



UK Health
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This Webinar will be recorded and made available as a video on SharePoint. Recording will begin at the start of the webinar and end before the question and answer section. No delegate information will be visible on the recording.

REC

Primary care immunisation update webinar series

July 2023: Addressing Concerns Around Vaccines – Supporting Acceptance

Helen Donovan

Welcome to the webinar. Please take a note of the following tips below



- All delegate's lines are muted throughout the presentation
- If at other times you are in a noisy environment please mute your line by pressing the mute button on your screen (this can be found at the bottom)
- If you would like to ask a question please use the message function, please keep questions relevant to the session (the chat message function can be found on the left hand side of the screen)
- There will be an opportunity for questions, at this point microphones will be un-muted – you will need to unmute yourself though to be heard
- This webinar will be recorded, the recording will begin at the start of the webinar and end before the question and answer section. No delegate information will be visible on the recording.
- If you are having any technical problems please send a message to the host via the message function or email immstraining@phe.gov.uk

Webinar Essentials

Today's webinar

- Trainer is Helen Donovan
- 30 minutes Helen talking with slides
- 10 - 15 minutes for questions and answers from delegates

Access to slides

- Copy of slides emailed to delegates
- Underlined text on the slides are hyperlinks – click to go straight to the link

Following the webinar

- You will be emailed a link to an electronic evaluation (Select Survey)
- Your feedback is essential to support the development of the webinar series
- A certificate will be emailed once the evaluation is completed



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July 2023: Addressing Concerns Around Vaccines – Supporting Acceptance

Helen Donovan

Role of immunisers

Successful immunisation programmes rely on public trust and confidence

This includes trust and confidence in:

- The immunisation programme – including processes such as monitoring safety
- The vaccines being administered
- The immuniser who is knowledgeable and promotes/administers the vaccine/s



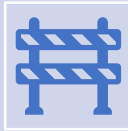
This session is an update for currently practising, trained and competent immunisers.
Foundation immunisation and vaccination training must be completed by all new immunisers

Learning outcomes

Addressing Concerns Around Vaccines – Supporting Acceptance



What factors influence vaccine decision making



What are the barriers?



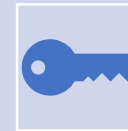
What the public tell us –
Trust & health care
professionals role in
supporting vaccine acceptance



Communication strategies
and vaccine conversations



Some of the key concerns –
what can we say to help
dispel these



Key resources – finding
reliable information

Vaccine concerns – hesitancy are not new!



James Gillray satirical cartoon 1802

Vaccine acceptance - continuum

REPORT OF THE SAGE
WORKING GROUP ON
VACCINE HESITANCY

01 October 2014

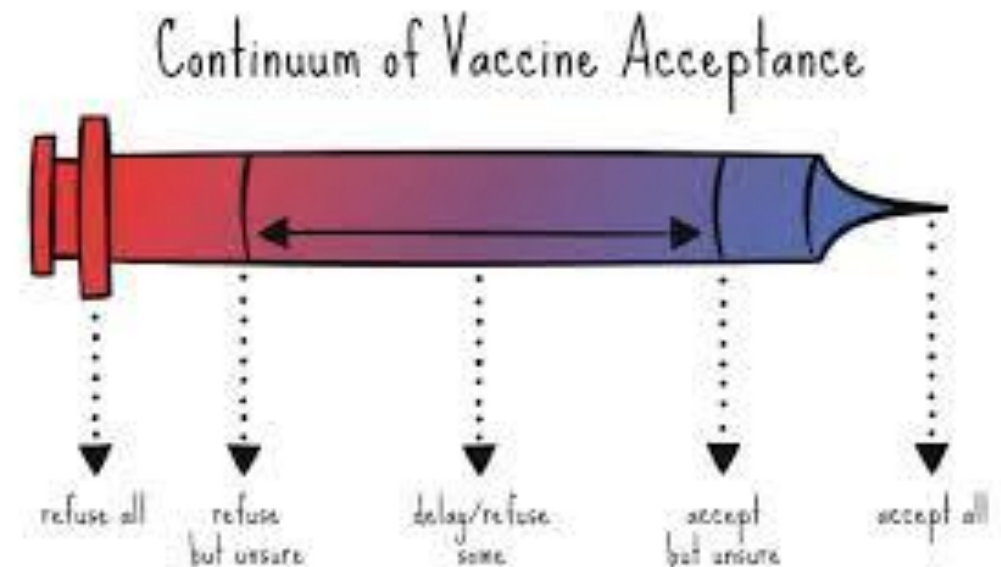
☺ Most people receive the vaccines recommended although many will still have understandable questions

☹ Some will have significant concerns and want to delay vaccines requiring further support and information

