



# COVID-19 Vaccination Plan for Chatham-Kent 2021

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# Contents

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COVID-19 Vaccination Plan for Chatham-Kent .....	3
Introduction .....	3
Purpose .....	3
Planning Assumptions.....	3
Governance .....	5
Planning .....	5
Operations .....	5
Logistics .....	5
Finance and Administration .....	5
Communications .....	6
Vaccination Roll-Out .....	6
Mass Immunization Clinics .....	7
Mobile Outreach.....	7
Health Care Partners Strategy .....	8
Supplies Management and Distribution .....	8
Storage and Handling.....	8
Cold Chain .....	8
Storage and Handling during Transportation .....	9
Physical Security .....	9
Recruitment of Human Resources .....	9
Finances, Documentation and Reporting .....	9
Prioritization of Populations.....	10
First Nations, Metis, Inuit Peoples .....	10
Adult Recipients of Chronic Home Care .....	10
People Experiencing Homelessness .....	11
Low German Speaking Community .....	11
Newcomers .....	11
Agri-Farm Workers .....	11
Communications and Community Engagement.....	11
Evaluation .....	12

# COVID-19 Vaccination Plan for Chatham-Kent

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## Introduction

The Ontario Public Health Standards mandate Chatham-Kent (CK) Public Health to provide routine immunization programs and respond to pandemics and large-scale community outbreaks. The Province of Ontario has issued a 3 Phase Plan for COVID-19 vaccine roll-out across the province.

In alignment to this plan, CK Public Health assumes overall responsibility for the COVID-19 mass vaccination program in Chatham-Kent.

## Purpose

CK Public Health in partnership with the Chatham-Kent Health Alliance (CKHA), Chatham-Kent Emergency Medical Services (EMS), the Chatham-Kent Ontario Health Team (CKOHT) and other community partners will:

**By September 2021 the Chatham-Kent Vaccination Team will vaccinate all residents in Chatham-Kent who want to, and are able to be vaccinated.**

## Planning Assumptions

CK's total population is estimated at about 106,000, with Chatham being the most populated city (~44,000) in a mix of urban centres, hamlets, and rural areas. Given rurality, transportation is a common barrier. CK has a greater percentage of older adults compared to the province and the 65 and older group has continued to grow, making up nearly a quarter of the total population (over 24,000 people). The number of people age 16 and older is estimated to be about 90,000. Rural areas across the southeast of CK have the highest proportions of people 65+.

There are retirement homes and long-term care (LTC) homes in the most populated areas of CK. Seven LTC homes have over 800 residents, and are supported by over 1100 staff. 13 retirement homes have nearly 800 residents, and are supported by nearly 600 staff. There are also about 50 group home settings across CK.

Three family health teams (FHT) consist of health professionals and sites across most areas of CK, and there are about 65 family physicians with most attached to these FHT. There is also a CK Community Health Centre (CHC) with main locations operating out of CK's most urban areas. The CKHA hospital has a main site in Chatham and a secondary site in Wallaceburg.

There are about 75 locations that store publicly-funded vaccine, including nearly 30 pharmacy locations across CK.

The population is largely English speaking, and a small part of CK is a French Designated Area. Compared to the province, CK has a lower proportion of the population identifying as Indigenous (4%), with one Indigenous reserve (Delaware First Nation) located within, and another (Walpole Island) that borders CK. There is also a lower proportion of the population identifying as a visible minority (5%) or an immigrant to Canada (9%) compared to Ontario overall.

CK has higher proportions of lone-parent families, household incomes are lower compared to the province and about one in five people live in low income households. Residents have lower levels of education compared to the province, and a large portion of the population are in occupations in manufacturing, sales and service, and agriculture – this has implications for the number of people working in essential roles during the pandemic, where employment conditions put people at heightened risk.

Socio-economic factors vary across the municipality with some communities facing a higher degree of material deprivation than others. Although numbers are not highly accurate as not all workers are tracked, approximately 1300 temporary foreign workers come to CK each year and nearly 200 seasonal housing facilities exist across the farming operations in CK.

COVID-19 outbreaks have been most significant in CK's agriculture and manufacturing industry. Newcomers in the service industry or who live in crowded housing, as well as Low German speaking populations and those in group home settings have also been particularly vulnerable.

