

ISC-AB Weekly Vaccine Update March 16, 2021

General Updates:

- As of March 15, 2021 there are 6862 total on reserve cases of COVID-19 in Alberta. Of these 6862 total cases – 6311 have recovered, 481 are active in 29 First Nation communities. There are 31 hospitalizations (13 in ICU), and 70 individuals have sadly passed away to date.
- With the recent increase in cases and variants now present in communities, it is important to continue to follow public health measures.

Vaccine General Update:

- As of March 15, 2021, over 13,000 doses have been delivered in Alberta First Nations, and over 11,000 of these doses have been administered. 64% of the over 65 on-reserve population have received at least one dose, and 16% have received a second dose. 11% of 18 – 64 on-reserve population have received their first dose and just over 2% have received a second dose. There continues to be some vaccine hesitancy in Alberta, but some Elders who initially refused the vaccine are now inquiring about receiving it, which is a positive sign.
- Please continue to connect with the key populations, work to ensure everyone is educated about the vaccine and ensure everyone knows information on how they can receive it.
- Moderna is the vaccine available in Alberta First Nations. This vaccine has proven highly effective. Moderna is also testing a booster vaccine for use against the variants, and clinical trials are under way.
- AstraZeneca has been approved for individuals aged 18 and above. The National Advisory Council on Immunizations (NACI) first recommended that AstraZeneca only be provided for individuals aged 18 – 64. In an updated statement released today, NACI has now stated that AstraZeneca is safe for use among those aged 65 and over.
- The mRNA vaccines are still recommended for those at greatest risk of severe disease or those at greatest risk of exposure when available. AstraZeneca has an efficacy rate of approximately 62% based on a number of studies. AstraZeneca has also been shown to reduce hospitalizations and severe outcomes related to COVID-19 by almost 100%. Some countries in Europe have halted the roll out of the AstraZeneca vaccine due to concerns that it may lead to blood clotting issues. A death in Denmark has caused concerns, and the European Union is currently investigating the issue to be cautious. The AstraZeneca product being investigated is not the same as the one available in Canada, and over 11 million doses have been administered in the UK with no adverse incidents. Health Canada continues to monitor the investigations.
- Since the last meeting, AstraZeneca is now available to group 2D, and communities are currently finishing Phase 1B this week. Phase 2A for on-reserve First Nations will get underway at the end of the month. Community health nurses can now reach out to their vaccine depot and arrange for the delivery of their vaccine for the week of March 29, 2021 (or earlier if indicated by the vaccine depot).
- Phase 2B should begin in early April, and is based on how the next phase of vaccine rollout goes. Moving forward through Phase 2, communities should plan to have the next age group/eligible group ready to receive vaccines on 2 week intervals, beginning with

ages 50 and over and moving through the next groups of people with chronic conditions and then health care and congregate care settings.

- The eligibility criteria for phase 2B and 2C have been released and are available in at <https://www.alberta.ca/covid19-vaccine.aspx> and a more detailed list for Phase 2B eligibility is available here <https://www.alberta.ca/assets/documents/covid19-vaccine-phase-2B-eligibility-fact-sheet.pdf>
- Please review the list if you are able. Nations have already provided ISC-AB with numbers of people for Phase 2B and this is the list that will be used to determine the roll out of these allocations. For Phase 2C, anyone working in the health centre and additional health care workers not yet vaccinated are included and should receive their vaccine. Please note that traditional healers and support workers are also included.

