

#### COVID-19 VACCINATION

#### PRIMARY CARE TOWN HALL

### **London Middlesex Primary Care Alliance**

Please join us on: Tuesday, March 23, 2021 7:00-8:30 PM

Register in advance for this meeting:
<a href="https://tinyurl.com/chdze62m">https://tinyurl.com/chdze62m</a> or scan here —

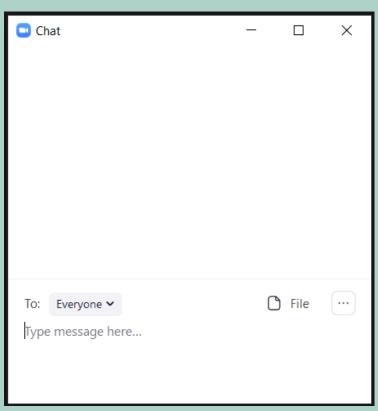
## LMPCA COVID -19 Vaccination Town Hall

#### Housekeeping Items:

- Please remain on mute during the presentations.
- If you have any comments or questions please use the CHAT BOX.
- There will be opportunities for Q&A after the presentation and during the Breakout Rooms.
- This event is being recorded and will be posted in the LMPCA website.

## Welcome and thank you for joining us!

Please let us know who you are by introducing yourself in the CHAT BOX!





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#### Welcome

Dr. Phil Vandewalle

#### **LMPCA COVID -19 Vaccination Town Hall**

Agenda Item	Presenter		
Technical Overview/House Keeping	Janet Dang		
Welcome	Phil Vandewalle		
London Middlesex Primary Care Alliance	Gord Schacter		
Updates			
Middlesex London Health Unit Updates	Alex Summers		
Primary Care Vaccination Strategies			
<ul> <li>Home-bound patients 80+ year old</li> </ul>	Mario Elia		
<ul> <li>Outreach to refugee and marginalized</li> </ul>	Julie Clarke		
communities			
Breakout Groups	All		
Questions & Answers	Alex Summers		
Next Steps/Closing	Phil Vandewalle		

#### London Middlesex Primary Care Alliance

#### **Primary Care Outreach**

**Dr. Gord Schacter** 



#### LMPCA - Vision and Mission

**Vision**: An inclusive network of primary care providers leading with a unified voice to improve the health of our community.

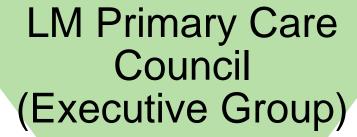
Mission: Create a strong and united primary care network to:

- Lead system change utilizing quintuple aim values
- Drive health equity and continuous quality improvement for the best possible experience and health outcomes
- Advance patient-centred equitable care in partnership with those we serve
- **Improve** integration of primary health services with public health and other social and health care partners

## Planned Primary Care Structure in London Middlesex

- Elected by the LMPCA
- Representation based on distribution

London Middlesex Primary Care Alliance





- Western Ontario Health Team Representatives
- Provincial Primary Care Council Representative

PC Clinical Lead / Representatives





- Inclusive of all
   primary care
   regardless of
   providers type,
   organizations,
   stakeholders in the
   London-Middlesex
   region
- Automatically included in membership

#### **Next Steps**

- Interim LMPCA leadership outreach meetings / presentations (February-April)
- Expression of interest for Executive Council Leadership Roles (March 22 - April 5)
- Voting LMPCA leadership (April 6 13)
- Transition of leadership (end of April May)

#### How can you get involved?

- Participate in the London Middlesex Primary Care Alliance to be connected to WOHT information
- Spread the word to your Primary Care colleagues
- Join the LMPCA meetings
- Express interest for an Executive Council position
- Sign up to LMPCA newsletter HERE: <a href="https://lp.constantcontactpages.com/su/Kn556bD/Subscribe">https://lp.constantcontactpages.com/su/Kn556bD/Subscribe</a>

# Middlesex London Health Unit Update

**Dr. Alex Summers** 







## COVID-19 Vaccine and Primary Care Update

LMPCA Virtual Townhall Dr. Alex Summers
March 23, 2021





## Local Progress: Vaccine

Forward deployment of Pfizer:

• As of today, over 65,000 vaccines have been administered (this total includes both first and second doses)





#### Where are we at?

- Phase 1 is nearly completed
- Phase 2 will be starting imminently
  - Already started on those 75+



#### MIDDLESEX-LONDON HEALTH UNIT

Phase 2	Primary Priority			Secondary Priority			
	APR	MAY	1	JUN		JULY	
Older Adults	Over 75						
		Over 70					
		Over 65					
		O	ver 60				
Health Conditions	Individuals with health conditions						
	Highest Risk & Caregivers	High Risk & Certain Caregivers	At Risk H Condition				
Congregate Settings	High Risk Congregate Living Settings						
Hot Spots	COVID-19 Hot Spot Communities						
	Highest Risk Communities		Remaining Hot Spot Communities				
Cannot-Work-From- Home					orkers who k from home		
				Group 1	Group 2		





#### **Primary Priority**

The groups identified as a Primary Priority should be offered a vaccine first in Phase 2 of Ontario's vaccination program. There is no relative prioritization within the primary priority groups (i.e., they should be offered vaccinations concurrently). PHUs should work to vaccinate these populations at an equitable pace, in consideration of the size of these populations and local context.

- Adults aged 60-79, starting with those 75-79 and decreasing in 5-year increments
- Individuals with health conditions, starting with Highest Risk and High Risk health conditions<sup>1</sup>
- Residents, Essential Caregivers<sup>2</sup> and Staff of High Risk Congregate Settings
- Adults aged 50+ in COVID-19 Hot Spot Communities, starting with older individuals and decreasing in age



<sup>&</sup>lt;sup>1</sup> Includes up to 1 essential caregiver for those in the Highest Risk group and certain caregivers for those in the High Risk group.

