

## ISC-AB Weekly Vaccine Update - January 19, 2021

### *General Updates*

- Alberta First Nations continue to experience a high volume of active case numbers on-reserve. As of January 18, 2021, there are a total of 4456 confirmed cases on-reserve, of which 1315 are active in 37 First Nations communities, 3113 have recovered, 58 individuals are in hospital (16 in the intensive care unit) and 28 individuals have passed away.
- ISC-AB would like to acknowledge that this is a very busy time, as cases continue to remain high across First Nations in Alberta and would like to commend Nations for their continued efforts of addressing COVID-19.
- Last week, ISC-AB representatives worked with Nations to draft their COVID-19 vaccine community plans, indicating their over 65 populations and readiness to receiving the vaccine. Once these plans were finalized, ISC-AB shared them with AH. ISC-AB would like to thank Nations for their quick turn around on this request.
- On Friday January 15, 2021, there was an announcement that Pfizer will be temporarily decreasing their production of vaccines in order to expand their production plant, with the goal of producing more vaccines. Unfortunately, this has resulted in Canada not receiving their anticipated supply of vaccines for February.
- ISC-AB is working with AHS to understand the consequences of this outcome. What we do know is that all current vaccines are being redirected to those individuals who have received an initial dose and that the province is in the process of determining how much remaining vaccine can be allocated out to the identified priority populations.
- The Premier has indicated that the over 75 population and over 65 population for First Nations has currently paused for an unknown period. ISC-AB is keeping an open dialogue with the province and will communicate any updates with Nations as they become available.
- This is a temporary setback for vaccines and the province should see a large shipment in March/April.
- Of note, revised biological pages have been posted on the AHS website and have been updated to include that second doses can be offered up to 42 days. It was previously recommended to administer the second dose within 21-28 days; however, Alberta is to administering the second dose for most individuals between 35-42 days.
- It is advised that residents of long-term care sites still receive their second doses between 21-28 days. The ISC-AB CDC team will be emailing Nations requesting information on the immunization of residents, so please watch for this email.
- Sections on immunocompromised, pregnant, and lactating individuals has been expanded, recognizing that many of these individuals want to receive the vaccine. Data is still limited on these populations, and as such, it is recommended that individuals under these categories consult a healthcare professional. There is a statement that states nurses should be stating the risks to these individuals and that informed consent is required before administering a vaccine. More information can be found on the biological pages.
- Those who have previously had COVID-19 before can be immunized.
- A user agreement is required so that community nurses can collate immunization data. A different agreement needs to be signed by each community for data sharing and so automatic reporting can be sent to the ISC-AB CDC team through the CHIP

program. A regional team member will be connecting with those Nations who have not yet submitted an agreement.

- AH has a reconciliation program for the COVID vaccine to collect analytics on how many doses have been administered, how many have been wasted, and how many vials of COVID vaccine are available. This reporting will be a daily requirement with input needed by 9pm every night.
- ISC-AB appreciates your patience during this challenging time. The department hopes that by next week there is a clear indication of the province's inventory and better clarity on when vaccines will be available for First Nation communities.
- Tomorrow, January 20, 2021, the Chief's are meeting at a Special HCoM table to review the current vaccine situation, and determine what next steps they would like to pursue to ensure vaccines can be secured for communities in a timely way.

#### *Vaccine Administration*

- Vaccine news reports from Norway indicate that Pfizer vaccines that have been administered to frail individuals over the age of 80 have seen severe outcomes for adverse outcomes – such as fever and nausea. These reactions were seen in 29 individuals. This information is important to take into consideration when vaccinating elderly community members. Norway is still using Pfizer vaccines; however, they are not using them on individuals who are fragile or terminally ill. These findings have not been reported elsewhere.
- In California, they have found a batch or lot of Moderna vaccine that have produced an allergic reaction. This batch is under investigation and indicates that vaccine monitoring processes are working. As the investigation unfolds we will be able to determine if these are vaccine related events or coincidental findings.

#### *Vaccine Hesitancy*

- There is a seminar through the National Collaborating Center for Indigenous Health that discusses vaccine hesitancy. The link for this seminar is on the OneHealth website and will be shared in this week's bulletins.

#### *Anaphylaxis Guidance*

- ISC-AB CDC and Nursing teams are working to revise existing documents to ensure they are current and reflecting CARNA specifications. Any key differences will be highlighted in document. It should be noted, that the document does not require many changes and that epinephrine is still the first line of treatment and should not be delayed.
- The ISC-AB Nursing team is in the process of developing an FAQ document. If you have any questions that you would like addressed, please email the CDE inbox. (this is a separate piece from anaphylaxis- more clinical FAQs)

#### *Questions*

- If you have questions, please send them prior to the next meeting to the CDC Inbox so that either Dr. Thiara or Christina Smith can ensure they are addressed at the next meeting.