A message to Families and Substitute Decision Makers,

In follow-up to the letter sent to SJLC Families and Substitute Decision Makers (SDM's) on Friday, August 20th advising of the COVID-19 vaccination third dose clinic scheduled to take place on Thursday, August 26, we have received new information that may affect a resident's ability to receive the third dose on this date.

Yesterday, the Ministry of Long-Term Care issued a communication advising long-term care homes that consent for the third dose vaccination is required. Today, SJLC leaders have worked diligently to contact residents or their SDM's to obtain the consent necessary to administer the third dose of the COVID-19 vaccine on Thursday. Calls will continue tomorrow if needed. To help residents or their SDM's make an informed decision about residents receiving the third dose of the COVID-19 vaccine, we have attached two Ministry of Health documents that may be helpful:

- COVID-19 Vaccine Information Sheet
- Frequently Asked Questions (FAQ): Third Doses of COVID-19 Vaccine for Long-Term Care Home and Higher Risk Licensed Retirement Home Residents

We realize that we may not be able to complete all consents in the short time until the scheduled onsite vaccine clinic. Residents for whom we have received consent for the third dose will receive the vaccine on Thursday. In circumstances where an SDM's consent is not received prior to Thursday, SJLC staff will administer the third dose vaccination after consent requirements have been completed.

Please direct any questions regarding third dose vaccinations to Katrina Marques at kmarques@sjltc.ca.

Thank you,

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# Third Doses of COVID-19 Vaccine for Long-Term Care Home and Higher Risk Licensed Retirement Home Residents

## FAQs

**August 23, 2021**

1. **Who is eligible for a third dose?**
   As announced on August 17, 2021, residents in high-risk congregate settings (i.e., long-term care (LTC) homes and higher-risk licensed retirement homes) are eligible for a third dose, as well as individuals who are severely immuno-compromised.

2. **After what interval of time following a second dose are residents of LTC homes and higher risk licensed retirement homes eligible for a third dose?**
   Residents of LTC homes and higher-risk licensed retirement homes will be eligible to receive their third dose at least five months after their second dose. There is no upper limit to the dosing interval for third doses.

3. **Which licensed retirement homes are considered "higher-risk"?**
   Licensed retirement homes that are co-located with long-term care homes or provide dementia care services are considered higher-risk.

4. **Which vaccine should residents of LTC homes and higher-risk licensed retirement homes be receiving for their third dose?**
   If readily available, third doses should be the same product as second doses, but the mRNA vaccines can be interchanged if needed for operational reasons.

5. **Why do residents of LTC homes and higher-risk licensed retirement homes need a third dose?**
   Based on the recommendation of the Chief Medical Officer of Health and health experts, the province will begin offering third doses of the COVID-19 vaccine to those at highest risk, providing them with an extra layer of protection against the Delta variant in light of evidence that shows the immune response in long-term care home residents wanes several months after receiving two COVID-19 vaccine doses. This includes LTC homes and higher-risk licensed retirement homes to ensure the safety of senior populations in higher-risk congregate settings.

6. **Are LTC home and higher-risk licensed retirement home staff or essential caregivers that are seniors eligible for a third dose? What about residents in other licensed retirement homes who are immunocompromised?**
   Only residents of LTC homes and higher-risk licensed retirement homes are eligible for a third dose at this time, unless the staff person, essential caregiver, or resident

of a licensed retirement home (not deemed to be higher risk retirement home) is eligible as a result of being severely immunocompromised. The evidence does not currently support or warrant third doses in the general population.

7. **Who is administering third doses for LTC home and higher-risk licensed retirement home residents?**
   PHUs should work collaboratively with LTC homes and higher-risk licensed retirement homes to set up operators for independent administration of COVID-19 vaccines where such capacity exists. Where independent administration by the home is not possible, PHUs are responsible for identifying the approach for administering third doses in homes (e.g., through the use of mobile teams). Third doses can start being administered as soon as the home, PHU or mobile clinic is ready.

8. **Can the flu vaccine be given at the same time as the COVID-19 vaccine?**
   No, the flu vaccine and COVID-19 vaccine cannot be administered at the same time. If a person receives a COVID-19 vaccine, four weeks must lapse before a flu vaccine is administered. If a person receives a flu vaccine, two weeks must lapse before a COVID-19 vaccine is administered. This is to ensure that any possible side effects from the COVID-19 vaccine can be monitored and assessed appropriately.

