

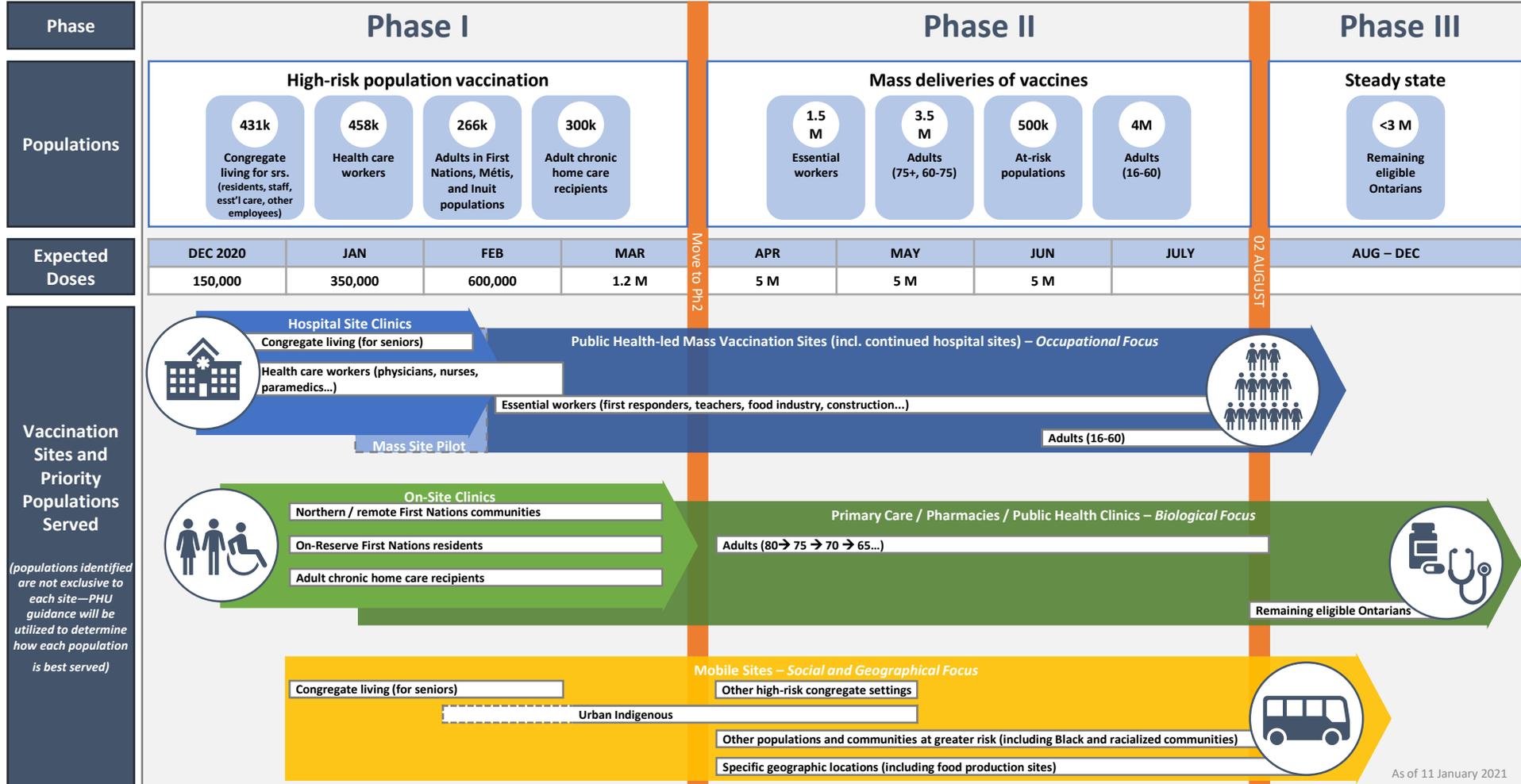
COVID-19 Vaccination Update

TECHNICAL BRIEFING

Wednesday, January 13, 2021

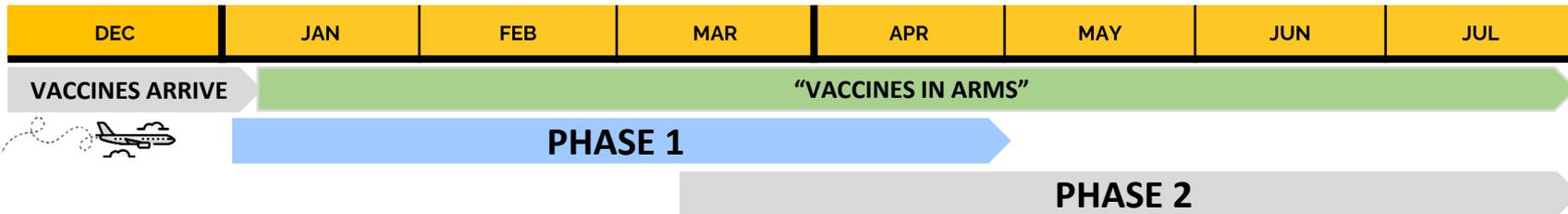
COVID-19 VACCINE DISTRIBUTION PLAN

For deployment of Pfizer and Moderna vaccines



VACCINE DISTRIBUTION: PHASED PRIORITIZATION

- Vaccination rollout phases will be continuous and overlapping – Phase 2 vaccinations likely to begin while Phase 1 is still ongoing (e.g., vaccination of adults >80 may begin in parallel or before low-risk health care worker vaccination).
- Vaccination schedules are intended to be flexible and responsive to ongoing needs, vaccine logistics and risk factors.
- Ontario is ready to receive vaccines whenever they are available, and will shift to Phase 2 priority populations as soon as there are sufficient vaccines provided by the Federal government.



	FIRST VACCINES ARRIVE	PHASE 1	PHASE 2
People	<ul style="list-style-type: none"> • Staff and essential caregivers in LTCHs and high-risk Retirement Homes (RH). 	<ul style="list-style-type: none"> • Residents, staff, essential caregivers, and other employees of congregate living settings that provide care for seniors. • Health care workers. • Adults in First Nations, Metis and Inuit populations. • Adult chronic home care recipients. 	<ul style="list-style-type: none"> • Older adults, beginning with those ≥80 years old and decreasing in 5-year increments over the course of vaccine roll-out. • Those living and working in other high-risk congregate settings. • Essential Workers, beginning with front-line essential workers. • Individuals with high-risk chronic conditions, and their caregivers. • Other populations and communities facing barriers related to the determinants of health across Ontario who are at greater COVID-19 risk (e.g., Black and other racialized populations).
Places	<ul style="list-style-type: none"> • 2 Initial locations • Ramp up to 19 locations 	<ul style="list-style-type: none"> • Specialized vaccination centres (LTCH/RH) • Mobile vaccination sites • Mass vaccination sites 	<ul style="list-style-type: none"> • Mass vaccination sites • Hospitals • Mobile vaccination sites • Pharmacies • Clinics • Primary care • Strategic in-community locations (CHC/AHAC)

