

## Considering COVID-19 immunization for congregate care settings under investigation or on outbreak

Providing COVID-19 immunization to high risk populations is a priority.

Immunization is encouraged for well individuals (staff and residents) and those not experiencing symptoms as per routine immunization guidance. Given capacity challenges that may be experienced in community clinics it is advised that congregate settings try to arrange site-based COVID-19 immunization for residents and staff, where possible, and if this is your organization's routine practice.

COVID-19 immunization reduces the risk of people contracting COVID-19 and additionally provides the benefit of protecting others including residents we care for and family/friends from COVID-19.

Please follow the [most recent guidance](#) from Alberta Health and the Chief Medical Officer of Health in consultation with your area MOH/designate in administering vaccine in your facility. In particular:

- 1) For facilities under investigation – continue with immunization considering the following:
  - For residents in isolation with COVID-19-like symptoms, immunization should be deferred until the test result is back and negative and the person is otherwise eligible based on the acuity of their symptoms (i.e. no acute severe febrile illness), and the immunizer is able to use appropriate PPE.
  - For residents in quarantine or isolation without symptoms, immunization can be offered in accordance with routine immunization practices while adhering to quarantine requirements and any additional IPC precautions (e.g., continuous masking, eye protection, contact and droplet precautions etc.)
  - For residents not in isolation/quarantine, immunization can be offered in accordance with routine immunization practices including assessing for symptoms that would exclude eligibility at that point in time.
  - Health care professionals should communicate with the resident's most responsible health provider (physician, NP) when a decision is made to not provide immunization due to symptom assessment.
- 2) For facilities on outbreak
  - If the facility is at the beginning of an outbreak, cases are increasing and control measures are in the beginning stages, immunization services should generally be deferred. Consult with the MOH.
  - If the facility is past the peak of new cases and the outbreak is deemed under control, immunization services can proceed applying the same considerations for facilities under investigation above.

When offering onsite immunizations, consider COVID-19 immunization guidance in conjunction with:

- Guidance within CMOH Orders 29-2020 and 32-2020.
- Current risk tolerance for the site.
- Completion of a point of care risk assessment for every interaction.
- Guidance related to essential services, volunteers and health providers (e.g. only attending to one site per day).
- Guidance related to single-site staffing

Vaccine Task Force

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