9. **Are patients designated Alternate Level of Care (ALC) who are waiting to be transferred to LTC homes eligible for a third dose?**
   Yes, patients designated ALC that are waiting to be transferred to LTC homes are eligible for a third dose and can receive their dose from the hospital. In addition, patients designated ALC who are waiting to be transferred to a LTC home from any licensed retirement home (i.e., the retirement home does not need to be deemed higher risk) are also eligible for a third dose.

10. **Are seniors living in Assisted Living facilities eligible for a third dose?**
    Yes, seniors living in assisted living facilities co-located with a LTC home are eligible for a third dose.

Ontario

Ministry of Health

# COVID-19 Vaccine Information Sheet

Version 10.0 – August 17, 2021

**Highlights of changes**

- New guidance on when a third dose is recommended (page 2)

This document provides basic information only and is not intended to provide or take the place of medical advice, diagnosis or treatment, or legal advice.

To date, the following COVID-19 vaccines have been authorized for use in Canada by Health Canada: Pfizer-BioNTech COVID-19 vaccine, Moderna COVID-19 vaccine, AstraZeneca COVID-19 vaccine, COVISHIELD COVID-19 vaccine, and Janssen COVID-19 vaccine. Currently, the Pfizer-BioNTech vaccine is the only COVID-19 vaccine authorized by Health Canada for children aged 12 and up.

All vaccines for COVID-19 authorized for use in Canada have been evaluated by Health Canada, using rigorous standards. Health Canada will continue to monitor all vaccines to make sure they are safe and effective.

**Please read this information sheet carefully and make sure all your questions have been answered by a health care provider before you get the vaccine.**

## What is COVID-19?

COVID-19 is an infection caused by a new coronavirus (Severe Acute Respiratory Syndrome Coronavirus 2 - SARS-CoV-2). COVID-19 was recognized for the first time in December 2019 and has since spread around the world to cause a global pandemic. COVID-19 is mainly passed from an infected person to others when the infected person coughs, sneezes, sings, talks or breathes. It is important to note that infected people can spread the infection even if they have no symptoms. Symptoms of COVID-19 can include cough, shortness of breath, fever, chills, tiredness and loss of smell or taste. Some people infected with the virus have no symptoms at all, while others have symptoms that range from mild to severe.

Children who get infected with COVID-19 typically experience mild symptoms. However, some children can get very sick requiring hospitalization. Children can also get a serious medical condition called "Multisystem Inflammatory Syndrome in Children (MIS-C)." Like adults, children can experience more serious, longer-lasting symptoms that can affect their health and well-being and can transmit the virus to others if they are infected, even if they don't feel sick. In very rare cases, the virus can also cause death in children.

## How do the vaccines protect against COVID-19?

All vaccines work by presenting our body with something that looks like the infection so that our immune system can learn how to produce its own natural protection. This natural protection then helps to prevent future illness if you come into contact with the COVID-19 virus in the future. **You cannot get COVID-19 from the vaccine.**

More detailed information on how COVID-19 vaccines provide protection can be found on Public Health Ontario's (PHO) COVID-19 Vaccines webpage and What You Need to Know About mRNA Vaccines and What You Need to Know About Viral Vector Vaccines.

**All COVID-19 vaccines authorized for use in Canada are effective at protecting against symptomatic, lab-confirmed disease.** In large clinical trials/studies where people were given the vaccines, all of the vaccines worked very well to prevent people from becoming sick with symptomatic, lab-confirmed COVID-19. It is important that you receive all recommended doses of the vaccines. Longer-term protection against COVID-19 is not achieved until after all recommended doses of vaccine are received. **All of the COVID-19 vaccines authorized for use in Canada are highly effective at preventing severe outcomes including hospitalizations, ICU admission, severe disease and death.**

The Pfizer-BioNTech vaccine has been demonstrated to be highly effective at protecting against COVID-19 for individuals 12 years and over.

## When is a third dose recommended?

The COVID-19 vaccines provide strong protection against illness and severe outcomes, and at this time third doses of vaccine are not recommended for the general population.