Local immunization coverage rates for CK children have exceeded rates for the province overall for all publicly-funded childhood vaccines, with especially high coverage rates for diphtheria, tetanus, polio, pertussis and varicella. Certain priority groups experiencing lower immunization coverage rates would benefit from more targeted programming. Flu immunization coverage has ranged around 30% with a higher proportion that showed intent for the current flu season, and just over half of adults intend to get the COVID-19 vaccine – with hesitancy largely related to concerns about safety and efficacy.

A number of assumptions have been made in developing this plan.

- COVID-19 will continue to circulate in the community during the vaccination campaign.
- CK Public Health will continue essential public health programs as outlined in its business continuity and pandemic plans.
- Vaccine supply will be variable but will become more readily available over time.
- There are approximately 90,000 Chatham Kent residents over the age of 16. To achieve the vaccine coverage rate as set out by the Province, CK Public Health will need to immunize 67,500 community members.
- Vaccine hesitancy exists in CK. CK will implement a communication plan and health promotion strategies to specifically address this. CK Public Health will be able to support the storage and distribution of the various vaccines.

- CKHA will not be used for mass vaccination clinics.
- CK Public Health and CK EMS will partner to provide vaccines in the mobile model.
- The mobile model will be used to provide accessibility for vulnerable populations and other prioritized groups.
- CK Public Health, CKHA and CKOHT partners will provide vaccinations in the community mass immunization clinics.
- Healthcare providers and pharmacies will play a key role in vaccinating the public.
- Stakeholders will have a voice in implementing the vaccine prioritization protocols.
- Maintenance plans will be put in place for LTC homes and retirement homes to administer vaccines to new residents.

## Governance

Using an Incident Management System model, a Vaccination Team has been developed and the project is being co-lead by CKHA and CK Public Health.

## Planning

Planning will encompass all aspects of the vaccine rollout strategy based on vaccine allocations and prioritized groups for vaccination.

- Vaccine receipt and delivery including storage, mobilization and monitoring
- Projections for vaccine allocations and monitoring uptake
- Leveraging community partners in the rollout of the vaccine
- Providing service delivery models that provide access to residents across CK
- Scheduling system, data input and tracking for doses delivered using the COVAX system

## Operations

Operations will support plans for the delivery of vaccinations including mobile teams, healthcare provider clinics, pharmacies, and immunization clinics. This role includes administrative registration, COVID-19 screening, security, personal protective equipment (PPE), staff on-boarding, and COVAX training.

## Logistics

Logistics will outfit the immunization sites including ancillary supplies, inventory management, information technology requirements, staffing, and transportation needs of the public.