<sup>&</sup>lt;sup>2</sup> Essential Caregivers are included for the following congregate settings: developmental services, mental health and addictions congregate settings, homes for special care, children's residential facilities, and Indigenous healing and wellness facilities



#### **Secondary Priority**

The groups identified in Secondary Priority are those that should be offered a first dose of vaccine in Phase 2 of Ontario's vaccination program when all reasonable efforts have been made to offer a first dose of vaccine to all those within the Primary Priority.

- Remaining Individuals with At-Risk Health Conditions
- Workers who cannot work from home starting with those in the First Group and then proceeding to those in the Second Group.





#### Highest-risk health conditions

- Organ transplant recipients
- Hematopoietic stem cell transplant recipients
- Neurological disease in which respiratory function may be compromised (e.g. MS)
- Haematological malignancy < 1 year</li>
- Kidney disease eGFR < 30</li>





#### High-risk health conditions

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





#### At-risk health conditions

- Immune deficiencies/autoimmune disorders
- Stroke/CVD
- Dementia
- Diabetes
- Liver disease
- All other cancer
- Respiratory diseases
- Spleen problems
- Heart disease
- Hypertension with end organ damage

- Diagnosis of mental disorder
- Substance use disorder
- Sickle Cell Disease
- Thalassemia
- Pregnancy
- Immunocompromising health condition
- Other disabilities providing direct support care in the community





#### Mass Vaccination Clinics





#### **Local Progress: COVID-19 Vaccination Clinics**

North London Optimist Community Centre (NLOCC) opens!







North London Optimist Community Centre (NLOCC)







North London Optimist Community Centre (NLOCC)







#### **Local Progress: COVID-19 Vaccination Clinics**

- North London Optimist Community Centre (NLOCC) opened its doors to the public on Thursday, March 18<sup>th</sup>
- It is expected that Earl Nichols Arena will be used to support the rollout of Phase Two of the Province's COVID-19 vaccine distribution plan.
- Select Ontario pharmacies have now started vaccinating those born in 1954 to 1961 with the Oxford-AstraZeneca vaccine.





#### Mass Vaccination Clinic Capacity

#### Agriplex

- Capacity = 2000 doses/day
- Current use = 1300 doses/day

#### Mount Brydges

- Capacity = 580 doses/day
- Current use = 300-350 doses/day

#### NLOCC

- Capacity = 2000 doses/day
- Current use = 400 doses/day





### Expanding role of primary care





## Immunizers at the mass vaccination clinic

- Thank you to all who have signed up!
- You are on the list, and you will get the call as our capacity expands!





## Housecalls for homebound eligible recipients

- Smaller numbers of patients
- Only possible with Moderna or AZ
- Planning is underway with LMPCA leadership, hopefully to be piloted in the next week





#### Distribution to your clinics

- Process is in the works!
- Different than flu vaccine due to COVax
- Sign-up package will be sent out within the week, including instructions on training for COVax
- Will be critical for reaching some of the at-risk health conditions





### Other updates





#### Astra Zeneca for >65 yo

 Phase 3 clinical trials of the AstraZeneca vaccine had a very small number of participants over 65 years of age that contracted COVID-19 to determine the efficacy of the vaccine in this age group.





#### Astra Zeneca for >65 yo

• There is now real-world evidence from the United Kingdom who has been administering the AstraZeneca vaccine to people 65 years of age and older. This evidence demonstrates high safety and effectiveness of the AstraZeneca vaccine in older adults, particularly against severe COVID-19 disease and hospitalization.





- Health Canada was informed by the European Medicines Agency (EMA) on March 8 that Austria stopped using a batch of the AstraZeneca COVID-19 vaccine after one person was diagnosed with multiple thrombosis and died 10 days after vaccination.
- A second individual was hospitalized with a pulmonary embolism (i.e., blockage in arteries in the lungs) after being vaccinated. The second individual is recovering.





 Health Canada was notified on March 11 that an additional fatal report following vaccination had been received in Europe. Several countries in Europe, including Denmark, have temporarily paused the use of specific batches or of the AstraZeneca vaccine in their vaccination campaigns as a precautionary measure, pending the outcome of the EMA's investigation.





• The <u>United Kingdom Medicines and Healthcare products</u>
Regulatory Agency issued a response on March 11
indicating that, following 11 million doses of the
AstraZeneca vaccine administered in the U.K., they had not received more reports of blood clots than expected in the vaccinated population.





- EMA concluded preliminary review on March 18
- Vaccine is not associated with an increase in the overall risk of thromboembolism
- No evidence of problems with particular batch
- Benefits far outweigh the risks





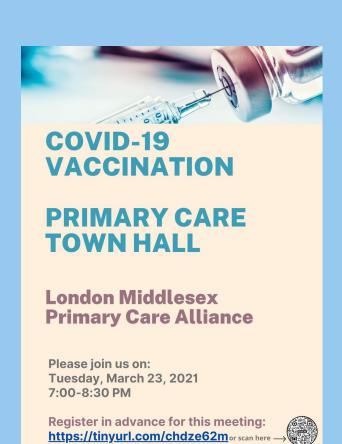
### Take the first vaccine you can!



## Primary Care Vaccination Strategies

Dr. Mario Elia Dr. Julie Clarke

### **Breakout Groups**





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## Questions & Answers



## Next Steps / Closing

Dr. Phil Vandewalle