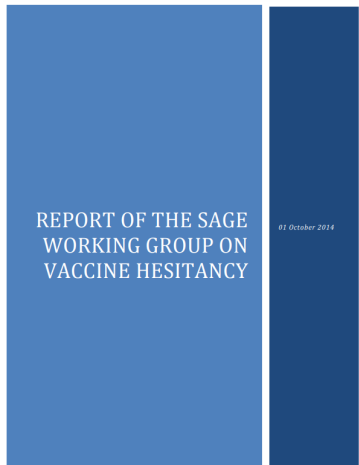
⊗ A small number will refuse

The choice is often fluid and will vary between vaccines

Immunisers need to do all they can to maximise acceptance

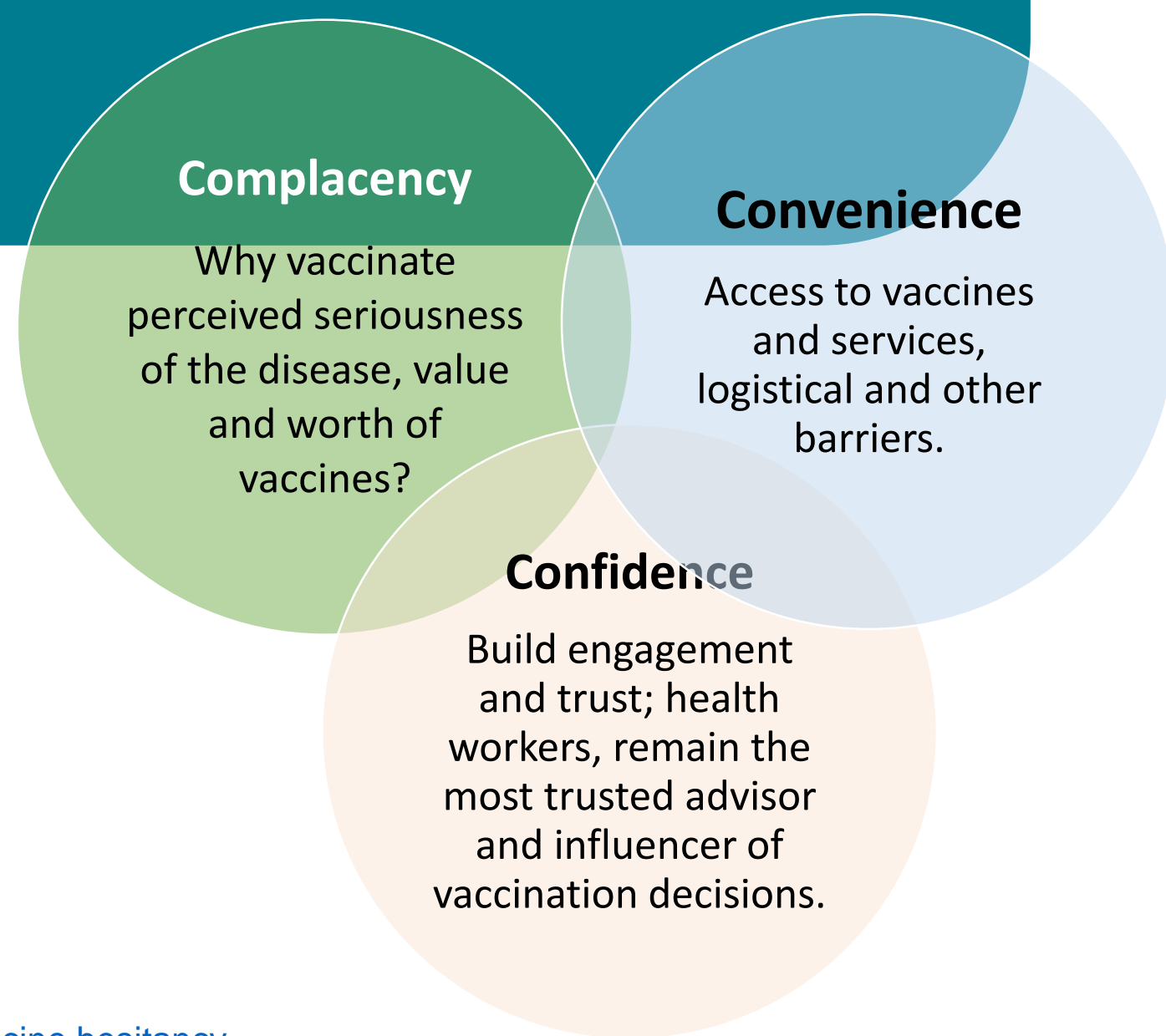


The reasons for not immunising are complex



🙄 **Communication;**
sources of information
and miss information

😊 **Context;**
socio demographic
targeted campaigns.



WHO 3 C model [Report of the sage working group on vaccine hesitancy](#)

Betsch et al [Beyond confidence: Development of a measure assessing the 5C psychological antecedents of vaccination](#)

Updated NICE guidance from 2009 - 2022

1. Service Organisation

- Named vaccination leads
- Designing and raising awareness payment schemes
- Making vaccination services accessible and tailoring to local needs
- Audit and feedback
- Training and education for health and social care practitioners
- Appointments and consultations

NICE National Institute for
Health and Care Excellence



Vaccine uptake in the general
population

2. Identifying eligibility, giving vaccinations and recording vaccination status

- Keeping records up to date
- Identifying people eligible for vaccination and opportunistic vaccine
- Recording vaccination offers and administration

NICE guideline
Published: 17 May 2022
www.nice.org.uk/guidance/ng218

[Vaccine uptake in the general population](https://www.nice.org.uk/guidance/ng218)
[May 2022](https://www.nice.org.uk/guidance/ng218)

3. Invitations reminders and escalation of contact

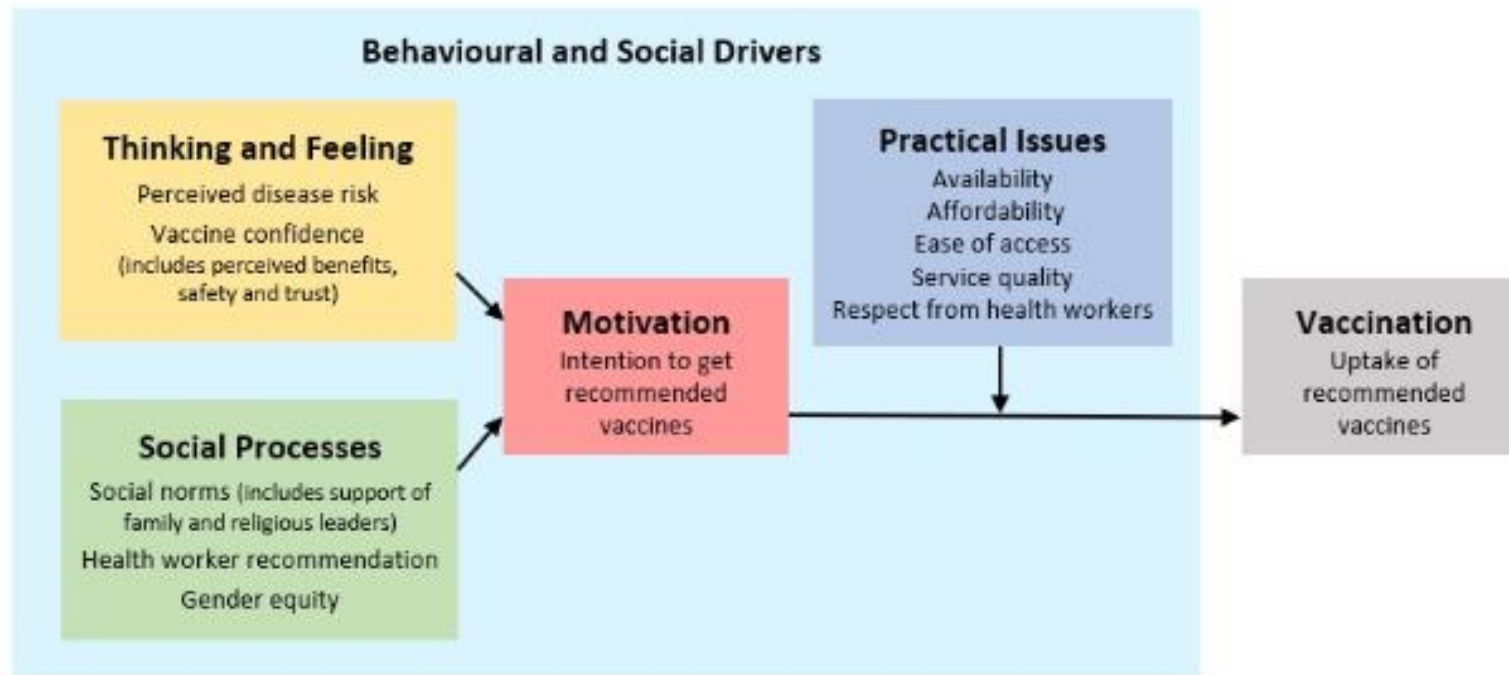
- Specific for; children, adults, pregnant women etc

Behavioural science approaches for increasing vaccine uptake

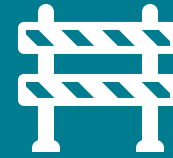
The WHO [behavioural and social drivers of vaccination framework](#) (BeSD)

Understanding the behavioural and social drivers of vaccine uptake [WHO position paper](#) – May 2022

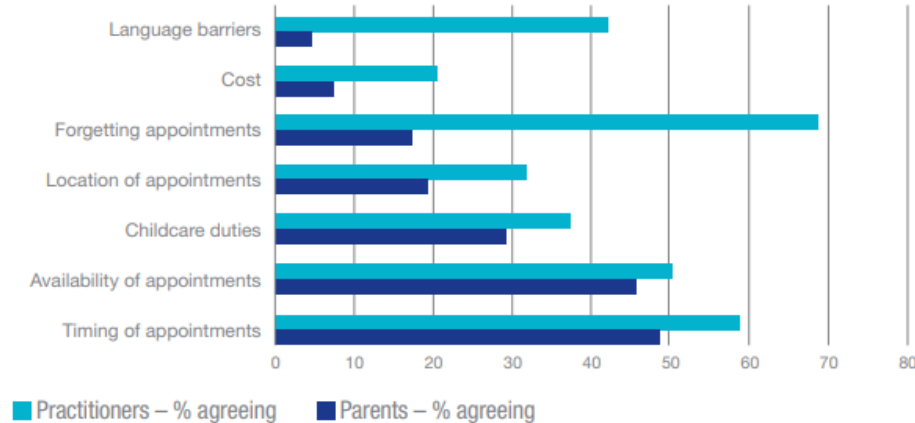
[PHE Immunisation Inequalities Strategy](#) Feb 2021



