

Statement on the Prioritization of COVID-19 Vaccinations

For Immediate Release

Ottawa, Ontario: January 13, 2021

The Canadian Association of Emergency Physicians (CAEP) is calling for increased transparency around the prioritization and administration of COVID-19 vaccines and the plans for vaccination going forward.

As front-line physicians, we see that many of our members, along with emergency department nurses, other ED staff, and paramedics have not yet been vaccinated, particularly those in outlying and scarcely resourced areas, where health human resources can be especially limited. At the same time as we are seeing vaccinations given to urban providers with much less or even no direct patient contact.

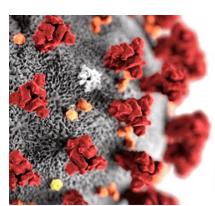
Our members' frustration is made worse by a lack of transparency and communication. While we hear that the population will be vaccinated in phases and that the rollout will follow an ethical framework, there is inadequate communication to support these claims. It is not always clear who is making the decisions and the rationale for prioritization.

Many front-line staff have been given no indication of when they can anticipate being vaccinated, nor if it will take weeks or months, increasing their stress while they provide acute care to the population.

CAEP recognizes that this is caused by a variety of factors, including a delayed and disjointed vaccination plan that varies between provinces, with many parts that are uncoordinated, as evidenced by the slow rollout of vaccine and shutdowns over Christmas, limited number of sites that are providing vaccinations, and clinics that are reporting shortages of vaccine for booked appointments.

However, at a minimum, the current situation requires increased transparency that should include:

- Clear and specific descriptions of which groups are actually being prioritized, and why.
- An emphasis on those actually providing direct patient care to critically ill and COVID-suspect patients.



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- Commitments from government and health authorities that the prioritization framework is being followed and that higher priority groups (particularly those in outlying and scarcely resourced areas) are being offered the vaccine before lower priority groups.
- Adequate communication so that those at the front-line can have some idea of when they will be able to receive the vaccine.

Our members and our colleagues on the front lines have and continue to step up to care for the sickest patients in our communities. Transparency, communication, and adherence to an ethical framework in vaccine prioritization and administration are the minimum they should receive in return.

*** If you would like more information about this topic, please contact Christina Bova at 613-523-3343 x17 (office), or email at cbova@caep.ca