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Waiting for first vaccines: Medical officer of health says it's 'all hands on deck'

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As Ontario's COVID-19 infection numbers risk spiralling out of control, the acting medical officer of health, Dr. Ian Gemmill, says the vaccine rollout can't happen soon enough.

In a wide-ranging discussion with the *Advocate*, Gemmill says the Haliburton Kawartha Pine Ridge District Health Unit is still waiting for its first doses to get start

started on phase one of the planned vaccination program.

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practitioners, and others.

“The greatest limiting aspect for us is availability of the vaccine. Everyone wants this vaccine into arms as soon as possible.”

Gemmill says getting long-term care homes done is key, given that staff at these homes move about in the community on a regular basis.

The Advocate asked if pharmacies will be involved to speed up the process.

“I think it’s all hands on deck,” said Gemmill, who said pharmacies could very well be involved. “We can’t do this alone. Since it’s an emergency, I believe pharmacists, nurse practitioners, nurses, even retired medical professionals should be involved. We’re exploring all possibilities.”

Phase Two

By the time phase one is done the medical officer of health hopes it will be no later than February. Phase two will involve the local health unit more, and he hopes to see more regular vaccines that only need refrigeration, not freezers. This phase will involve more people who are at a bit lower risk, including essential workers like first responders, grocery clerks, and other front-line workers, and then older adults who are living at home who are over 75, then later age 60-75.

“Optimistically, by spring or at the latest summer we hope to see all high-risk groups done. Then the average citizen can be vaccinated,” says Gemmill.

“The only thing that will arrest this pandemic is to get enough people vaccinated,” says Gemmill. “What we’re doing now is okay (social distancing, wearing masks) but it’s not perfect and the

Right now, the province is prioritizing areas that were considered ‘grey’ lockdown, such as Toronto and Peel Region, focusing on health care workers, residents and staff of long-term care homes, and home care patients.

“These hospitals have already gotten their vaccines and are working in conjunction with public health,” says Gemmill.

In this first phase, the initiative will be led by hospitals, and this will happen for our local health unit as well, he says.

While for now the local health unit has only been “put on notice” by the Ministry of Health to be ready as soon as vaccines are available, Gemmill says when they are ready the job in phase one will likely be done by local hospitals like Ross Memorial, and by long-term care staff in their respective homes. Just how things will be handled by people in home care has not been determined yet, and choices range from using family doctors, nurses, nurse

economic consequences are not great.”

The medical officer of health speaks from experience. Gemmill was the assistant medical officer of health in Ottawa during 1991-92, in the middle of a deadly meningitis outbreak that killed four children there. More than 152,000 children were vaccinated in the school system and it was accomplished in four weeks. There are about 180,000 people in the local health

unit he points out, a number not that different.

“That’s my expectation, we need to get this done and measured in weeks if possible.”

Once the health unit finishes its plan, Gemmill said they will look at releasing a draft to the public through the media.

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