Understanding the Barriers



Barriers to accessing appointments for parents



Logistical and access:

- Difficulties in accessing the clinics
- Discrimination actual or perceived
- Understanding the system
- Financial problems
- Language or literacy

Vaccine specific and context:

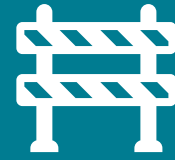
- ❖ Understanding about vaccination
- ❖ Religious beliefs & concerns
- ❖ Fatalistic view of life
- ❖ Health beliefs
- ❖ Altered perceptions of risk benefit

RSPH report 2019 [Moving the Needle: Promoting vaccination uptake across the life course](#)

WHO 2017 communication initiative network [vaccine conversations to build trust](#) Training module

WHO 2017 [vaccination and Trust](#)

Media and social media



Gransnet, Mumsnet, Twitter, Facebook, Instagram, Social influencers, YouTube

[#antivax](#)
[#antivaxx](#)

- People certainly report seeing negative messages on media and social media
- They also report being influenced by friends, family and their community
- How much this influences their attitudes and decisions is not always obvious varies with the context and vaccine

How the web distorts reality and impairs our judgement skills
Tomas Chamorro-Premuzic

The digital information bubble exacerbates our bias towards confirming our pre-existing beliefs instead of challenging them



[Guardian May 2014](#)

[RSPH: Moving the needle promoting vaccination uptake across the life course](#)

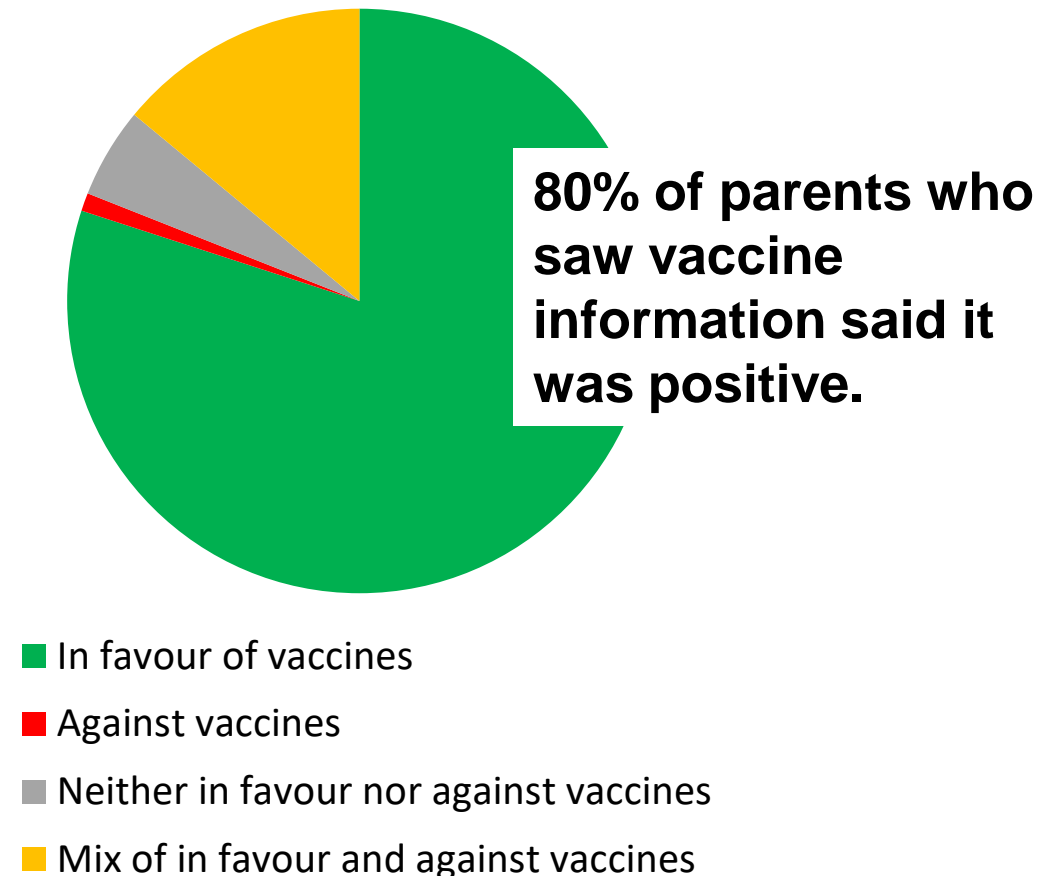
Most parents (71%) remember recently coming across information about vaccines for babies or young children

- 74% had come across something that made them feel it was important for their baby, or young child to have their vaccines.
- 15% had read, heard or seen something that made them concerned or worried about their baby or child having their vaccines.

This most often came from friends or family, social media, the internet (Netmums or Mumsnet), TV or magazines or radio.

[UKHSA 2022 parental attitude survey](#)

The type of vaccine information parents had seen.



Most are positive and recognise immunisation to be important

- ✍ 97.1% agreed “Childhood vaccines are important for my child/children’s health” in 2021 ([Sherman et al 2023](#))
- ✍ 91.6% agree vaccines are safe ([Sherman et al 2023](#))
- ✍ [UKHSA 2022 parental attitude survey](#) 98% of parents chose to vaccinate
86% vaccinate automatically and 12% weighed up the pro’s and cons before deciding to vaccinate
- ✍ [RSPH children and young people survey 2023](#) 92% think vaccines are important to their health
- ✍ Some will be more ‘hesitant’ – balance risks and benefits.
- ✍ 68% CYP encouraged where peers people they trust are also having the vaccines.
- ✍ Minority refuse all vaccines (1-2%)

The role of health care professionals - TRUST

- ✓ There are many factors which influence vaccine decisions and therefore uptake.
- ✓ Trust in where people get their information and who the information comes from are crucial.
- ✓ Immuniser and patient/parent/carer interaction is a key factor

Cochrane review (2017) :

- Parents see HCP as important sources of information
- People often don't know which non health care professional sources to trust
- People want clear answers and open discussions
- People don't want to be rushed

Campbell et al (2017) :

- HCP important sources of information and trusted by public and parents
- Despite people looking on line people valued advice from HCP
- This advice was key in influencing decisions

UKHSA annual attitudinal survey 2022

93% trust the NHS and health care professionals advice for information about vaccines

Sherman et al 2023 An on line study to inform policy acceptance for routine varicella vaccination in the UK.

Parents also asked generally about vaccines, results reiterate the results from the UKHSA survey.

93% trusted advice from GP Practice Nurse and NHS NHS.

