

HPMVAC Update: April 23, 2021

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WHAT'S NEW THIS WEEK

- As of April 23, 2021, all pregnant individuals will be eligible to register for vaccination appointments under the highest risk health conditions in the Phase 2 prioritization guidance.
- New eligible groups for HPPH mass vaccination clinics added:
 - Individuals age 60 or older (born 1961 or earlier)
 - Adults 16 years of age and older with the following highest-risk and high-risk health conditions:
 - Obesity (BMI > 40)
 - Other treatments causing immunosuppression (e.g., chemotherapy, immunity weakening medications) *
 - Individuals should speak to their treating provider to determine the most appropriate timing for administration of the first dose of vaccine.
 - Intellectual or developmental disabilities (e.g., Down Syndrome)
 - One (1) primary essential caregiver for an individual with an eligible highest-risk or certain high-risk health condition.
- See Complete Eligibility List in Appendix A
- The province has expanded AstraZeneca eligibility to those ages 40 and older (born in 1981 or earlier)
- Additional pharmacies offering AstraZeneca vaccine are being added in Huron Perth.

VACCINATION PROGRAM IN HURON-PERTH

Vaccine eligibility

Phase Two eligibility continues, dependent on vaccine supply.

- As of April 23, 2021, all pregnant individuals are eligible to register for vaccination appointments under the highest risk health conditions in the Phase 2 prioritization guidance.
 - A letter from a health care provider is not required for vaccination.
 - The extended dose interval of 16 weeks applies to this group
- Implementation will begin immediately; please note the Province's Prioritization Guidance and website

will be updated in the coming days to reflect this change.

- New eligible groups for HPPH mass vaccination clinics added:
 - Individuals age 60 or older (born 1961 or earlier)
 - Adults 16 years of age and older with the following highest-risk and high-risk health conditions:
 - Obesity (BMI > 40)
 - Other treatments causing immunosuppression (e.g., chemotherapy, immunity weakening medications) *
 - Individuals should speak to their treating provider to determine the most appropriate timing for administration of the first dose of vaccine.
 - Intellectual or developmental disabilities (e.g., Down Syndrome)
 - One (1) primary essential caregiver for an individual with an eligible highest-risk or certain high-risk health condition.
- See Complete Eligibility List in Appendix A
- We continue to have limited vaccine supply, and will provide vaccinations to eligible groups as quickly and safely as possible.

How eligibility is determined

- When possible, Huron Perth Public Health strongly considers age in determining the sequence of COVID-19 vaccine recipients. This is consistent with the province's ethical framework to guide COVID-19 vaccine prioritization and distribution decisions. The core principles include the objective of minimizing harms and maximizing benefits by reducing overall illness and death related to COVID-19. Amongst those infected with the SARS-CoV-2 virus, age is the single most predictive risk factor for death. To reduce the number of deaths in the province, prioritizing the immunization of older individuals is critical.

Vaccine availability

- Huron Perth continues to administer every vaccine received. Uptake of the vaccine by eligible residents has been high in Huron and Perth.
- HPPH will re-open access to our booking system early next week. Next available appointments will be as early as first week of May, dependent on vaccine supply.
 - HPPH does not have a pre-registration system; when clinics open, all eligible groups can book an appointment.
- HPPH does not determine which vaccines are received and allocated for HPPH and Primary Care clinics; Pfizer-BioNtech is currently the COVID-19 vaccine available in the region currently for HPPH mass vaccination clinics but other vaccines may be used in future clinics in accordance with supply.
- A very limited supply of Moderna vaccine has been distributed to Huron Perth Primary Care Providers to vaccinate eligible populations. Primary care is calling patients for Moderna vaccine appointments and are asking their patients to please not call their clinic for appointments.
- Two Primary Care-led clinics administered AstraZeneca this week. These clinics were age-based, and used AstraZeneca vaccine that was part of the Huron Perth allotment for primary care use. The clinics' 1300 appointments were fully booked within 6 hours.
- Pharmacies receive their AstraZeneca vaccine supply separately from HPPH. The list of pharmacies administering vaccinations is available at: <https://covid-19.ontario.ca/vaccine-locations>.
 - Please note that the 40+ eligibility for AstraZeneca through pharmacies is different than the eligibility list for HPPH immunization clinics which currently offer Pfizer.
- Since all COVID-19 vaccines approved by Health Canada are safe and effective, we encourage residents to take whichever vaccine for which they are eligible.