Certain populations may demonstrate a suboptimal immune response to a two-dose COVID-19 vaccine series due to underlying health conditions. There is also some evidence to indicate that the vulnerable elderly population develop less of an initial immune response and exhibit more rapid waning of antibody. In these populations, a third dose of the current mRNA COVID-19 vaccines is recommended as described in the COVID-19 Vaccination Recommendations for Special Populations.
It should be noted that there is limited evidence on the use of third doses of mRNA COVID-19 vaccines but the recommendation is based on expert opinion of the potential benefits for these populations.

## Who can receive these vaccines?

A complete vaccine series should be offered to individuals without contraindications to the vaccine and in currently identified priority groups.

- The Pfizer-BioNTech COVID-19 vaccine is currently authorized for individuals 12 years of age and older.
- The Moderna COVID-19 vaccine is currently authorized for individuals 18 years of age and older.
- The AstraZeneca COVID-19 vaccine and COVISHIELD is currently authorized for individuals 18 years of age and older. At this time, Ontario has paused the rollout and administration of first doses of AstraZeneca/COVISHIELD COVID-19 vaccines. At present, this vaccine is being offered to individuals 40 years of age and older for second doses or with referral from an allergist/immunologist to individuals with allergies to the mRNA vaccine components.

You will be counselled on the benefits and risks of the vaccine you are recieving prior to receiving the vaccine.

If you have experienced major venous and/or arterial thrombosis (blood clot) with thrombocytopenia (low platelets) following vaccination with any vaccine **you cannot get** the AstraZeneca/COVISHIELD COVID-19 vaccine.

If you have experienced a previous cerebral venous sinus thrombosis (CVST) with thrombocytopenia or have experienced heparin-induced thrombocytopenia (HIT) **you cannot get** the AstraZeneca/COVISHIELD COVID-19 vaccine.

If you have previously experienced episodes of capillary leak syndrome **you cannot get** the AstraZeneca/COVISHIELD COVID-19 vaccine.

**Before receiving the vaccine, inform the health care provider at the clinic who is providing you with the vaccine if:**

- You are currently feeling unwell or have signs and symptoms of COVID-19.
- You have had a previous allergic reaction to a COVID-19 vaccine or any ingredients in the COVID-19 vaccines, or any other vaccine.
- You were diagnosed with myocarditis or pericarditis following a previous dose of an mRNA COVID-19 vaccine.
- You have any allergies or allergic conditions.
- You are or could be pregnant or are breastfeeding. You can still get your vaccine if you are pregnant or are breastfeeding.
- You are immunosuppressed due to disease or treatment or have been diagnosed with an autoimmune condition.
- You have fainted or became dizzy after receiving a previous vaccine or medical procedure or you have a fear of needles. The healthcare provider may offer supports to assist you, for example, recommending that you receive the vaccine lying down to prevent fainting.
- You have a bleeding disorder or are taking medication that could affect blood clotting. This information will help the healthcare provider prevent bleeding or bruising from the needle at the time of vaccination.
- You have received any other vaccine (not COVID-19 vaccine) in the past 14 days.

The Vaccination Recommendations for Special Populations guidance document provides additional information for people who are breastfeeding or pregnant, have allergies, autoimmune conditions, or are immunocompromised due to disease or treatment. The Vaccination in Pregnancy and Breastfeeding Decision-Making Support Tool can help make an informed decision about COVID-19 vaccination during pregnancy and breastfeeding. If you have questions about whether the vaccine is right for you based on your medical condition, talk to your health care provider.

# Who should delay receiving these vaccines?

- Individuals who have received another vaccine (not a COVID-19 vaccine) in the previous 14 days.

- Individuals with symptoms of an acute illness (e.g., runny nose, sore throat, cough, fever, chills, diarrhea, nausea/vomiting); these individuals should wait until symptoms have completely resolved in order to avoid attributing any complications resulting from the illness to vaccine-related side effects.
- Individuals with symptoms of COVID-19 (e.g., loss of taste or smell, shortness of breath, etc.). To minimize the risk of COVID-19 transmission, if these individuals arrive at an immunization venue, they will be instructed to follow current local public health measures including self-isolation, and be encouraged to get tested.
- Symptomatic and asymptomatic individuals who have been advised to self-isolate due to suspected or confirmed COVID-19 infection or due to close contact with a COVID-19 case should not attend a vaccine clinic and should wait to get their vaccine until their isolation period is over.
- As a precautionary measure, individuals who were diagnosed with myocarditis/pericarditis after a previous dose of an mRNA COVID-19 vaccine (Pfizer-BioNTech or Moderna) should wait to receive their second dose until more information is available. The National Advisory Committee on Immunization (NACI), Public Health Ontario (PHO) and The Ministry of Health continue to follow this closely and will update this recommendation as more evidence becomes available.