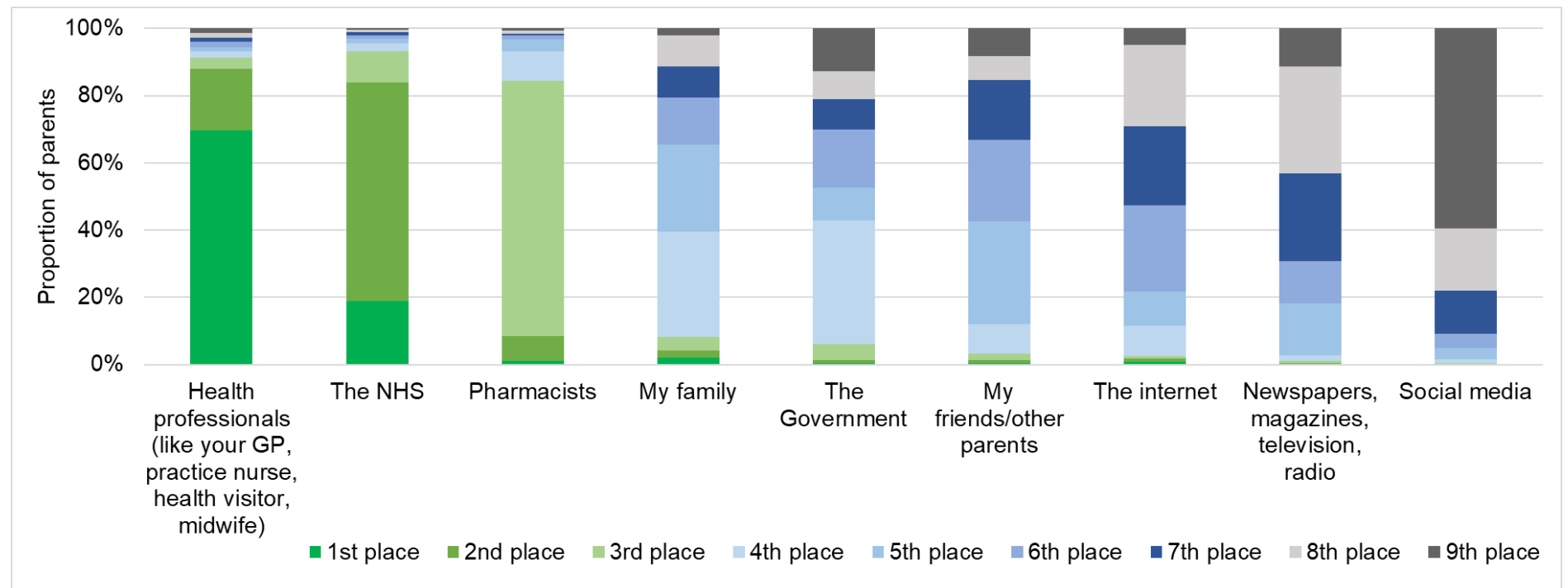
Far fewer trusted government or other sources

Parents most trust health professionals and the NHS

Parents were asked to rank the following in the order of how much they trusted them on sources of information on vaccines:

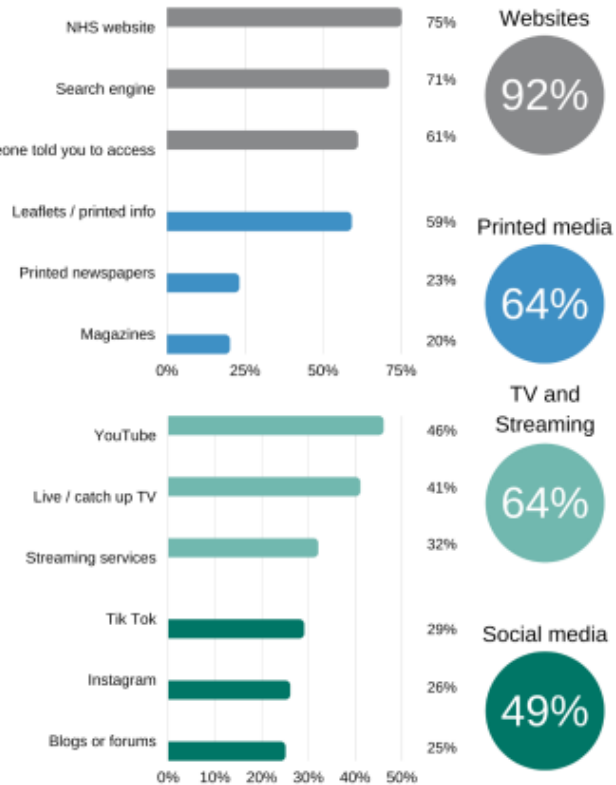
health professionals (i.e. GP, practice nurse, health visitor, midwife), the NHS, pharmacists, the government, newspapers/magazines/television/radio, the internet, social media, my family, my friends/other parent

- ✓ most likely to trust health professionals and the NHS
- ✓ least likely to trust social media



CYP sources of information about vaccines

What CYP use to get more information about vaccines



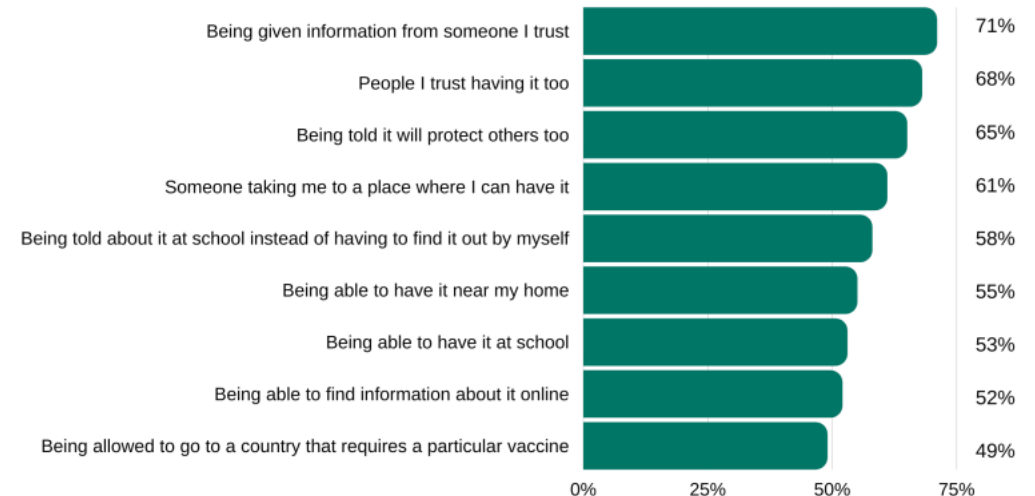
RSPH children and young people survey 2023

- ✓ 92% think vaccines are important to their health.
- ✓ Trust parents, school nurses and teachers.
- ✓ Trust web sites recommended by those they trust.

Being given information by someone they trust is a key influencer

Parents and teachers need good information

Factors that would encourage CYP to have a vaccine



Children and Young People's attitudes towards vaccinations – what they know and what they have to say

A Royal Society for Public Health Report

March 2023

RSPH

RSPH
ROYAL SOCIETY FOR PUBLIC HEALTH
VISION, VOICE AND PRACTICE

Review of communication strategies

- Use of disease images ‘scare tactics’ – ineffective may increase the misinformation and endorse it
 - Communicating absolutes as opposed to recognising and acknowledging uncertainty around vaccine efficacy or risks. - Can backfire.
 - Straight debunking myths
 - Correctional approach and,
 - Just providing information
 - Use of humour satire against misinformation – positive impact
 - Communicating weight of evidence – Also had positive impact
- Had mixed results

[Whitehead et al \(2023\) A systematic review of communication interventions for countering vaccine misinformation](#)

Vaccine consultations

Do:

- ✓ Assume they will be having the vaccine - start the consultation with a presumptive statement this helps normalise vaccination
- ✓ Give people time and work with them to gain their trust
- ✓ Adapt to the individual – tailoring your approach
- ✓ Be patient centred, friendly - understanding and empathy
- ✓ Explore individual concerns ask open questions to elicit individual concerns (what/why/how/tell me)
- ✓ Reflect on what the patient says or your understanding of their concerns
- ✓ Affirm any strengths and validate concerns
- ✓ Focus on the facts
- ✓ Ask – provide – verify
- ✓ Summarise the interaction



Vaccine consultations

Avoid:

- ☹️ Apportioning blame – most parents and patients are wanting the best
- ☹️ Repeat myths and myth busting – this can reaffirm
- ☹️ Fear based messaging in counter productive – used in the anti-vaccine movement
- ☹️ Being directive ‘they must be vaccinated’
- ☹️ Being argumentative
- ☹️ Giving a lecture and overloading with information
- ☹️ Overload with statistical information
- ☹️ Rushing



Vaccine questions are generally predictable



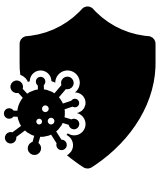
💉 Why do we need these vaccines when we don't see these disease anymore? – the complacency argument

💉 Are the vaccines safe?



