October 20th Vaccine CoP Video Call 10 am PST / 11 am Mountain and Saskatchewan / 12 pm Central / 1 pm EST / 2 pm Atlantic

Attendance: 31 people in attendance Indigenous Welcome: Clint Barton Opening: Patrick McDougall, Director of Knowledge Translation and Evaluation Attendees: 31 people in attendance

Presenters:

- **Susanne Nicolay** is the Clinical coordinator and Nursing Lead of Wellness Wheel Medical Clinic and Indigenous Community Research Network in Regina. Wellness Wheel is one of the recipients of the COVID-19 microgrants that this project has provided.
- Wellness Wheel started 10-11 years ago by Dr. Stuart Skinner an Infectious disease doctor. He started the clinic when he saw First Nations people finding difficulty coming to Saskatoon for their HIV and HEPC care. They also offer treatments for opioids substitute treatments. They now have partnerships and collaborate with around 15 First Nations communities in Southern and Central Saskatchewan. They have about 110 clinics to support chronic disease and primary health care. They have 6 family doctors, 3 registered nurses and a couple of specialists. They are involved in Harm reduction, HIV, HEPC care, support with COVID testing, vaccinations to Indigenous and underserved population in general.
- Mark Holland is the Day Health Manager at the Dr Peter Centre (DPC), here in Vancouver. He has been instrumental in developing strategies to respond to COVID-19 at the Centre. DPC has a multidisciplinary team that supports 400 members in the West End of Vancouver. DPC offers a safe consumption site and iOAT program, and have supported people throughout the COVID pandemic.

Panel Discussion: COVID-19 Vaccine Passport

- What is the current COVID-19 climate in Saskatchewan/British Columbia? Have numbers of COVID-19 cases gone up?
- **Susanne**: it has been a Gong show, this time last year we had more restrictions and far less cases. Now there's only a mask mandate and Vaccine passports. The numbers at the ICU have gone up beyond what it used to be, and they have taken up all the beds for COVID care. Someone recently could not have surgery to support his heart attack. The equivalent number in Ontario is well over 1,000 ICU beds utilized for COVID. Saskatchewan is a unique province that is geographically challenged. ICU, providers are completely maxed out. Some are being sent to ICUs in Ontario. We have about 300 cases per day. We have lost patients due to COVID. Some are anti-vaxxers because they got sick when they had flu vaccines. There is a lack of willingness to get vaccinated in some communities- most of them can be

classified as privileged white males who work in the mine. We have had to put male RCMP members at the clinics because they are angry at the nurses. We have other concurrent challenges with HIV, HEPC, syphilis and overdose. There are new changes to the social service system, there's a tent city with 30 tents- some children live there in the harsh weather.

- **Mark**: at the DPC, we are focusing on the vaccine passport. We had our first Vaccine clinic in May and in September. We used outreach to support people get vaccinated and held clinics locally. The vaccine passport was implemented here September 13th, this created new requirements for the participant. We've been able to put together people's information to get them their passports, because we have that medical information. In the province it seems cases are coming down. There are some vaccine hesitancies among people. We have also had to deal with losing a lot of nursing and staff members due vaccine mandates.
- The access to the Vaccine amongst folks at DPC has been pretty good, are you still experiencing any challenges in terms of getting access for folks to the vaccine?
- **Mark:** early on in April, there was a bit of frustration. DPC is an HIV/AIDS organization and that was not identified as a high-risk group or prioritized to be vaccinated first. But it has evolved, and we have been able to set up vaccine clinics at the Centre.
- What is the access like in your community?
- **Susanne:** People with HIV were unable to access vaccine earlier in March. We had strong advocates in Regina who pushed for that, and it pushed people living with HIV on the priority list.
- The micro grant that we received through DPC gave us some freedom to feed people and also give gift cards for Tim Hortons, Dollarama, etc. We have given 302 first doses and 215 second doses of vaccine. In the beginning, people were struggling with brand of the vaccine, but that has changed. There is a mandate for people to use their photo ID to access COVID and flu vaccine, the reason is that some privileged individuals are paying other people to get their vaccine. We have not really been asking for the ID's. Eventually we might start going door-to-door to provide accessibility.
- Comments: Some other provinces like Edmonton have experienced the same situations where people have paid others to get the vaccine on their behalf. They have been vaccinating people on-site since March 29, including in permanent and temporary emergency shelters. They have a mobile clinic that they drive around to vaccinate people as they meet them. They have administered 3,520 doses including 2nd and 3rd doses. They got some grants which have helped in giving incentives. Somebody came forward to report and the individual who tried to pay was caught.

- Mark: with the vaccine mandate at the Centre, we had to let one of the Indigenous cultural workers go because he's vaccine hesitant. It was difficult for me as a Manager in this position because I understand there is a deeper mistrust.
- **Susanne**: the health card in Saskatchewan has no photo ID attached. Those in the underserved populations know their health number and if they don't have it, we'll find a way to record it for them. There are many clinics that will refuse service without the hard copy health card. It's difficult to access the Saskatchewan health records. That can be a huge barrier for lots of people.

• To the extent of your knowledge, how is the vaccine passport being rolled out in Saskatchewan/BC?

- **Susanne**: by October 1st we require vaccine passport to access many events. There was an uproar and small protest at the entrance of the game. People had to show proof that they were immunized to go in. There's a mandate for health workers to be immunized by a certain date. If requesting an exemption, you'll need to speak to your Manager and fill documentation pieces. You can have the app on your phone, it takes you to a QR code, or the ehealth on your phone, or the vaccine card. There is flexibility in what proof to carry. The challenge could be around access to technology. This can be difficult for those who don't have IDs such as those in tent cities who cannot hold anything valuable on them.
- Mark: the vaccine passport has been fairly smooth. The problem is the idea of getting a
 piece of photo ID to go with the card. We were able to support people to get their vaccine
 by identifying them and that was good enough. Some of our participants have gambling
 addictions and the Casino's back open and so they need a picture ID to go with their Vaccine
 cards, but they still can't get in. same with restaurants and other places affected by the
 passports. Marginalized populations don't have access to the necessary elements to get
 their ID and to access services that help them get their ID
- Mini Evaluation: by Katherine and Amanda
 - Evaluators from Reichert and Associates facilitated a mini evaluation exercise
 - What are you hoping to gain at the COVID-19 COP?
 Connection came up as 1 of the key pieces' members are hoping to gain from the call.
 - 2. What have you learned so far?
 - a. I'm not alone, there are people to reach out to that might have ideas on how to solve the issues. And I might just be able to help out
 - b. A survey was circulated following the meeting

Closing: Thanks to everyone for joining. Wishing you all a good rest of your day.