Vaccine Clinic Updates

- It is recommended that second doses be administered in the same clinic as the first dose. This practice will help ensure that the individual is tracked appropriately and receives the correct vaccine at the correct time.
- Thank you for communities that have responded to the email from last week regarding surge capacity needs. ISC-AB is working to organize our available staff and bring on extra support through nursing students from the Universities. Information on available surge supports will be provided later in the week.
- Please ensure all vaccine doses are labelled with their expiry date. In the coming weeks communities will be receiving a lot more vials, and it will be important to ensure the older vaccines are used first.
- Thank you for continuing to submit your data into the AVI system daily. While there have been few concerns, if you or your staff require any support or training please contact ISC-AB.
- As more people are vaccinated, it can be difficult to keep track of who has received doses. You can pull a report out of CHIP to show this information. OKAKI can support you with this process if you have questions.
- AHS will be providing 1cc syringes for all health centres, and these will be shipped via vaccine depots. If you have any issues accessing these syringes through your vaccine depot, please contact Christina Smith at christina.smith@canada.ca. It is recommended that 1cc syringes be used when available, as extra doses are consistently being extracted from vials when these are used.
- The online booking tool for those aged 50 – 64 on and off reserve is now open. AHS is making the vaccine available in this group by working backwards in two year intervals. When booking an appointment, people will be asked their age and if they are Indigenous.
- Should you require any other supplies for your vaccine clinic, please contact Cynthia Onyegbula, at cynthia.onyegbula@canada.ca
- Alberta Health continues to update the vaccine planning website with the latest information and includes the detailed plan for each population group. You can learn more on each phase here: <https://www.alberta.ca/covid19-vaccine.aspx>

Questions:

- ***AHS is going by birth year for booking vaccines. If a 17 year old that turns 18 later this year interested in a moderna vaccine, can Nations include this individual in their vaccine planning?***

- Vaccine planning for the over 75 population did include anyone turning 75 this year. However, since the vaccine is not approved for individuals under age 18, this would not be recommended as an approach for those turning 18 this year.
- ***Has there been any updates as to the self-isolation requirements should an individual who has received both doses of the vaccine be exposed to COVID-19?***
 - While it is anticipated this may change, there are no updates to the current requirements for self-isolation at this point. Anyone exposed to COVID-19 or who is a close contact of an individual who tests positive for COVID-19 is required to quarantine.
- ***Individuals identifying as Metis are being referred to the nearest First Nation by Alberta Healthlink, but these people were not included in our vaccine allotment.***
 - Please report the exact details, dates and information on anyone being improperly referred to your Nation. ISC-AB can raise these concerns with AHS.
- ***Are there any reports on vaccine “waste” within AHS vaccination clinics/sites?***
 - There is always waste in vaccination campaigns due to a number of reasons, ranging from transportation issues to human error. AHS will be reporting on the wastage rate at their clinics, and wastage in First Nations is being entered through AVI. The province is operating with the expectation of 5% of vaccines being wasted.
- ***Can one vial be combined with another to make a dose of vaccine?***
 - No, the combining of two vials to make one full dose is not allowed. The use of 1cc syringes is helpful in getting the maximum amount of doses vaccine out of a vial.
- ***Will Phase IIB, those with chronic illness, include members with mental health issues?***
 - Mental illness is included in the list: *Severe mental illness or substance use disorder requiring a hospital stay during the past year (for example: schizophrenia, depression, anxiety disorders and others)*
 - For a more detailed list on Phase 2 eligibility please visit <https://www.alberta.ca/assets/documents/covid19-vaccine-phase-2B-eligibility-fact-sheet.pdf>
- ***Can Type 1 diabetics receive the vaccine?***
 - Yes, type 1 diabetics are at higher risk of severe disease from COVID-19 and should be prioritized to receive vaccination.
- ***Is there surge capacity from FNIHB for mass vaccination clinics? Do communities need to request it specifically if they need help?***
 - Last week an email was sent to all communities requesting information on the types of surge supports that will be needed for their vaccine clinics. Communities that have requested support will be contacted by ISC-AB to organize these supports. If you did not have a chance to request supports or have had an unforeseen need arise, please contact us.
 - Tribal Councils are also a source that may be able to provide supports and some communities also have good relationships with AHS, and are accessing additional supports through the province.
- ***What can be done if an essential health staff worker refuses the vaccine?***
 - The vaccine is not mandatory. The best measure to combat vaccine hesitancy is providing information or having a targeted session to dispel any concerns an individual may have.

Thank you all for your continued participation and patience. An Urban Indigenous Vaccine Clinic will be hosted at the Edmonton Inn from March 27-30, 9-4:30 by the Metis Nation of Alberta. This clinic is open to the entire Urban Indigenous population including, but not limited to, off-reserve, and non-status Indigenous people. Further information will be available soon.

We will meet next week, **March 23, 2021 at 1:00pm.**