💉 Will all these vaccines overload the immune system?

💉 I am still worried about MMR?



💉 I would prefer to get the infection naturally it's better than being vaccinated?

💉 What about all the other ingredients in vaccines I have heard they are more harmful

You obviously can't predict all but be informed and have key resources and information to hand



Can multiple vaccines overwhelm the immune system?

Key facts:

- Our immune systems are constantly challenged, ongoing from birth.
- We are all exposed to countless numbers of foreign antigens and infectious agents everyday
- Vaccines use a tiny proportion, even of an infant's, immune system's ability to respond



Considerations:

- The vaccine schedule is designed to maximise protection from disease as soon as possible
- Delaying vaccines risks of leaving the individual susceptible to infection
- Increased appointments to complete course adds further distress for children
- There is no evidence that vaccinated children have more infections (Next slide)

References:

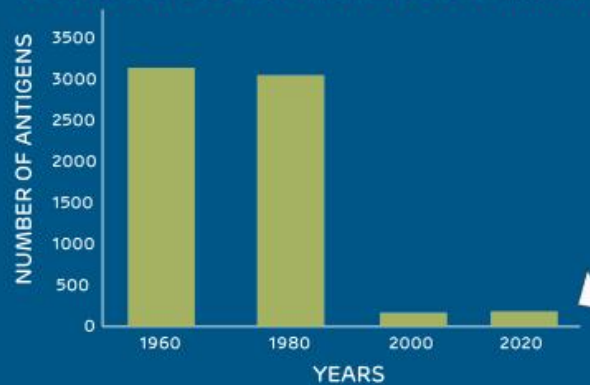
- [Green Book Chapter 1 Page 2](#)

WHAT IS AN ANTIGEN?

Antigens are the parts of viruses and bacteria that induce immune responses. For example, viral proteins or bacterial proteins are antigens. These antigens may not be the part of the virus or bacteria that makes us sick. But, by introducing antigens in a vaccine, we can protect someone if they are exposed to these viruses or bacteria in the future.



THE NUMBER OF ANTIGENS INTRODUCED IN VACCINES HAS DECREASED OVER TIME.



Our immune systems are busy managing antigens 24/7. Given the number of bacteria that an average adult has on or in their body, the 150 antigens from vaccines (by 2 years of age) are a drop in the bucket.

THE AVERAGE ADULT* CARRIES AROUND MORE BACTERIA THAN THE NUMBER OF CELLS THEY ARE MADE OF.

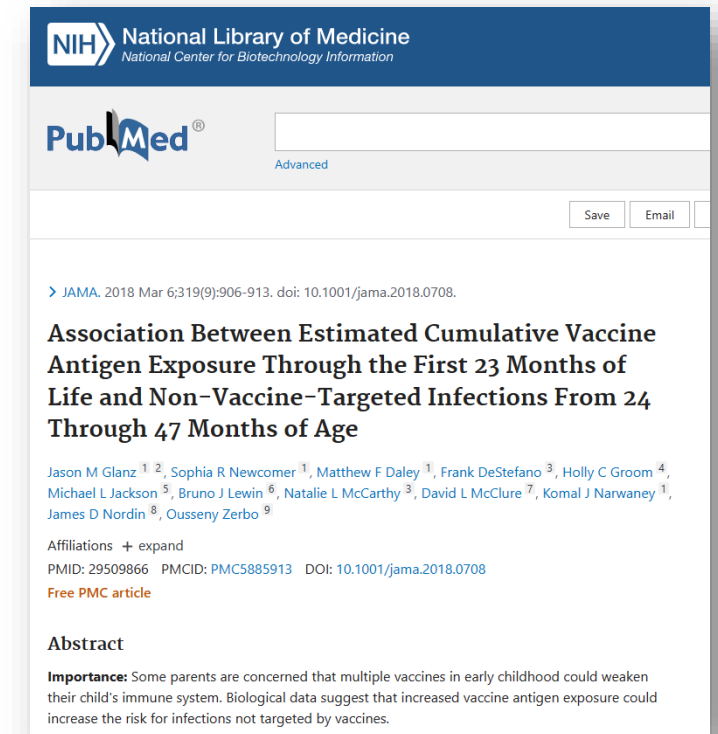


Cells:
30,000,000,000,000

Bacteria:
39,000,000,000,000
*20-30 yrs old, 5ft 6in, 154 lbs.

Children's Hospital of Philadelphia Vaccine Safety: Immune System and Health

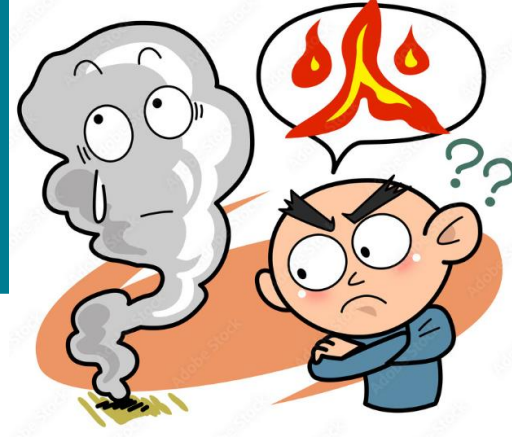
Oxford Vaccine Knowledge project Combination vaccines and multiple vaccinations



2018 JAMA <https://pubmed.ncbi.nlm.nih.gov/29509866/>



I am still worried about MMR and autism



Summary of key studies:
[page 15 Green Book measles chapter](#)
And the [MMR section](#) from the Oxford Knowledge

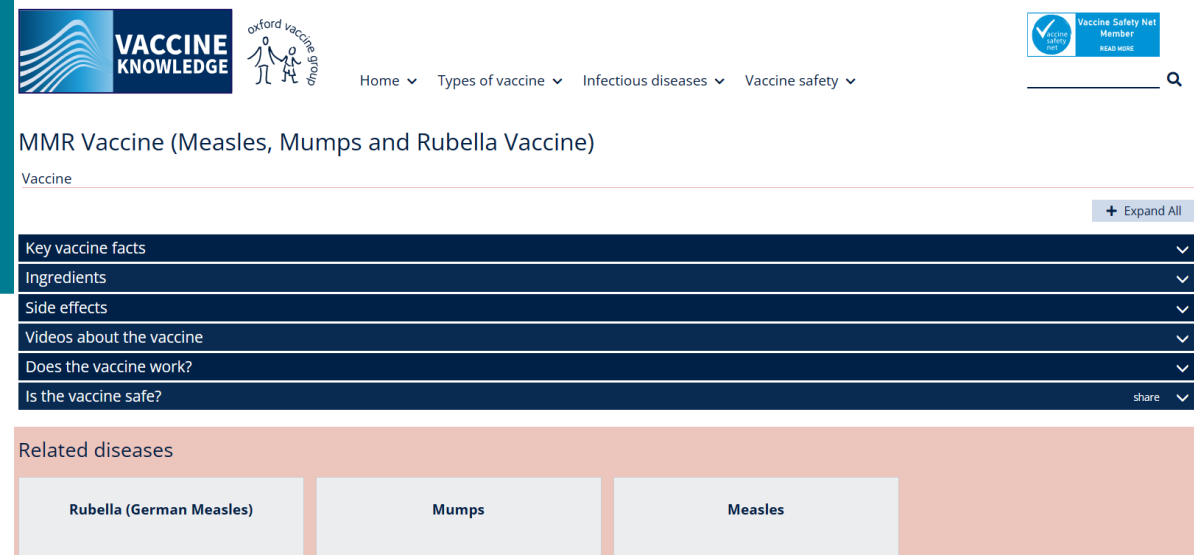
There is overwhelming evidence that MMR
does not cause autism – **FACT**