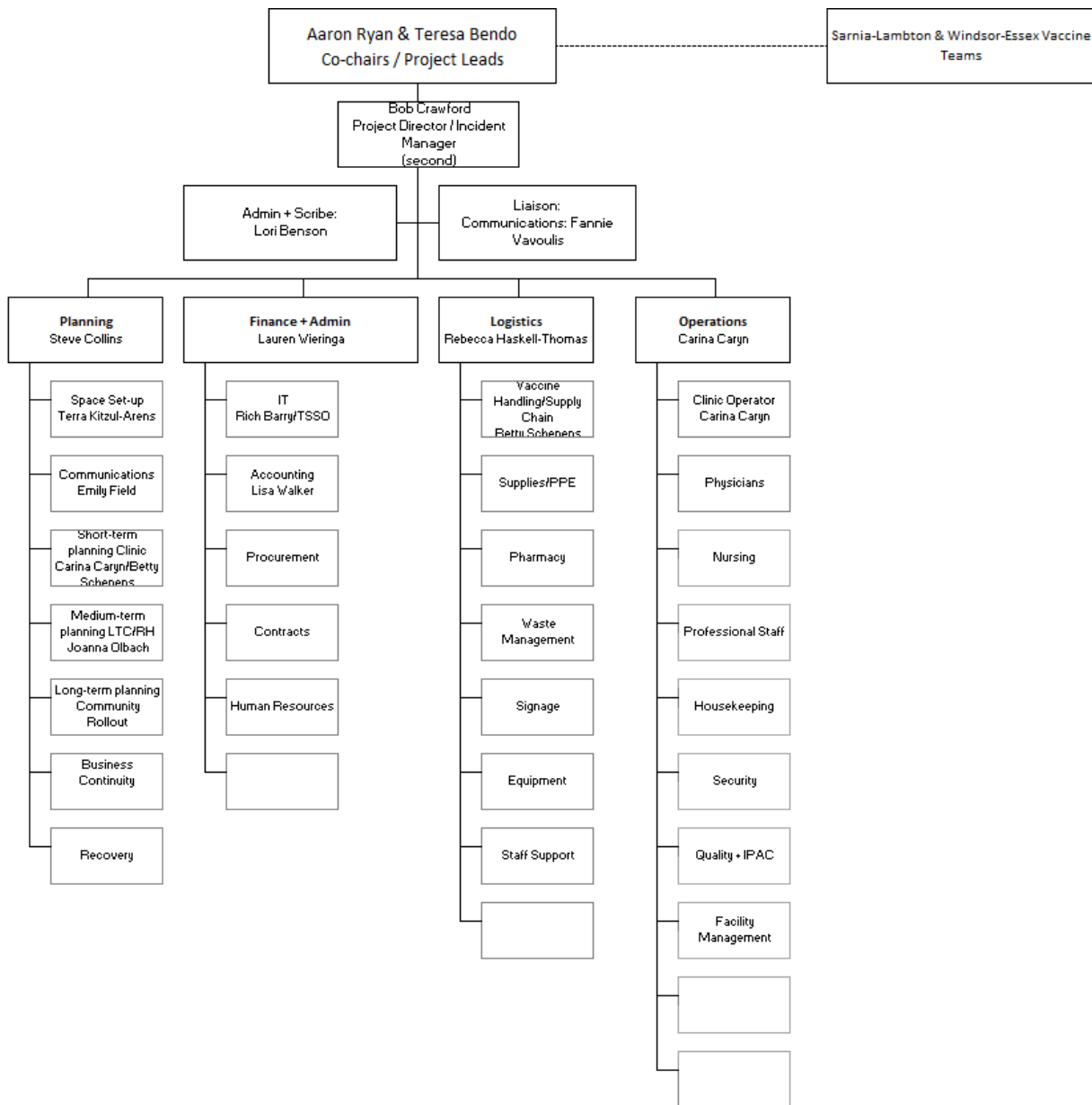
## Finance and Administration

The Vaccination Team will track its costs related to the COVID-19 vaccine rollout and is accountable to the Board of Health and the Ministry of Health for COVID-19 expense submissions. Other community partners will be responsible for managing their own finances and accountability agreements.

## Communications

Communications will lead communications related to the vaccination rollout in CK. Regular updates will be provided to the community including local vaccination data. Vaccine hesitancy and misinformation will be addressed through traditional and social media platforms.

Figure 1. IMS Organizational Chart



## **Vaccination Roll-Out**

The Vaccination Team has contemplated a hub and spoke model to delivering vaccines to the residents of CK. This includes: one fixed mass immunization clinic, a mobile team that will provide on-site immunizations, and smaller pop-up clinics in outlying communities. Later additions to this model will include local pharmacies and health care providers (in-office).

### **Mass Immunization Clinics**

The Vaccination Team is currently setting up a fixed clinic in Chatham where large volumes of health care workers and the general public will receive vaccines. CK is a large rural geographic area where transportation is a significant barrier to accessing services. Additional smaller pop-up clinics will be contemplated in smaller CK communities to provide better accessibility.

The Vaccination Team has utilized CK Public Health's Mass Immunization Plan, the playbooks from Ottawa Public Health and University Health Network (UHN), and solicited feedback from its colleagues in Windsor and London, to plan this mass vaccination clinic. Transportation options are also being explored.

CK Public Health's Mass Immunization Plan identifies possible pop-up clinic locations throughout Chatham- Kent.

### **Mobile Outreach**

A team made up of staff from CK EMS and CK Public Health will provide a nimble outreach service to groups that have unique needs (i.e. congregate living, shelter, homeless, chronic home care clients, urban Indigenous). These approaches will be co-created by this team and the groups they are to serve. Staffing considerations for these clinics will be based on the population to be served, location, and available supports.

The Social Determinants of Health nurse from CK Public Health will act as a subject matter expert and partner with the situation tables of the United Way to facilitate equitable access to vaccinations for these groups.