## How is the vaccine administered?

The COVID-19 vaccine is given as a needle in the upper arm (into the deltoid muscle).

- NACI recommends that while either an AstraZeneca/COVISHIELD COVID-19 vaccine or an mRNA COVID-19 vaccine product may be offered for the subsequent dose in a vaccine series started with an AstraZeneca/COVISHIELD COVID-19 vaccine, an mRNA COVID-19 product is preferred as a subsequent dose, due to emerging evidence, including the possibility of better immune response, and the safety of heterologous schedules. Regardless of which product is offered, a complete two-dose series is important for protection; the previous dose should be counted, and the series need not be restarted. See COVID-19 Vaccine Information for Individuals who received a first dose of the AstraZeneca/COVISHIELD COVID-19 vaccine for more information.

- NACI recommends that, if readily available, the same mRNA COVID-19 vaccine product should be offered for the subsequent dose in a vaccine series started with an mRNA COVID-19 vaccine. However, when the same mRNA COVID-19 vaccine product is not readily available, or is unknown, another mRNA COVID-19 vaccine product recommended for use in that age group can be considered interchangeable and should be offered to complete the vaccine series. The previous dose should be counted, and the series need not be restarted.

## What are the ingredients in the vaccines?

| **Ingredients** | | **Pfizer-BioNTech** | **Moderna** | **AstraZeneca/ and COVISHIELD** |
|---|---|---|---|---|
| Medical | | • mRNA | • mRNA | • Non-replicating viral vector (ChAd) |
| Non-medical | Lipids | • ALC-0315<br>• ALC-0159 – a polyethylene glycol (PEG)<br>• 1,2-Distearoyl-sn-glycero-3-phosphocholine (DSPC)<br>• Cholesterol | • 1,2-distearoyl-sn-glycero-3-phosphocholine (DSPC)<br>• Cholesterol<br>• PEG2000 DMG SM-102 | • Disodium edetate dihydrate (EDTA)<br>• Ethanol<br>• L-Histidine<br>• L-Histidine hydrochloride monohydrate<br>• Polysorbate 80 |
| | Salts | • Dibasic sodium phosphate dihydrate<br>• Monobasic potassium phosphate<br>• Potassium chloride<br>• Sodium chloride | • Acetic acid<br>• Sodium acetate trihydrate<br>• Tromethamine<br>• Tromethamine hydrochloride | • Magnesium chloride hexahydrate<br>• Sodium chloride |
| | Sugar | • Sucrose<br>• Water for injection | • Sucrose<br>• Water for injection | • Sucrose<br>• Water for injection |

COVID-19 vaccines do not contain eggs, gelatin (pork), gluten, latex, preservatives, antibiotics or aluminum.

It is important to review this list carefully as some people may be allergic to these ingredients, including **polyethylene glycol (PEG), polysorbate 80** and/or **tromethamine**. However, these rarely cause allergic reactions. Polyethylene glycol (PEG) is found in products such as medications, bowel preparation products for colonoscopy, laxatives, cough syrups, dermal fillers, cosmetics, skin creams, toothpaste, contact lenses and contact lens solution. Polyethylene glycol can also be found in food or drinks, but is not known to cause allergic reactions from food or drinks. Polysorbate 80 is found in medical preparations (such as vitamin oils, tablets, and anticancer agents) and cosmetics. Tromethamine (trometamol or Tris) is a component in contrast media, oral and injectable medications.

## What are the side effects of the vaccine?

COVID-19 vaccines, like all vaccines, may cause side effects in both adults and children, although not everyone experiences them and those who do experience them, mostly report mild side effects within the first 1-2 days after vaccination. The most commonly reported side effects after receiving a COVID-19 vaccine are localized reactions including pain, swelling, and colour changes in the skin (e.g. red, purple) at the injection site, tiredness, headache, muscle pain, joint pain, chills, and mild fever. Studies evaluating people who were provided a second dose of Pfizer after a first dose of AstraZeneca COVID-19 vaccine reported increased frequency of short term mild side effects.

Ongoing studies on these COVID-19 vaccines indicate serious side effects found to-date are **extremely rare.** People who have received the vaccine in these studies continue to be monitored for any longer-term side effects.