Hot Spot Strategy

- To protect communities with the highest rates of transmission, Ontario is rolling out vaccines to "hot spot" regions across the province as part of Phase Two of the COVID-19 vaccine distribution plan. This strategy impacts the vaccine supply across the rest of the province.
- However, until the pandemic is widely controlled we are all at risk. If there is a high rate of community transmission elsewhere in the province, that will eventually spread toward Huron Perth.
- Some regions have more risk factors for COVID spread, such as more high- density neighbourhoods, more international travellers passing through, more newcomers who may not speak English and may have more barriers to complying with public health measures, more patients who are transferred into the GTA for tertiary care, and large businesses and services that serve the rest of the province (such as the Food Depot and the Amazon warehouse).
- It's important to break chains of transmission as one strategy in pandemic control, and that is why the "hot spot" strategy will benefit Huron-Perth. The evidence from the Science Table modelling demonstrates that vaccinating in areas of high transmission will help break chains of transmission.

Second doses

- In keeping with provincial direction, Huron Perth Public Health continues to maintain the time interval for second doses of COVID-19 vaccines at 16 weeks, allowing more first doses to be administered. However, the following groups should continue to receive their second dose of COVID-19 vaccine according to the original recommended schedule:
 - Residents of long-term care homes, retirement homes, Elder Care Lodges and Assisted Living facilities who are at the greatest risk of both exposure to COVID-19 and serious illness and death
 - Transplant recipients (including solid organ transplants and hematopoietic stem cell transplants)
 - Malignant hematologic disorders on immunocompromising therapy (chemotherapy, targeted therapies, immunotherapy),
 - Nonhematologic malignant solid tumors on immunocompromising therapy (chemotherapy, targeted therapies, immunotherapy); excludes individuals receiving solely hormonal therapy or radiation therapy.
 - If you have one of the above medical conditions, please contact your primary care provider.

Current Vaccination progress

- As of April 19, Huron Perth Public Health is reporting 34,119 vaccine doses administered.
- Public Health Ontario reports that as of April 10:
 - 20.3 % of H-P residents have received at least 1 dose (provincial average 18.9%)
 - 3.0% of H-P residents have completed the vaccination series (provincial average 2.2%)(source: COVID-19 Vaccine Uptake in Ontario: December 14, 2020 to April 10, 2021 | Public Health Ontario)

NOTES ON BOOKING APPOINTMENTS AT HPPH CLINICS

- Bookings for HPPH community clinics are being completed at this time only by HPPH.
- Anyone **eligible** for a vaccination, or a trusted individual acting on an eligible person's behalf, can contact the HPPH booking system at hpph.ca/vaccinebooking or by calling 1-833-753-2098.
- The Health Unit asks people to book their appointment online if they are able, or have a caregiver who can help them book online, since phone lines are very busy.

- Residents are strongly encouraged to not book multiple appointments for one person; doing so slows down the booking system.
- Please cancel appointments that have been double booked or need to be rescheduled or cancelled. This will free up spots for other eligible residents. Cancellations can be done through email at: VaccineCancellation@hpph.ca or by calling HPPH Vaccine Booking line: 1-833-753-2098 and Press 2 for Cancellations.

Also remember

- **“Once eligible, always eligible”** Once HPPH announces that you are eligible for the vaccine, you are always eligible; you will not miss your chance to be vaccinated as there will be additional opportunities.
- Find the latest vaccination updates at hpph.ca/vaccines. To hear our regularly updated 24-7 vaccination status message, call HPPH at 888.221.2133 and select “1” for COVID VACCINE. Please listen to the whole message to receive all of the information.
- **Please remember that there will be enough vaccine for everyone.** Anyone who wants to be vaccinated will receive their opportunity to be vaccinated. We appreciate the enthusiasm and patience of those eager to receive COVID vaccine.
- Anyone who has received a first dose, or both doses, of a COVID-19 vaccine must continue to follow all public health measures. Right now we know the vaccines will protect those who receive it from getting very sick with COVID-19. Until we learn otherwise, however, it is possible that someone who has been vaccinated could still pass the virus on to others. As long as COVID is still circulating in Ontario, it is important to continue public health measures, even if you are vaccinated.

For More Information

Please visit www.hpph.ca/vaccine for more information, or contact your HPMVAC sector representative. The HPMVAC membership list is available at www.hpph.ca/vaccine. You can also call HPPH at 888.221.2133 for more information.