Considerations:

- Try to ascertain what is informing this belief, what have they read or seen?
- some anti-vaccination groups utilise powerful stories and fake evidence to stoke fear and anxieties or
- is there a personal story
- providing 'just science' may not address individual concerns

MMR - Summary



The screenshot shows the 'Vaccine Knowledge' website. The header includes the 'Vaccine Knowledge' logo, the 'oxford vaccine group' logo, and navigation links: Home, Types of vaccine, Infectious diseases, and Vaccine safety. A 'Vaccine Safety Net' badge is in the top right corner. The main heading is 'MMR Vaccine (Measles, Mumps and Rubella Vaccine)'. Below this is a 'Vaccine' section with a '+ Expand All' button. A list of topics with dropdown arrows is shown: Key vaccine facts, Ingredients, Side effects, Videos about the vaccine, Does the vaccine work?, and Is the vaccine safe?. Below this is a 'Related diseases' section with three buttons: 'Rubella (German Measles)', 'Mumps', and 'Measles'.

- Never too late to have MMR – no upper age limit
- Two doses (separated by 1 month if given over 18 months of age)
- If vaccine status uncertain - no harm having additional dose
- Teenage booster / School leavers / University freshers
- Community (herd) immunity needed to protect those who cannot be immunised: infants, pregnant women, individuals with immunosuppression



Natural infection is better than vaccination?

- Natural infection may produce a stronger immune reaction
- Although for some infections i.e tetanus natural infection will not give any immunity
- 'natural' immunity risks associated complications of infection
- Individuals concerned about consequences of disease more likely to vaccinate
- Individuals concerned about adverse events associated with vaccines – less likely to vaccinate

Give people information about expected side effects and what they can do [What to expect after vaccinations](#)

Addressing complacency: Vaccine Knowledge Project [the effects of natural infection](#)

MEASLES complications:

- Otitis media 7-9%
- Pneumonia 1-6%
- Diarrhoea 8%
- Convulsions 1 in 200 cases
- Encephalitis 1 per 1000 cases
- SSPE (Sub acute sclerosing panencehpalitis) 1:25,000 cases higher where infection is acquired under 1 year the rate is 1: 8,000 cases
- Death 1: 1000 - 5000

[Lam et al 2021; A recent surge of fulminant and early onset subacute sclerosing panencephalitis \(SSPE\) in the United Kingdom: An emergence in a time of measles - European Journal of Paediatric Neurology \(ejpn-journal.com\)](#)



Do vaccines contain toxic ingredients?

Vaccines are complex products and need to withstand transport, storage and environmental factors

Vaccines may contain:

- Adjuvants to enhance the vaccine efficacy
- Tiny amounts of residual substances from the manufacturing process (egg)
- Stabilisers – like gelatine
- Preservatives - like thiomersal
- Antibiotics to prevent bacterial contamination

Consider:

How vaccine safety is established pre licensure
Post marketing surveillance
Know your vaccine

- **Specific ingredients in current vaccines:** [Green Book : Chapter 6](#) – page 2
- **UKHSA information** [immunisation collection](#)
- **Specific ingredients SmPC** [Individual vaccine SmPC Electronic medicines compendium](#)
- **MHRA:** [Yellow Card Scheme](#) [Safety public assessment reports](#)

Aluminium and Autism –
Aluminium is in many everyday foods and household items. Adults, children and infants will normally ingest far more aluminium from their diet even in the first 6 months, breast or formula fed, than would be from any vaccine.

The Astra Zeneca COVID-19 vaccine –
Tiny amount of ethanol, 0.002mg less than in a banana or piece of bread

MailOnline

Home | News | U.S. | Sport | TV&Showbiz | Australia | Femail | Health | Science | Money |

Latest Headlines | Health | Health Directory | Discounts

'Perhaps we now have the link between vaccination and autism': Professor reveals aluminium in jabs may cause sufferers to have up 10 times more of the metal in their brains than is safe


- Aluminium crosses the membrane that separates the brain from blood
- The metal accumulates in cells that maintain a constant internal environment
- Autism sufferers may have genetic changes that cause them to hold aluminium
- Disgraced doctor Andrew Wakefield linked autism to the MMR vaccine in 1995
- His views are widely discredited, but the WHO says vaccine fears put many off


By PROFESSOR CHRIS EXLEY FOR THE HIPPOCRATIC POST and ALEXANDRA THOMPSON
HEALTH REPORTER FOR MAILONLINE
PUBLISHED: 16:03, 30 November 2017 | UPDATED: 16:56, 3 December 2017

Facebook Share Twitter Pinterest Google+ Email RSS 59k shares 373 View comments

Aluminium in vaccines may cause autism, controversial new research suggests.

Autistic children have up to 10 times more of the metal in their brains than what is considered safe in adults, a study found.

VACCINE KNOWLEDGE  Home ▾ Types of vaccine ▾ Infectious diseases ▾ Vaccine safety ▾

 READ MORE

Vaccine ingredients

Vaccine Safety

+ Expand All

General information	share ▾
Active ingredients	▾
Added ingredients	▾
Products used in the manufacture of the vaccine	▾
Growing the active ingredients	▾
Further information	▾

[Oxford Vaccine Group Vaccine Knowledge Project vaccine ingredients](#)
[Children's Hospital of Philadelphia vaccine education centre - vaccine ingredients](#)
 British Islamic Medical association [COVID-19 Vaccine Hub](#)

MYTH: Vaccines contain alcohol & therefore are impermissible

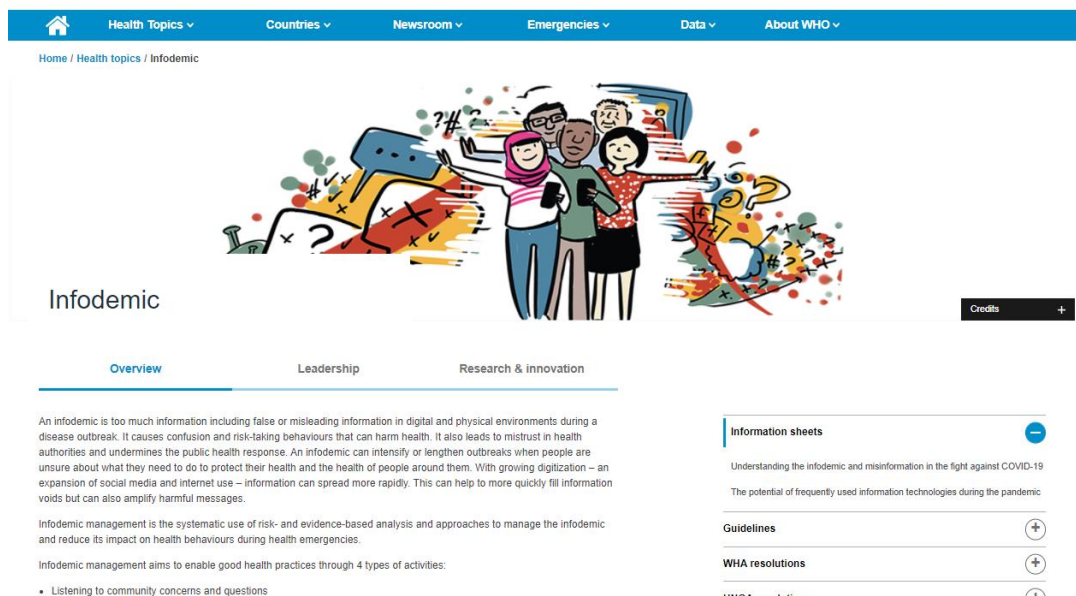


TRUTH: The Oxford AZ Vaccine contains ethanol at an amount that is less than what is found in natural foods or bread.

