



24 January 2021

- To: Dr. Louise Wood, Director of Science, Research and Evidence, DHSC
 - Ms. Emma Lowe, Research Policy Senior Manager, Industry Relations and Growth, DHSC
 - Ms. Louise Knowles, Acting Deputy Director of Research Faculty, Infrastructure and Growth, DHSC
 - Dr. Kevin Brown, Public Health England Member, Joint Committee on Vaccination and Immunisation
 - Dr. Rebecca Cordery, Public Health England Member, Joint Committee on Vaccination and Immunisation
 - Mr. Nadhim Zahawi MP, Parliamentary Under Secretary of State (Minister for Business and Industry) and Parliamentary Under Secretary of State (Minister for COVID Vaccine Deployment)
- From: Karen Noonan, Senior Vice President, Global Regulatory Policy, ACRO Atholl Johnston, President, CCRA

RE: The Need For COVID-19 Vaccine Access For Clinical Research Professionals as Frontline Health and Social Care Workers

Dear Dr. Wood, Ms. Lowe, Ms. Knowles, Dr. Brown, Dr. Cordery, and Mr. Zahawi,

The clinical research and technology companies of the Association of Clinical Research Organizations (ACRO) conduct or support the conduct of a majority of all MHRA-regulated clinical trials in the United Kingdom and deploy more than 1,000 research professionals who provide critical services at clinical trial sites. This includes nurses, laboratory and medical technicians, clinical research coordinators (CRCs) and research associates (CRAs) who monitor trials. Member companies are providing services to COVID-19 vaccine and treatment trials, as well as clinical trials across all therapeutic areas. CCRA (Clinical & Contract Research Association) is the UK Trade Association established to represent organisations which provide clinical and contract development services for the pharmaceutical and biotechnology industries. CCRA shares ACRO's concerns regarding vaccination of frontline staff providing vital clinical research services.

These professionals are working in hospitals, other medical facilities, and stand-alone research sites each day to manage and support the conduct of clinical research. It is essential that they have access to a vaccine in order to protect themselves, the clinical trial participants they come into contact with, other patients at the site, including COVID-19 patients enrolled in studies or accessing medical care at the health facility.

The Joint Committee on Vaccination and Immunisation: Advice on Priority Groups for COVID-19 Vaccination (30 December 2020) states the prioritization of health and social care staff: *"JCVI advises that the first priorities for the current COVID-19 vaccination programme should be the prevention of COVID-19 mortality and the protection of health and social care staff and systems."*





The advice also states:

"Frontline health and social care workers are at increased personal risk of exposure to infection with COVID-19 and of transmitting that infection to susceptible and vulnerable patients in health and social care settings. The Committee considers frontline health and social care workers who provide care to vulnerable people a high priority for vaccination. Protecting them protects the health and social care service and recognises the risks that they face in this service. Even a small reduction in transmission arising from vaccination would add to the benefits of vaccinating this population, by reducing transmission from health and social care workers to multiple vulnerable patients and other staff members. This group includes those working in hospice care and those working temporarily in the COVID-19 vaccination programme who provide face-to-face clinical care."

ACRO believes that companies that employ research professionals who provide on-site services or who are essential workers, such as laboratory workers, should be included in vaccine schedules for frontline health and social care workers.

Recognizing the professionals who support clinical research as essential, frontline workers and providing them access to a vaccine will assist in ensuring that clinical trials in the UK remain safe for all those involved, so that new biomedical products and treatments continue to reach the patients who need them in an efficient and timely manner. Vaccination of clinical research staff is important for maintaining the workforce that ensures the integrity of data generated in clinical trials and will help avoid potential regulatory-approval delays for important new products.

Thank you.

Sincerely,

Karon a. Noonan

Karen Noonan, Senior Vice President, Global Regulatory Policy, ACRO <u>knoonan@acrohealth.org</u>

Professor Atholl Johnston, President, CCRA