About HPMVAC

The Huron Perth COVID-19 Mass Vaccination Advisory Committee (HPMVAC) is a collaborative of multiple relevant sector stakeholder members from our Huron and Perth communities.

Under the leadership of Huron Perth Public Health, our table has been meeting to inform COVID-19 mass vaccination planning and operations for our communities.

This memo serves to update you, our community members and partners. Please note, guidance provided is subject to change. This reflects the evolving nature of COVID-19 and related supply chain logistics.

Note for Partners: Vaccine doses can be maximized through use of 1mL syringes. We ask our healthcare partners to consider using alternate syringe sizes where appropriate to preserve all 1mL syringes for vaccination purposes in our communities.

APPENDIX A – ELIGIBILITY for HPPH Clinics (April 23, 2021)

- All pregnant individuals, as part of the highest-risk health conditions. **NEW***
- Individuals age 60 or older (born 1961 or earlier) **NEW***
- Adults 16 years of age and older with the following highest-risk and high-risk health conditions: **NEW***
 - Obesity (BMI > 40)
 - Other treatments causing immunosuppression (e.g., chemotherapy, immunity weakening medications) *
 - Individuals should speak to their treating provider to determine the most appropriate timing for administration of the first dose of vaccine.
 - Intellectual or developmental disabilities (e.g., Down Syndrome)
- One (1) primary essential caregiver for an individual with an eligible highest-risk or certain high-risk health condition. **NEW***
 - A primary essential caregiver is an individual who provides regular and sustained assistance with personal care and/or activities of daily living.
- **Education staff who provide direct in-person support to students with complex special needs**, defined as those who support students who meet one or more of the following criteria:
 - who require support with activities of daily living, including health and safety measures
 - are unable to wear masks for medical reasons
 - have complex medical needs
 - cannot be accommodated through remote learning.

Please note: Eligible staff will receive a letter from their school board confirming their eligibility.
- **Indigenous adults 16 years of age and older.**
 - Immediate household/family members of Indigenous people who themselves are not Indigenous are also eligible to receive the vaccine.
- **Adults 16 years of age and older with the following highest-risk health conditions:**
 - Pregnant individuals
 - Organ transplant recipients
 - Hematopoietic stem cell transplant recipients
 - Neurological diseases in which respiratory function may be compromised (e.g., motor neuron disease, myasthenia gravis, multiple sclerosis)
 - Haematological malignancy diagnosed <1 year
 - Kidney disease eGFR < 30
 - In addition, one (1) primary essential caregiver for an individual with an eligible highest-risk health conditions is now also eligible to receive the COVID-19 vaccine. Primary essential caregivers are individuals who provide regular and sustained assistance with personal care and/or activities of daily living.

Residents, Primary Essential Caregivers and Staff of High-Risk Congregate Living Settings

High-risk congregate living settings refer to residential facilities where a high-risk client population live or stay overnight and use shared spaces (e.g. common sleeping areas, shared bathrooms, shared kitchens, communal dining spaces). The settings are at higher risk of transmission.

Primary essential caregivers are individuals (who enter the congregate living setting) to provide regular and sustained assistance with personal care and/or activities of daily living.

Residents, Primary Essential Caregivers and Staff of High-Risk Congregate Living Settings in the following settings:

- Developmental services/intervenor which includes
- supported independent living (person lives independently and has support worker(s) who come into the home to assist.)

- Mental health and addictions congregate living
 - Homes for special care (provincial program providing housing, meals and assistance with daily living for adults with a serious mental illness)
 - Children’s residential facilities
 - Youth justice facilities
 - Supportive housing (a setting where individuals are receiving care)
 - Indigenous healing and wellness
 - Bail beds and Indigenous bail beds
 - Provincial and demonstration schools/Consortium Centre Jules-Leger
 - Emergency homeless shelters
 - Other homeless populations not in shelters
 - Employer-provided living accommodations for temporary foreign agricultural workers
 - Adult correctional facilities
 - Violence Against Women (VAW) shelters
 - Anti-Human Trafficking (AHT) residences
 - Inpatients on rehabilitation, complex care, geriatrics and mental health units
 - Primary essential caregivers are individuals who provide regular and sustained assistance with personal care and/or activities of daily living.
- **Faith leaders who as part of their regular role are at increased risk of exposure to COVID-19 through close contact with persons and families in the following circumstances:**
 - End of life care.
 - Care of the deceased, funerals, bathing, or other ceremony with direct contact with deceased persons.
 - Home visits to unwell persons.
 - Pastoral care in hospitals/LTCHs/RHs or other vulnerable settings.
- **All health care workers.**
 - Cohort is defined in further clarity in Appendix B.
- **Residents, staff, and essential caregivers associated with long-term care, retirement homes, and other congregate care settings for seniors, including assisted living facilities.**
 - Cohort is defined in further clarity in Appendix C.
- **Residents and staff of congregate settings with a history of outbreak or with high-risk populations, at the discretion of the local public health unit.**
- **Adults 16 years of age and older who are chronic home care recipients.**