Many scholars have deemed the Oxford AZ Vaccine to be permissible as the amount of ethanol is negligible.

The religious permissibility of any product is for scholars to decide, so please refer to those you trust.

© 2020 British Islamic Medical Association



WHO Infodemic

- ◆ Vaccine hesitancy is understandable
- ◆ Misleading and wrong information
- ◆ Too much and confusing information
- ◆ ‘Fake News’
- ◆ Health and care staff are not immune to this!
- ◆ Who to trust?

Finding and trusting the evidence

You can look up almost anything on the Internet. Most of what's offered is really trying to sell a product, service, or point of view. - 'SMELL' test

- S** **Source** - Who is providing the information?
- M** **Motivation** - Why are they telling me this?
- E** **Evidence** - What evidence is provided? & When was it posted
- L** **Logic** - Do the facts logically compel the conclusions
- L** **Left out** - What's missing that might change our interpretation of the information?



Don't Be Fooled: [Use the SMELL Test To Separate Fact from Fiction Online John McManus February 2013](#)

Resources

Collection Immunisation

Information for immunisation practitioners and other health professionals.

From: [UK Health Security Agency](#)

Published 15 October 2013

Last updated 18 January 2023 — [See all updates](#)

Contents

- [Childhood immunisation schedules](#)
- [Haemophilus influenzae type B \(Hib\)](#)
- [Hexavalent combination vaccine \(DTaP/IPV/Hib/HepB\)](#)
- [Immunisation leaflets and guidance for parents](#)
- [Immunisation resources for educational settings](#)
- [Measles, mumps and rubella \(MMR\)](#)
- [Pertussis \(whooping cough\)](#)
- [Training resources](#)
- [Tuberculosis](#)
- [Vaccine handling and protocols](#)
- [Infographics](#)

The World Health Organization (WHO) says:

“The 2 public health interventions that have had the greatest impact on the world's health are clean water and vaccines.”

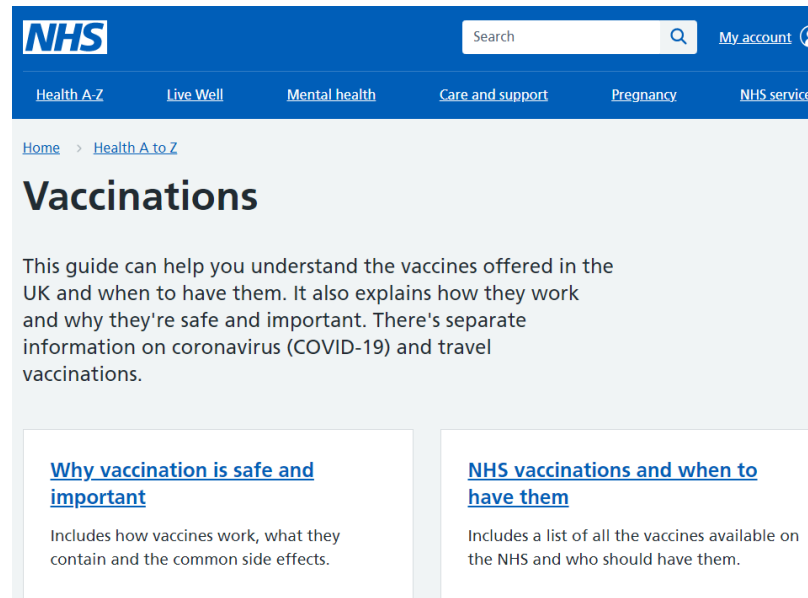
'Immunisation against infectious disease', also known as the [Green Book](#), has the latest information on vaccines and vaccination procedures in the UK.

[Immunisation patient group direction \(PGD\) templates](#) are available for

UKHSA [Immunisation collection](#)



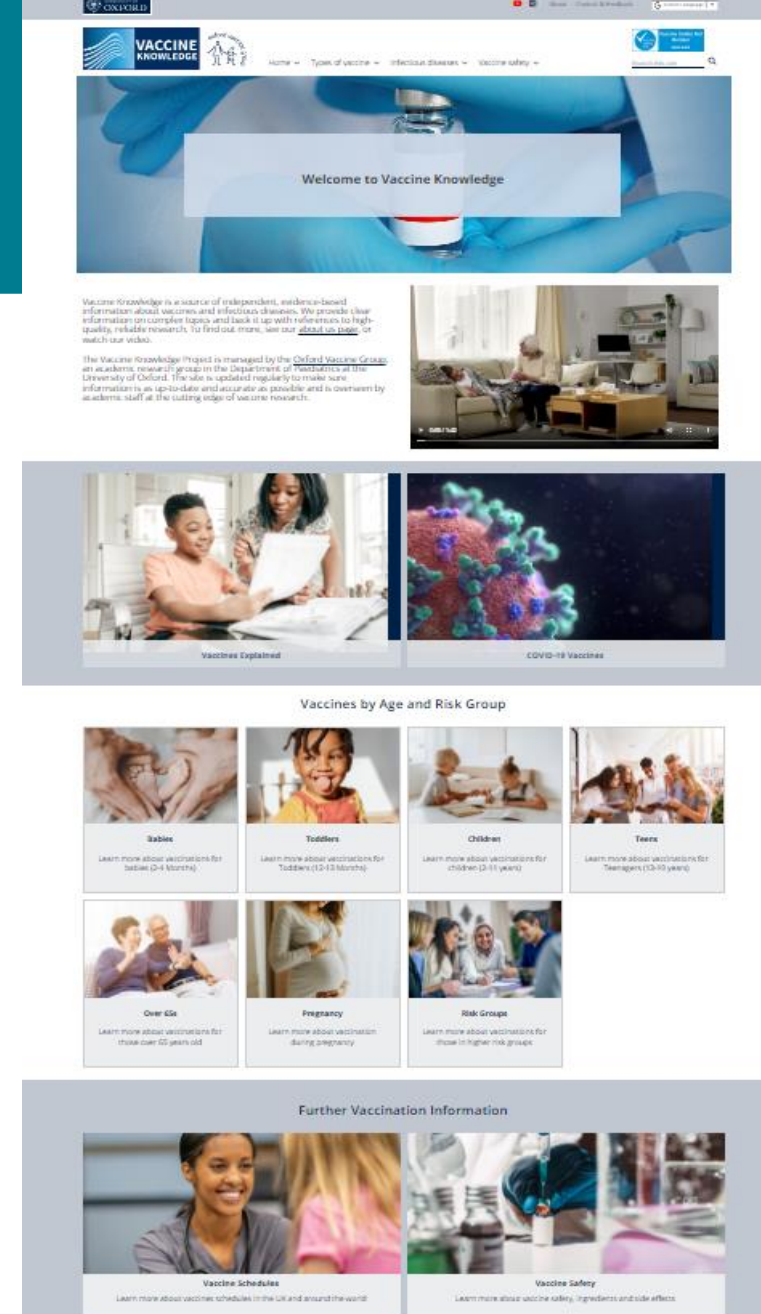
WHO [Vaccine Safety Net](#)