Clinic staff are prepared to manage a severe allergic reaction should it occur. When receiving a subsequent dose of COVID-19 vaccine, **tell the health care provider administering the subsequent dose if you had any side effects after a previous dose.**

Very rarely, the AstraZeneca and COVISHIELD COVID-19 vaccines have been associated with a rare form of blood clot after vaccination. Doctors are calling this Vaccine-Induced Immune Thrombotic Thrombocytopenia (VITT). These thrombosis (blood clots) have two important features: they typically occur 4 to 28 days after vaccination, and they are associated with low platelets (tiny blood cells that help

form blood clots to stop bleeding). VITT seems to be rare. The rate of VITT is estimated to be between 1 per 26,000 and 1 per 100,000 persons vaccinated with a first dose of an AstraZeneca/COVISHIELD COVID-19 vaccine. The rate of VITT in Canada after a first dose has been estimated to be approximately 1 per 55,000 doses given. At this time international data suggests that after the second dose, the risk of VITT is estimated to be 1 for every 600,000 doses given. These estimates may change as more people around the world receive a second dose and we learn more.

There have been Canadian and international reports of myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the sac in which the heart sits inside of the chest) following vaccination with COVID-19 mRNA vaccines. Cases have occurred more frequently in males than in females, most frequently in adolescents and young adults under the age of 30 and more commonly after the second dose of vaccine. The majority of reported cases have been mild with individuals recovering quickly. Symptoms have typically been reported to start within one week after vaccination**. The National Advisory Committee on Immunization (NACI) continues to strongly recommend that a complete series with an mRNA COVID-19 vaccines be offered** to all eligible individuals in Canada, including those 12 years of age and older. mRNA vaccines continue to be recommended internationally. As a precautionary measure, NACI is recommending that individuals who experienced myocarditis/pericarditis after a first dose of an mRNA COVID-19 vaccine should wait to receive a second dose until more information is available. The National Advisory Committee on Immunization, Public Health Ontario and The Ministry of Health continue to follow this closely and will update this recommendation as more evidence becomes available.This situation is being monitored closely in Canada and internationally.

Very rare cases of capillary leak syndrome, a condition that causes fluid leakage from small blood vessles (capillaries), have been reported following vaccination with AstraZeneca/COVISHIELD COVID-19 vaccine. Symptoms are often associated with feeling faint (due to low blood pressure). Individuals with a history of capillary leak syndrome should not receive the AstraZeneca/COVISHIELD COVID-19 vaccine.

# When should I call my health care provider?

If you experience side effects that are worrying you or do not seem to be going away after a few days, contact your health care provider or seek medical attention. Go to the nearest **emergency department or call 911** if any of the following adverse reactions develop within three days of receiving the vaccine:

- hives
- swelling of the face or mouth
- trouble breathing
- serious drowsiness
- high fever (over 40˚C)
- convulsions or seizures
- other serious symptoms (e.g., "pins and needles" or numbness)

If you have received the AstraZeneca/COVISHIELD vaccine and you develop any of the following symptoms after receiving the vaccine **please seek immediate medical attention**:

- shortness of breath
- chest pain
- leg swelling or pain
- persistent abdominal pain
- skin bruising (other than at the site of vaccination) or petechiae (red or purple spots or blood blisters under the skin)
- sudden onset of severe headaches or persistent or worsening headaches
- blurred vision or double vision
- confusion or seziures
- difficulty speaking or moving a part of the body

If you have received the Pfizer-BioNTech or Moderna vaccine and you develop any of the following symptoms after receiving the vaccine, **please seek medical attention**:

- chest pain

- shortness of breath
- palpitations (pounding or racing heart) or feeling of a rapid or abnormal heart rhythm

You can also contact your local public health unit to ask questions or to report an adverse reaction.

## When should I return for my next dose?

Be sure to return for your next (second or subsequent – if recommended) dose as instructed by the vaccination clinic or the health care provider who provided you with your first dose. It is important that you receive all recommended doses of the vaccine as protection against COVID-19 is not optimal until after all doses of vaccine are received. Bring your immunization record when you come for your subsequent dose. **It is very important that you receive all doses even if you experienced side effects the first time.**

## Who should I contact with any questions?

If you have any questions, please speak with your health care provider or the person providing the vaccine.