The first priority, LTC home and retirement home residents, staff, and essential caregivers will be immunized at the homes.

### **Pharmacy Strategy**

Pharmacies currently have the ability and capacity to administer vaccine on-site. CK has 28 pharmacies that currently administer influenza vaccinations. A Pharmacy Lead will join the Vaccination Team to support the development of this part of the Team's plan. There are a number of issues for the Team to consider:

- Ensure refrigerator inspection is current, and explore freezer requirements
- Supply an inventory of needles, syringes, and PPE
- Provide training in the Ministry's COVAX system

## **Health Care Partners Strategy**

The Vaccination Team will reach out to the existing healthcare network of the CKOHT to develop a strategy for health care partners to provide vaccinations in-house. With an already established relationship with patients, physicians and nurse practitioners are well positioned to immunize in their offices, on-site clinics, family health teams, and community health centres. A Physician Lead will join the Vaccination Team, to support the development of this part of the Team's plan. There are a number of issues for the Team to consider:

- Ensure refrigerator inspection is current, and explore freezer requirements
- Supply an inventory of needles, syringes, PPE
- Provide training in the Ministry's COVAX system
- Use existing computer hardware and electronic medical record for documentation
- Ensure processes to ensure compliance with subsequent doses
- Ensure site plans provide safe flow of patient traffic

## **Supplies Management and Distribution**

The Logistics team of the Vaccination Team is responsible for the logistics of both fixed sites and mobile services. The Vaccination Team has utilized the CK Public Health's Mass Immunization Plan to develop the supplies management and distribution plan.

## **Storage and Handling**

CK Public Health pays strict attention to maintaining cold chain requirements when vaccines are stored and distributed. The Vaccine Storage and Handling Protocol, 2018 is followed by all health care providers in CK who handle publicly funded vaccines. CK Public Health conducts annual cold chain inspections at all local health care providers.

## **Cold Chain**

The Pfizer- BioNTech COVID-19 vaccine and Moderna COVID-19 have stringent freezer storage requirements.

A Pfizer vaccine freezer has been installed, set-up, and equipped with a back-up power source and sump pump have been installed. The freezer is ready for the Team's first delivery of vaccine.

CK Public Health was notified by the Ministry of Health that it can expect a freezer capable of storing the Moderna vaccine during the week of January 18<sup>th</sup> and we await confirmation. CK Public Health has prepared the space and the electrical capacity for the installation of this freezer.



## **Storage and Handling during Transportation**

CK Public Health and CKHA have developed a plan to ensure cold chain requirements are met and how the vaccine will be stored during transport. Storage and handling procedures are in place for the LTC homes and retirement homes vaccinations. Storage and handling procedures at off-site clinics and health care facilities will be developed and comply with public health requirements and manufacturer guidelines.

## **Physical Security**

The Pfizer-BioNTech freezer has been placed in a secure site for storage of the vaccine. It is stored in a locked room where swipe-card access is limited to authorized personnel only and monitored. Used sharps are stored in a 'dirty' room and a plan is being put in place for safe removal of sharps at the clinics. Storage areas have 24/7 security.

## **Recruitment of Human Resources**

The Human Resources and Organizational Development (HROD) division of the Municipality of Chatham-Kent, in partnership with the Vaccination Team and the CKOHT, will coordinate the recruitment of staff for mass immunization. The Vaccination Team is currently determining its staffing requirements and will use a multi-pronged approach to staffing, potentially using:

1. Current staff from CK Public Health, CK EMS Community Para medicine Program, and CKHA RPN staff pool
2. Retired staff from CK Public Health and CKHA
3. Current staff of members of CKOHT
4. Members of Regulatory Colleges able to vaccinate
5. Public recruitment

Orientation and training programs are being developed to equip staff to safely, compassionately and effectively provide vaccinations and operate the clinics.

## **Finances, Documentation and Reporting**

CK Public Health's Board of Health is responsible for the efficient and effective use of Ministry and municipal funding as outlined in the Organizational Standard and Accountability Agreement with the Province. Expenses will be tracked separately as requested by the Ministry.

Similarly CK Public Health will ensure that it has systems in place to meet provincial and local surveillance and monitoring requirements which includes vaccine safety surveillance, adverse event, number of people vaccinated. A contingent of CK Public Health staff have been trained on the COVAX system in preparation for vaccinating in the near future.

