COVID-19 vaccine can still be received for people aged under 60 years if they have already received a first dose of AstraZeneca without any serious side effects • Those aged 60 years and over who choose to delay vaccination until a vaccine other than the AstraZeneca COVID-19 vaccine is available should be aware that they may not be protected from the COVID-19 disease until later in the year. • People aged 50–59 years are now eligible to receive a Pfizer COVID-19 vaccination, including those who have already booked to receive (but not yet received) their first dose of the AstraZeneca vaccine.
<p>Do AZ and Pfizer have the same efficacy against the Delta variant?</p>	<ul style="list-style-type: none"> • The results from clinical trials to date show both the AstraZeneca and Pfizer vaccines to be very effective in providing protection against COVID-19 disease. • The effectiveness of COVID-19 vaccines available in Australia is very high. Recent data from the UK shows the effectiveness of the Pfizer vaccine to be up to 90% and the AstraZeneca vaccine up to 89% with two doses. • It is common for some viruses to naturally mutate over time. Often these mutations do not impact how viruses affect us however, some cause the virus to become more easily spread and therefore more people to be infected. This appears to be the case with the COVID-19 Delta variant. • The effectiveness of the various vaccines on the COVID-19 Delta strain is still being investigated however, evidence to date indicates the COVID-19 vaccines are likely to provide protection against a variety of mutations. • COVID-19 vaccines may also be able to be adapted to future variants, in the same way influenza vaccines change each season.
<p>How long would a person have immunity and does one vaccine provide longer immunity other? Will there be any future testing to assess individual immunity like we do for other vaccinations?</p>	<ul style="list-style-type: none"> • We will continue to learn over time about how long the protection with each vaccine type will last. • As the virus and vaccines are both relatively new, we do not have an absolute measure on how long each vaccination course will provide benefit. However, given our experience with similar viruses (e.g. influenza), it is anticipated a “booster” to their initial vaccinations may be required sometime in 2022/2023. • We know from clinical data and real-life outcomes from COVID-19 vaccination programs overseas that two doses of the vaccine provide greater protection than one dose. • Individual immune response varies with age and ethnicity, among other factors. We are continuing to gather data on the real-world response of vaccinated individuals, and population groups, to the virus.

What reassurances are there regarding vaccines for people in the community with compromised immune system? e.g if someone has a history of blood clots how can you reassure them or encourage them to get vaccinated?

- It is our responsibility to ensure those who need the vaccine the most, access it first.
- People with specific underlying medical conditions such as those with compromised immune response are in a high priority group, and eligible for vaccination now.
- There is no evidence that a history of clots or of any clotting tendencies increases the risk of TTS, and people with the following conditions can receive COVID-19 Vaccine AstraZeneca:
 - History of blood clots in typical sites
 - Increased clotting tendency that is not immune-mediated
 - Family history of blood clots
 - History of ischaemic heart disease or stroke
 - Current or past thrombocytopenia (low platelet count)
 - Those receiving anticoagulation therapy
- There is a theoretical concern that certain rare conditions may increase the risk of TTS, and therefore pfizer is recommended for people with a history of these conditions:
 - Cerebral venous sinus thrombosis (CVST)
 - Heparin-induced thrombocytopenia (HIT)
 - Idiopathic splanchnic (mesenteric, portal, splenic) vein thrombosis
 - Antiphospholipid syndrome with thrombosis.