February 16, 2021

## **COVID-19 Update**

As of yesterday there have been a total of 5,600 cases of COVID-19 on reserve in Alberta, of which 5,072 cases are recovered and 469 cases are currently active in 33 communities. Currently, there are 41 individuals in hospital, 18 of which are in the ICU. Unfortunately, 59 individuals living on reserve have passed away from COVID-19 to date.

It's also important to recognize that we are continuing to see variants identified in Alberta. Unfortunately, on February 15, 2021 it was reported that variants of concern are circulating in two First Nations in Manitoba. It is important that we continue our vigilance in strictly adhering to public health measures.

#### **COVID-19 Vaccine Update**

Over the past week, many health centres in First Nations communities have started their COVID-19 vaccination clinics. Congratulations! It has and continues to be an important and exciting time as healthcare staff operationalize the plans that they have carefully and meticulously developed. Initial data show that over 5000 immunizations have occurred in First Nations communities – truly a testament to all the hard work undertaken by the vaccination teams!

At this time we have not yet heard about phase 2 prioritization. Second doses are anticipated to roll out in early to mid March. We hope to have more details next week on when you should be setting up your second dose clinics.

Based on the updates that have been shared by communities with First Nations Inuit Health Branch, here are some strategies and practices that communities feel have contributed to the success of their clinics:

- **Posting the pertinent documentation forms** on the Nation's community social media page prior to the day of the clinic. This will allow individuals to bring the necessary information to clinics.
- Conducting appointment-only temporary clinics in school gymnasiums and recreational facilities. These
  larger venues allow for physical distancing and more room for multiple waiting areas and vaccination
  stations.
- Designating specific health centre staff (e.g., data entry clerks, community health representatives, etc.) who
  know the community and the Nation's members to conduct pre-screening, to schedule appointments, and
  to provide education related to the COVID-19 vaccine. They are a trusted source for information and can
  help to identify eligible individuals, anticipate the initial uptake of the vaccine, and potentially address
  vaccine hesitancy. The staff members can also:
  - Fill out the demographic information on consent to immunize, aftercare sheet, or media consent, etc. prior to seeing the vaccinating nurse. This will allow the nurse to provide specific client education and time for additional individuals to be vaccinated.
  - Conduct pre-screening using the COVID-19 Fit-to-Immunize Tool and make appointments prior to the
    vaccine clinic. This will allow time to address questions and for the client to contact their primary care
    physician regarding vaccine eligibility if needed.
- Placing hand sanitizers and using visual alerts, such as signs and posters, at strategic locations (e.g. entrances and waiting areas) to reinforce the importance of the public health measures.
- Preparing second and third priority lists to ensure that all the doses available in opened vials will be used. A
  designated health centre staff member should be calling these identified individuals to schedule
  appointments before the end of the clinic. Decision-making as to priorities should be made prior to the clinic,
  and be based on collaboration between health centre staff and local leadership to identify groups who are at
  risk of more severe disease or outcomes from COVID-19.

 AIVCC is available province wide 7 days a week to discuss questions around COVID 19 vaccine precautions and other primary care concerns to those that cannot access local primary care practitioners. (please see attached document)

From conversations that we have had with communities over the past few weeks, we have received a number of questions. We have appreciated hearing from you and hope that the following Q&A's will help with your future clinics.

#### 1) Who can receive the Moderna COVID-19 vaccine?

Individuals who are **18 years of age or older** can receive the Moderna COVID-19 vaccine as long as there are no other known contraindications.

