



COVID-19 *LIVE UPDATE*

March 8, 2020

FOR UP-TO-DATE
CASE NUMBERS
VISIT
wechu.org

Phases of provincial vaccine rollout

- Phase 1 – High risk population
 - Started Dec 14, 2020
 - Limited vaccine supply
- Phase 2 – Mass vaccination
 - Expected to start March/April, 2021
 - Significant and steady increase in vaccine supply
- Phase 3 – Steady state
 - Expected to start September 2021
 - Steady state of the community

Provincial coverage of vaccines

Current Status: Completing Phase One (Dec 2020 – Mar 2021)



Over **820,000** Doses administered



Nearly **80%** LTC residents fully immunized



Over **67%** LTC Staff received at least 1 dose






Over **89%** RH residents received at least 1 dose



Over **52%** RH Staff received at least 1 dose

As of Mar. 4, 8 p.m.

Vaccination Groups	LTC Homes	Retirement Homes
 Residents	Substantially Completed	Underway
 Caregivers	Underway	Underway
 Staff and Front-Line Workers	Underway	Underway
80+ Underway (over 14% have received 1 st dose)	Remote and FN Underway	

100% of the Operation Remote Immunity 31 fly-in communities and Moosonee have been visited for a 1st dose



What is the status of COVID-19 vaccines in Windsor-Essex?

Phase 1 Population:

- All LTCH & RH residents, staff and ECGs - completed
- Highest priority HCW - completed
- Other congregate care staff - completed
- Indigenous – ongoing
- Adults recipient of chronic homecare – ongoing
- Medical first responders (EMS, Fire, Police) - completed
- Very high priority HCW - ongoing
- Adults 80 years and older – ongoing

What are the immediate priorities?

- Ongoing maintenance for LTCH/RH residents, staff and essential caregivers
- Complete adult recipient of chronic homecare
- Complete very high priority HCW
- Complete 80+ adults in the community
- Mobile clinics for priority population

Current vaccine clinics and coverage

- Hospital hub – St. Clair college
 - 600 vaccines/day
- Targeted clinic – WFCU
 - 330 vaccines/day
- Targeted clinic – NFFRC
 - 160 vaccines/day
- Mobile clinics
 - various

Upcoming Priorities

- Ongoing maintenance for previous priority
- High priority healthcare workers
- 75+ population
- Adults in 60-64 years age category
- Priority population
- Ramp up WFCU and NFFRC
- Support vaccine clinics run by local pharmacy and primary care providers
- Identifying phase 2 priority and scheduling clinics based on the projected vaccine supply

Phase 2 priority population

- Seniors aged 60-79
- High-risk congregate settings (e.g., shelters, community living)
- Individuals with high-risk chronic conditions and their caregivers
- Workers who cannot work from home
- At-risk population

Distribution through, WFCU, NFFRC, pharmacies, primary care, site-specific clinics, mobile teams

Eligible Health Conditions

Individuals with the following health conditions will be vaccinated in Phase 2:

Highest-risk (442K)

- Organ transplant recipients
- Hematopoietic stem cell transplant recipients
- People with 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

High-risk (292K)

- Obesity (BMI > 40)
- Other treatments causing immunosuppression (e.g., chemotherapy, immunity- weakening medications)
- Intellectual or developmental disabilities (e.g., Down Syndrome)

At-risk (2.2M)

- Immune deficiencies/ autoimmune disorders
- Stroke/cerebrovascular disease
- Dementia
- Diabetes
- Liver disease
- All other cancers
- Respiratory diseases
- Spleen problems
- Heart disease
- Hypertension with end organ damage
- Diagnosis of mental disorder
- Substance use disorders
- Thalassemia
- Pregnancy
- Immunocompromising health conditions
- Other disabilities requiring direct support care in the community

Cannot Work From Home

Workers who cannot work from home in the following sectors will receive vaccines at the end of Phase Two:

First group of workers unable to work remotely (730K) to be vaccinated in parallel:

- Elementary/ secondary school staff
- Workers responding to critical events (e.g., police, fire, compliance, funeral, special constables)
- Childcare and licenced foster care workers
- Food manufacturing workers
- Agriculture and farm workers

Remaining workers unable to work remotely (1.4M) to be vaccinated in parallel:

- High-risk and critical retail workers (grocery and pharmacies)
- Remaining manufacturing labourers
- Social workers (incl. youth justice)
- Courts and justice system workers (incl. probation and parole)
- Lower-risk retail workers (wholesalers, general goods)
- Transportation, warehousing and distribution
- Energy, telecom (data and voice), water and wastewater management
- Financial services
- Waste management
- Mining, oil and gas workers

Which vaccines are being used in Canada?

Pfizer-BioNTech: Authorized by Health Canada on December 9, 2020

Moderna: Authorized by Health Canada on December 23, 2020

AstraZeneca: Authorized by Health Canada on February 26, 2021

Janssen (Johnson & Johnson): Authorized by Health Canada on March 5, 2021

What type of vaccines are they?

Pfizer-BioNTech & Moderna: mRNA Vaccine

- Messenger RNA enters the cytoplasm of cells and provides instructions to produce the spike protein antigen that attaches to the cell's surface.
- This protein triggers an immune response from the body.
- The mRNA does not enter the nucleus of the cell and does not alter human DNA.

AstraZeneca & Janssen: Non-replicating viral vector

- A harmless virus is used as a delivery system.
- The harmless virus helps produce the spike protein, which then triggers an immune response.

How are they administered?

Pfizer-BioNTech: Two intramuscular (IM) doses at 3-6 weeks apart

Moderna: Two IM doses 4-6 weeks apart

AstraZeneca: Two IM doses 12 weeks apart

Janssen: One IM dose

*The National Advisory Committee on Immunization recommends delaying the second dose of vaccine up to 4 months, where needed, to ensure the maximum number of people receive their first dose

Are the AstraZeneca and Janssen vaccines not as good?

Should I wait for Pfizer or Moderna?

All four vaccines are effective at preventing severe, symptomatic infection with COVID-19

The AstraZeneca and Janssen vaccines are highly effective at preventing hospitalization and death from COVID-19

- Even one dose of the AstraZeneca vaccine can lower the risk of a COVID-19 infection leading to hospitalization

The best way to prevent COVID-19 infections and hospitalizations in Canada is to increase population immunity

- The more people who receive vaccines, of any type, the more we will be able to reduce or prevent community spread

The AstraZeneca vaccine is currently not recommended in individuals 65 years of age or older due to limited evidence on the vaccine's efficacy in this age group

- The AstraZeneca vaccine has been proven effective in those younger than age 65, so those eligible for the AstraZeneca vaccine should still receive it

Summary

- Windsor-Essex is ahead of many regions in rolling vaccine roll out on a per capita basis
- COVID-19 vaccines are being rolled at a steady rate through strong partnership between WRH, WECHU, City of Windsor and all other municipalities
- Windsor-Essex is one of the three regions in the province to start vaccine roll out in Pharmacy
- Vaccine roll out will ramp up in the coming weeks with large shipments of vaccines coming to our region