CKHA will record all expenses of the vaccination plan in order to be able to report to funders and organization boards and leadership.

## Prioritization of Populations

CK Public Health defines priority populations as those who may be economically or socially disadvantaged and/or those who carry (or can be assumed to carry) the greatest population burden of disease or poor health outcomes. The following priority populations are a strong consideration for public health vaccination programs and services within the local context:

- First Nation communities (Walpole Island which jurisdictionally falls outside of CK, but is closely connected to the community of Wallaceburg within CK, and Delaware Nation at Moraviantown which falls within CK's health unit catchment area) and urban Indigenous peoples living in communities throughout CK.
- Temporary foreign workers supporting CK's agricultural industry, newcomers, and immigrants who require access to public health programs and services.
- Low German Speaking populations who require a tailored approach to improve accessibility and effectiveness considering linguistic and cultural barriers.
- Those in social or geographic isolation who face transportation barriers and other health service access issues, those without a primary health care provider, and populations that are transient and under-housed.
- Families/individuals/areas living in low income or who otherwise experience material deprivation or are impacted by social risk factors such as income, employment, gender, stigma
- Older adults, particularly those living in low income.

The Vaccination Team will prioritize sub-populations within each phase of the Province's 3 Phase COVID-19 Immunization Plan. The Team will work with the key partners below to tailor communications plans for these populations.

### **First Nation, Metis, Inuit Peoples**

Key Partners: United Way Homelessness/Indigenous situation table, CKOHT Diversity & Equity Workgroup, Ska:na Family Learning Centre, Southwest Ontario Aboriginal Health Access Centre (SOAHAC), Delaware First Nation

Strategies: on-site vaccination clinic, mobile teams, health care provider, mass immunization clinic

### **Adult Recipients of Chronic Home Care**

Key Partner: Home & Community Care (LHIN)

Strategies: health care provider, immunizations clinic, home visit by Community Paramedic or other health care provider

### **People Experiencing Homelessness**

Key Partners: CK Employment & Social Services (Emergency Rapid Rehousing Program), Hope Haven, ROCK Missions, United Way Indigenous/Homelessness Situation Table

Strategies: on-site immunization clinic, mass immunization clinic, community visits by mobile team

### **Low German Speaking Community**

Key Partners: CK CHC

Strategies: on-site clinic, health care provider, pharmacy

### **Newcomers**

Key Partners: Local Immigration Partnership. Adult Language & Learning

Strategies: mobile teams/ clinics, health care providers, pharmacy

### **Agri-Farm Workers**

Strategies: mass immunization clinic, mobile teams on-site

## **Communications and Community Engagement**

CKHA and CK Public Health will work together to implement the communications and community engagement strategy for the vaccine roll-out. The objectives include:

- Ensure public confidence in the safety of the vaccine
- Combat misinformation with data from trusted sources
- Communicate the actions of how residents can be vaccinated (who, what, when, where, how, and why)
- Help the public understand the prioritization and sequencing of vaccine administration

The overarching principles that guide the communications and community engagement include:

- Accessible
- Transparent
- Timely
- Culturally appropriate
- Collaborative
- Community informed

CK Public Health has a web page dedicated to COVID-19 Vaccine information <https://ckphu.com/covid-19-vaccine/> that is updated as new information and resources are developed.

A variety of other communications methods are being used: regular media briefings with Medical Officer of Health and CHKA CEO; radio and newspaper ads; social media including Facebook, Twitter, Instagram, YouTube, Website; COVID-19 information phone line and email address; outdoor and public spaces media (i.e. billboards, bus shelters); formal and informal community leaders; and local elected officials, among others.

Communications will be provided in multiple languages. Translation and cultural interpretation services will be readily available on site at the clinics.

Coupled with this communications plan, CK Public Health is launching a community-wide “I got/ am getting vaccinated because...” campaign to combat vaccine-hesitancy.

## Evaluation

CK Public Health’s Foundations Standard team will work with the Vaccination Team to evaluate the process and outcomes of the plan. The Team will focus on the efficiency and effectiveness of the roll-out. In addition, the Vaccination Team will take a continuous quality improvement or Plan-Do-Check-Act approach to implement improvements in real-time.