- For more information on the Moderna COVID-19 vaccine, refer to the <u>Nurses' Quick Reference Guide</u> for Moderna Vaccine.
- It can be found on One Health by visiting: COVID-19 Vaccine → Vaccine Clinic Resources → Nurses' Quick Reference for Moderna Vaccine

## 2) How do I know if the individual is able to get the vaccine today?

- Refer to the COVID-19 Vaccine Fit to Immunize Tool with the accompanying rationale.
- It can be found on One Health at: COVID-19 Vaccine → Vaccine Clinic Resources → COVID-19 Vaccine Fit to Immunize Tool (with Rationale)

### 3) What are the contraindications and precautions to the COVID-19 vaccines?

A **contraindication** is when a vaccine should **NOT** be administered. The *contraindications* for receiving the COVID-19 vaccination include:

- a severe reaction to a previous mRNA vaccine and not assessed by an allergist
- an allergy to an ingredient in the vaccine and not assessed by an allergist
- being under age 18 years

A **precaution** is a condition that may increase the risk of an adverse reaction following immunization or that may compromise the ability of the vaccine to produce immunity. The *precautions* for receiving the COVID-19 vaccination include:

- Having an allergic reaction to another vaccine, drug or food.
  - These individuals MUST be observed for at least 30 minutes post immunization.
- Suffering from acute severe febrile illness.
  - These individuals should be deferred until they their symptoms resolve.
- Receiving another vaccine within 2 weeks.
  - These individuals should be deferred until 14 days after their first vaccine and/or talk to FNIHB-CDC about spacing between vaccines.
- Being immunocompromised:
  - Having a weak immune system (because of a medicine they take or a health problem);
  - Having an autoimmune disorder (like rheumatoid arthritis or lupus), or
  - Are pregnant or breastfeeding

Note: individuals with a weak immune system, an autoimmune disorder, are pregnant, or breastfeeding are still eligible for the COVID-19 vaccine. Ideally, the client should talk to their primary care practitioner prior to getting the vaccine. However, if the individual is unwilling or unable to see their primary care practitioner prior to receiving the COVID-19 vaccine, the immunization provider is responsible to inform the individual that there is an absence of evidence on the administration of the vaccine in their situation. Individuals who are immunocompromised - with the exception of SOT and HSCT - may choose to proceed with the immunization as long as they understand the lack of evidence, and informed consent is obtained and documented.

# 4) Can I get COVID-19 from the vaccine?

No, you cannot get the COVID-19 infection from the vaccine. The mRNA vaccine does not contain any virus in it. Instead, it has genetic instructions on how the cell can make the coronavirus protein to stimulate an immune response. It takes several coronavirus proteins and other genetic materials to create the coronavirus. Therefore, the vaccine cannot make the virus and cause an infection.

- For more information on Vaccine Hesitancy refer to the <u>Let's stop COVID-19 one arm at a time</u> Brochure
- It can be found on One Health at: COVID-19 Vaccine → Handouts and Tools →

# 5) Can I use what is remaining in multiple vials to make one additional 0.5 ml dose?

**No**, vaccine from different vials must not be combined to make one dose. Moderna COVID-19 Vaccine must not be reconstituted, mixed with other medicinal products, or diluted.

• For more information, go to One Health and visit: COVID-19 Vaccine → Vaccine Clinic Resources
→ COVID-19 Vaccine - mRNA Moderna - Frozen Vaccine Biological Page

## 6) Am I allowed to prefill syringes?

- Yes, only for the purpose of administering a COVID-19 vaccine in a setting where a full vial is not
  required and doses would be wasted; the immunizer may pre-fill syringes with COVID-19 vaccine and
  transport them appropriately. The prefilled syringe must be labelled and administered by the health
  care worker who prefilled the syringe.
- For more information visit One Health: COVID-19 Vaccine → Vaccine Clinic Resources → COVID-19 Immunization: Prefilled Syringes Policy

As this journey evolves, we encourage you to continue to share your experiences so that we can work together to improve and provide the best care to our First Nations members. Should you have further questions, do not hesitate to contact us for the following:

Clinic Operations: Ruth.Richardson@canada.ca

Shirley.Bourdouleix@canada.ca

AEFI, CCBs: <u>Brent.Whittal@canada.ca</u>
Medication Errors: <u>Margaret.litt@canada.ca</u>

**COVID-19 questions** 

Vaccine Ordering: Christina.smith@canada.ca

Vaccine Supplies: <u>Cynthia.onyegbula@canada.ca</u>