APPENDIX B – Health Care Workers

Where a health sector has been named in the priority sector, all frontline workers in that sector are included (e.g., including students, registered volunteers, custodial, security and reception staff). Where a non-health setting has been named, only workers providing a health service or direct patient care are included.

Hospital and acute care health care workers in frontline roles with COVID-19 patients and/or with a high-risk of exposure to COVID-19. These individuals should be regularly scheduled staff (full time or part time) and not transient workers. The staff must be drawn from the following areas:

- Critical Care Units
- Emergency Departments and Urgent Care Departments
- COVID-19 Medical Units

- Code Blue Teams and rapid response teams
- General internal medicine and other specialists involved in the direct care of COVID-19 positive patients

Patient-facing health care workers involved in the COVID-19 response:

- COVID-19 Assessment Centers, including Mobile Testing Teams
- COVID-19 vaccine clinics and mobile immunization teams
- COVID-19 Isolation Centers
- COVID-19 Laboratory Services

Medical First Responders

- ORNGE, paramedics, firefighters and police providing medical first response

Patient-facing community health care workers serving specialized populations including:

- Needle exchange/syringe programs & supervised consumption and treatment services
- Aboriginal Health Access Centers, Indigenous Community Health Centers, Indigenous Interprofessional Primary Care Teams, and Indigenous Nurse Practitioner-Led Clinics
- Community Health Centers serving disproportionately affected communities and/or communities experiencing highest burden of health, social and economic impacts from COVID-19
- Home and community care health care workers caring for recipients of chronic homecare and seniors in congregate living facilities or providing hands-on care to COVID-19 patients.

Frontline healthcare workers working in hospital inpatient settings and hospital procedural areas, including surgical care, anesthesia, obstetrics, endoscopy, operating rooms, dialysis, imaging, chemotherapy, and radiotherapy.

Frontline healthcare workers in the following outpatient and ambulatory areas:

- Hospital-based outpatient clinics
- Primary care, including walk-in clinics, community health centres, and nurse-practitioner-led clinics
- Home and community care
- Adult day programs for seniors
- Community Based Specialty clinics, including medical and surgical specialties
- Death investigation professionals
- Dentistry
- Gynecology/obstetrics, midwifery, and birth centres
- Contract nursing agencies
- Pharmacies
- Assisted living, group homes, residential facilities, supportive housing
- Hospices and palliative care settings
- Shelters

Laboratory services.

Frontline healthcare workers in the following outpatient and ambulatory areas, including:

- Developmental services
- Mental health and addictions services
- Campus health
- Community diagnostic imaging
- Daycare/school nursing
- Dietary / nutrition
- Independent health facilities (e.g., Opticians/Optomety, Podiatry, Audiology)
- Naturopathy / Holistic care
- Social work
- Sexual health clinics

Frontline healthcare workers in the following non-acute rehabilitation and therapy areas, including:

- Chiropractic
- Chronic pain clinics
- Kinesiology
- Occupational therapy
- Physiotherapy
- Psychiatry
- Psychology
- Psychotherapy
- Registered massage therapy
- Acupuncture, other therapy

Public health.

Non-Frontline health care workers (e.g., those working remotely, in administration, and who do not require PPE to work).

APPENDIX C – Individuals associated with long-term care and retirement homes

- The following individuals associated with long-term care and retirement homes are eligible to receive the first-dose vaccines.
- Long-term care and retirement home residents.
- Long-term care and retirement home staff. ○ Includes LHIN, Hospital, Primary Care and Paramedic Services staff who are directly providing on-site support to LTCH and RHs in outbreak and have committed to a week or more of attending the facility.
- Essential caregivers in long-term care and retirement homes ○ A caregiver is a type of essential visitor who is designated by the resident and/or their substitute decision-maker and is visiting to provide direct care to the resident.
- Alternative level of care patients in hospitals who have a confirmed admission to LTCH, RH, or other congregate care home for seniors, as operationally feasible.