PRIORITIZATION REPORT BACK

Alignment with Ethical Framework

Ethical Principle

Rationale

Minimize Harms and Maximize Benefits

- Essential workers, particularly front-line essential workers, are at greater risk of infection and are essential for critical infrastructure.
- Older adults are at increased risk for severe disease and outcomes due to COVID-19.
- Individuals who have high risk medical conditions are at increased risk for severe disease and outcomes due to COVID-19; their caregivers can be key vectors of disease transmission to high-risk populations.
- Those living and working in congregate living settings are at greater risk of infection and, due to socioeconomic factors, are at increased risk of severe disease and outcomes due to COVID-19.
- Other populations who have experienced greater disadvantage from COVID-19 are at increased risk of serious illness and death due to biological, social, geographical, and occupational factors.

Equity

- Groups that have been disproportionately impacted by COVID-19 are being prioritized. Prioritizing groups who have experienced greater disadvantage from COVID-19 due to biological, social, geographical, and occupational factors aims to reduce disparities in illness and death related to COVID-19, as well as disparities in the determinants of health (e.g., congregate living settings) that are linked to risk of illness and death related to COVID-19.

Fairness

- To ensure that vaccines reach all individuals within similarly prioritized groups, including those who are marginalized, the strategy will include active deployment of vaccines through accessible channels (e.g., mobile sites directly into communities, pharmacies/primary care for older populations).

Transparency

- The prioritization approach and the rationale for it will be made publicly available.

Legitimacy

- Populations who are prioritized based on evidence of those most affected by COVID-19, and informed by consultations through various tables (e.g., Indigenous Affairs Ontario, prioritization sub-group).