NHS [Vaccinations](#)

Resources

- Oxford [Vaccine Knowledge](#)
- WHO [Vaccines and immunization](#)
- WHO global network of reliable vaccine information [Vaccine Safety Net](#)
- Children's Hospital of Philadelphia [Vaccine Education Center](#)
- Australian Academy of Science. [The Science of Immunisation. Questions and Answers.](#)
- Australian [Sharing Knowledge About Immunisation](#) (SKAI)



Summary

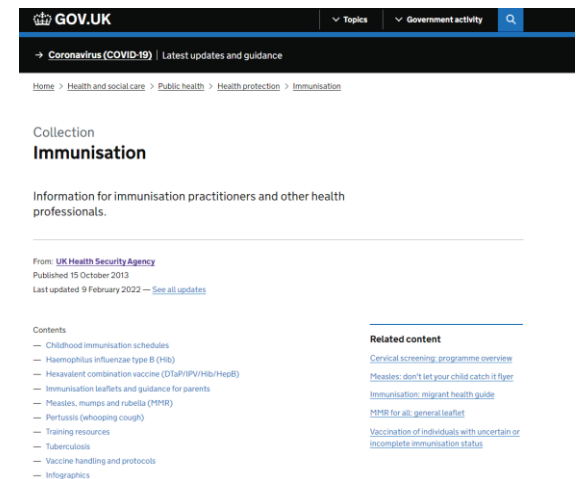
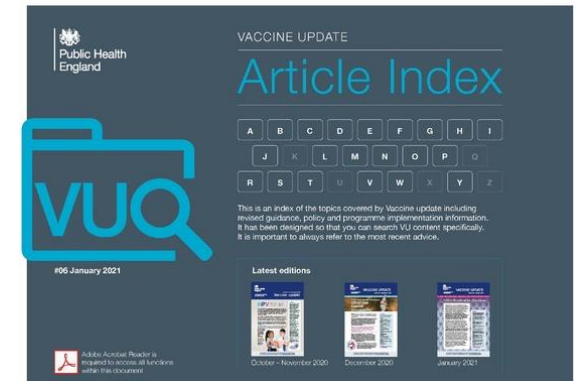
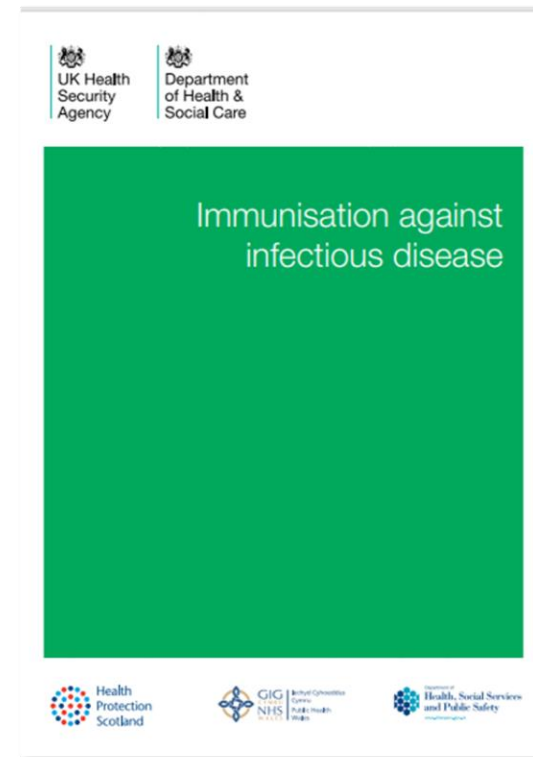


[Stimulate Africa FaceBook](#)

- Healthcare professionals are trusted by parents
- Healthcare professionals influence decision making around immunisations
- Adapt communication to the community / individual and their needs
- Communication should focus on exploring issues and guiding individuals to receive vaccines
- Address issues systematically – remember that science and emotion influence decision making
- Allocate more time if needed to explore further and discuss with others/experts
- Leave the 'door' open for further contact and dialogue

Questions

- Have access to and be familiar with:
- [Online Green Book](#)
- [Vaccine update](#) and [Vaccine update Index](#)
- [UKHSA immunisation collection webpages](#)



Immunisation and health protection advice (London)

NHS E London Immunisation Clinical Advice Response Service (ICARS) for Immunisation queries from primary care. Email: london.immunisationqueriescars@nhs.net

North East and North Central London HPT

UK Health Security Agency
Nobel House, Smith's Square
London SW1P 3JR

Email:

necl.team@ukhsa.gov.uk
phe.nenclhpt@nhs.net

Telephone

020 3326 1658

Out of hours advice:

01895 238 282

North West London HPT

UK Health Security Agency
61 Colindale Avenue
London NW9 5EQ

Email:

phe.nwl@nhs.net

Telephone

020 3326 1658

Out of hours advice:

01895 238 282

South London HPT

UK Health Security Agency
Nobel House Smith's Square
London SW1P 3JR

Email:

slhpt@ukhsa.gov.uk
phe.slhpt@nhs.net

Telephone

020 3326 1658

Out of hours advice:

01895 238 282

Primary care
immunisation update
webinar series
2023

March to July

September to
December

Vaccine ordering, storage &
handling

Incomplete immunisation
schedules

Vaccination of individuals with
underlying medical conditions

Vaccine administration – best
practice

Child and adolescent
immunisation update

Addressing concerns around
vaccines – supporting acceptance

Influenza and Covid-19

Shingles and pneumococcal
(adult) vaccines

Adverse events following
immunisation

Current Issues vaccine schedule
changes. Session to be confirmed

After the webinar, please remember to:

- Complete the evaluation (link being emailed to you today from Eventbrite)
- Print/save the certificate (emailed to you once the survey complete)
- Use the prompts to capture your reflections on the certificate
- Book for future webinars

If you need to contact the webinar team, please email: ImmsTraining@phe.gov.uk

Webinar Series - booking

	Date	Start time	Link to register
September		Influenza and COVID - 45 minute session plus 15 mins Q&A	
1	05/09/2023	09:30	https://Sept23-Webinar1-InfluenzaAndCOVID.eventbrite.co.uk?aff=oddttdcreator
2	05/09/2023	14:00	https://Sept23-Webinar2-InfluenzaAndCOVID.eventbrite.co.uk?aff=oddttdcreator
3	19/09/2023	14:00	https://Sept23-Webinar2-InfluenzaAndCOVID.eventbrite.co.uk?aff=oddttdcreator
October		Shingles and pneumococcal (adult) vaccines	
1	03/10/2023	09:30	https://Oct23-Webinar1-ShinglesAndPneumococcalAdultVaccines.eventbrite.co.uk?aff=oddttdcreator
2	03/10/2023	13:00	https://Oct23-Webinar2-ShinglesAndPneumococcalAdultVaccines.eventbrite.co.uk?aff=oddttdcreator
3	12/10/2023	09:30	https://Oct23-Webinar3-ShinglesAndPneumococcalAdultVaccines.eventbrite.co.uk?aff=oddttdcreator
November		Adverse events following immunisation	
1	09/11/2023	09:30	https://Nov23-Webinar1-AdverseEventsFollowingImmunisation.eventbrite.co.uk?aff=oddttdcreator
2	28/11/2023	09:30	https://Nov23-Webinar2-AdverseEventsFollowingImmunisation.eventbrite.co.uk?aff=oddttdcreator
3	28/11/2023	14:00	https://Nov23-Webinar3-AdverseEventsFollowingImmunisation.eventbrite.co.uk?aff=oddttdcreator