

The BMA does **not** now intend to make oral submissions at the Preliminary Hearing on 13 September. However, in response to the invitation to suggest KLOEs for inclusion in targeted qualitative research, the BMA suggests the following KLOEs:

- a. Experiences receiving information on the Covid-19 vaccines, including:
  - ii. Experiences of receiving useful information or mis/disinformation;
  - iv. The quality of targeted messaging for specific groups;
  - viii. Views on how to improve public messaging.
  
- b. Public trust in the safety of Covid-19 vaccines and the importance of being vaccinated, including:
  - i. Confidence: Drivers and barriers to trust in safety of Covid-19 vaccines;
  - iii. Other drivers of vaccine hesitancy and unequal uptake, including how these differ for different groups, and the causes of such disparities;
  - iv. How these factors affect vaccination decisions.
  
- c. Practicalities of vaccine roll-out, including:
  - i. Convenience and barriers in relation to vaccine roll-out;
  - ii. Experiences and particular barriers to accessing vaccines for those from vulnerable or marginalised groups;
  - iv. How accessibility and convenience factors affected vaccination decisions/uptake.

The BMA also wishes to propose that the following additional issue is included within the research (perhaps within b(i) – Confidence): the Inquiry will be aware of the findings of the National Audit Office report, “The rollout of the COVID-19 vaccination programme in England” of 25 February 2022, that GP surgeries and community pharmacies outperformed planning assumptions for delivery of the vaccine up to October 2021 (by 71% actual delivery against an assumption of 56%), whereas the newly created vaccination centres underperformed against planning assumptions (delivering 21% of vaccinations against assumptions of 41%). This may indicate that existing trusting relationships between patients and healthcare providers within primary care was a factor in vaccine uptake, and the BMA suggests that this issue should be specifically addressed within the research. Regarding whether this evidence could be obtained through another method, we suggest that as this is an issue of patient confidence within the remit of the Inquiry’s existing proposed KLOEs, the research questions will be the most appropriate method of capturing this information/evidence, and we observe that it will be difficult and time consuming to obtain through a Rule 9 process.

The BMA agrees with the audience groups identified, namely geographical locations with low uptake, ethnicity, socioeconomic circumstances, and people with particular health concerns, including the immunosuppressed, pregnant and/or breastfeeding women, and/or those with fertility concerns.