

Prioritization Guidance for Vaccinations – Renfrew County District Health Unit as of: Draft February 18, 2021

Immediate Priority for vaccinations - as vaccines become available: In Order of sub priority: 1 then 2 then 3

1. First sub-priority:
 - Staff and essential caregivers LTC homes;
 - High risk RH residents, staff and essential caregivers (see definition in the appendix)
 - First nation elder care home resident, staff and essential caregiver
2. Second sub-priority:
 - ALC patients in hospital awaiting LTC, RH or senior congregate care – i.e. shared living arrangement – see definition in appendix
 - Highest priority health care workers (HCW) – see definitions below
3. Third sub-priority:
 - Very High Priority HCW – see definitions below

Next Priority once Immediate Priority list above has been completed:

- Adults 80+
- All other RH residents, staff and essential caregivers (see definition in appendix)
- HCW High priority
- All indigenous residents
- Adults receiving chronic home care

Health Care Workers – Who can be tested by Priority:

For further clarification please refer to the Ministry of Health's **COVID-19: Guidance for Prioritizing Health Care Workers for COVID-19 Vaccination Guidance Document - Version 2.0**, February 9, 2021 (attached – Appendix B)

Note: when developing lists of eligible individuals/staff for vaccination – every organization should prepare a list of additional people who could be vaccinated if there are spare doses of vaccine left. That list would be compiled using staff or individuals who would fall into the next Priority listing. I.e. – if vaccinations are occurring for the Highest Priority group (#1), the contingency list for unused vaccines would be comprised of individuals from the Very High Priority group (#2), randomly selected to ensure fairness and equity of distribution.

Health Care Worker PRIORITIZATION LEVELS:

Note: Health care workers are anyone that is in the healthcare environment including students/volunteers. Non-Frontline providers are those working exclusively remotely or solely in a non-patient facing areas within health care settings.

Highest Priority: #1

Includes - Front line, patient facing Health Care Workers including custodial, security and reception staff):

Hospital (Renfrew, Arnprior, Deep River, Pembroke & Barry's Bay to identify HCW)

- Critical care
- ER/Urgent care departments
- COVID 19 units
- Coe blue teams and rapid response
- General internal med and anyone responsible for COVID 19 patients

COVID -19 response – Karen/Mathieu to identify eligible HCW

- COVID 19 assessment centers
- Teams supporting outbreak response
- COVID 19 vaccination clinics/mobile imm teams
- Mobile testing teams
- C19 lab services, C-19 isolation centres

Medical first responders – Mathieu to identify eligible HCW

- ORNGE, paramedics, firefighters providing medical response

Community health workers serving specialized populations – eligible staff to be identified by individuals noted:

- Needles exchange/supervises consumption – **Andrew Keck**
- Indigenous CHC's/FHTs – **Derek Frew**
- CHCs serving those with highest burden C-19 – N/A
- Highly critical health care workers in rural/remote/isolate ie sole practitioner – N/A
- Home and community workers caring for seniors in congregate living, or providing hands on care to covid 19 patients in community - ****Andrew Keck via Home and Community Care**

Very High priority HCW - #2

- Acute care and other hospital settings – **Hospitals to identify**
 - All HCW in acute care/hospital settings who were not in “highest priority” grouping and who still work within the hospital setting - in and out of patient areas (i.e. – not working remotely)
- HCW working in congregate care not identified in highest priority -**Andrew Keck to identify eligible individuals**
- CHCs/FHTs, other community care, adult day programs for seniors – **Andrew Keck to identify eligible individuals**
- Any other health care service providing care to indigenous- **Derek Frew to identify eligible individuals**
- Community care: birth centres, community specialists, dentistry, primary care, pharmacies, obs/gyn, midwifery, ENT, RT, WIC – **Hospitals/Region leads to work with local organizations**
- Lab services – **Hospitals/Region leads to identify eligible individuals**

High priority HCW and others - #3 – Hospitals/Region leads to identify eligible individuals

- Community care lower risk exposure (MH, addictions, developmental services)
- Community DI, campus health, daycare/school nursing, dietary, opticians, podiatry, audiology, naturopath, SW, sexual health clinic
- Non acute rehab: Chiropractic, OT, Physio, Psychiatry, psychology, Massage therapy , acupuncture, public health

Moderate priority - #4

HCW working remotely or exclusively within non patient facing parts of the health care

APPENDIX A:

Definitions:

Essential Caregivers:

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 (e.g. supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision-making).

- Caregivers must be at least 18 years of age.
- A maximum of 2 caregivers may be designated per resident at a time. The designation should be made in writing to the home. Homes should have a procedure for documenting caregiver designations. The decision to designate an individual as a caregiver is entirely the remit of the resident and/or their substitute decision-maker and not the home.
- A resident and/or their substitute decision-maker may change a designation in response to a change in the:
 - resident's care needs that is reflected in the plan of care
 - availability of a designated caregiver, either temporary (for example, illness) or permanent
- Examples of caregivers include family members who provide meaningful connection, a privately hired caregiver, paid companions and translators.

Congregate Care Senior sites:

Congregate senior living is a **housing** concept that offers **seniors** a setting in which they live in separate **apartments** but share some common spaces — such as kitchens, dining rooms, and activity areas — with other residents.

APPENDIX B:

Ministry of Health's **COVID-19: Guidance for Prioritizing Health Care Workers for COVID-19 Vaccination Guidance Document** - Version 2.0, February 9, 2021



Prioritization for
HCWs V2.0 2021-02-0