



TO: Mill Street Tenants & Family Members
From: Mick Siems, Director
DATE: December 11, 2020
RE: COVID Vaccination Update

Dear Mill Street Tenants & Family Members,

We're excited to announce that we're gearing up to distribute the COVID-19 vaccine that you have been hearing about in the news. We are working with our pharmacy provider (Thrifty White) and anticipate that the vaccine will be available sometime in the near future, either late December or early January.

The Centers for Disease Control and Prevention (CDC) and the Minnesota Department of Health have decided that those living in senior care settings are in the highest priority group and that they will get the vaccine first. From what we know today, our tenant's families and other people in the general community will have to wait for their vaccinations until later next year, when the supply of vaccines is larger.

Here are the details of our Tenant Vaccination Plan:

- There will be no cost to you for the shots.
- You'll need two shots within either 21 or 28 days (depending on the vaccine) for it to be effective.
- If you've had COVID-19, you should still get the shots.
- Some people have had a sore arm, mild aches and fever after getting the shot, but you cannot be infected by COVID-19 through the shot. These types of side-effects are more common with the first injection but not as common with the second injection. It is important that you receive both shots.

Getting vaccinated against COVID-19 is one of the best ways to protect yourself and everyone around you, particularly those who are at increased risk for severe illness. Wearing masks and social distancing help reduce your chance of being exposed to the virus or spreading it to others, but these measures are not enough. Vaccines will work with your immune system, so it is ready to fight the virus if you are exposed. Getting these shots will not only protect you from being infected; it will help us take a big step towards ending this pandemic.

The news of a vaccine gives us hope for a new chapter to our fight against this virus. I am so appreciative of the support and cooperation that you all have given us during

these past nine tough months. Thank you for your commitment to our community. Together, we're moving toward a COVID-free future.

What follows are some Frequently Asked Questions to help you understand more about why the vaccine is so important in defeating COVID-19. If you have any questions or concerns related to the vaccine or our process for administering, please contact either Krisjohn Veum (736-8594) or myself (736-8590).

Frequently Asked Question related to the COVID-19 Vaccine

Why is it important for long-term care residents to receive the vaccination first?

The average age of residents in long term care facilities is 85 and almost every one of them has an underlying health condition, and some have multiple chronic conditions. According to CDC data, the risk of mortality in this age group is 630 times higher than those 18-29 years old. While many industries can stay open or partially open with safety measures, long term care communities will not be able to return to normal until there is a vaccine.

How will we receive the vaccine?

Mill Street will be working with our pharmacy provider, Thrifty White, to assist with the delivery and administration of the vaccine. Thrifty White will order the vaccines and associated supplies; they will also schedule and coordinate 2-3 on-site clinic dates for administering the vaccine.

Is there any risk that I can get COVID-19 from the vaccination?

No, there is no risk of getting COVID-19 from the vaccination. This vaccination contains no actual COVID-19 virus. You may experience some side effects from the vaccine such as a sore arm, mild aches, or fever. This is your immune system responding to the vaccine and is expected. This does not mean you are getting sick with COVID-19. We need the vaccine to trigger this immune response to produce the immunity you need against COVID-19.

How do we know it's safe since it was developed so quickly?

Scientists have worked on coronavirus research for decades starting with the original SARS outbreak and influenza. Scientists only needed to isolate certain things about COVID-19 to begin creating a vaccine because we already know so much about the type of virus. Due to the public health crisis created by the pandemic, many private, government and independent groups came together and cooperated on a vaccine. This scale of cooperation is not typical, and the partnership created resources and information sharing to develop the vaccine faster.

What are the side effects of the vaccine? Are there long-term effects?

There may be side-effects from the COVID-19 vaccination such as a sore arm, mild, generalized aches, headache, and fever. These side effects are more common after

the first injection and not as common after the second injection. This vaccine will not make you sick with COVID-19; the side-effects are a result of your body's immune system working to understand and create a response to the virus which is needed for your immunity. The long-term effects are still being studied. The first two months show no severe side effects. As with all vaccinations, long-term effects are monitored for up to 10 years.

What is the current safety and efficacy of COVID-19 vaccines in clinical trials?

The vaccines that will likely be available to us include the Pfizer and Moderna vaccines. Preliminary data for Pfizer and Moderna are available online. Full information regarding the safety and efficacy (performance) of COVID-19 vaccines in clinical trials has not yet been released. Information from clinical trials will be available before these vaccines are used.

What is 95% efficacy? Is there a difference between vaccine efficacy and effectiveness?

Vaccine efficacy and vaccine effectiveness measures the proportionate reduction in cases among vaccinated persons. Vaccine efficacy is used when a study is carried out under ideal conditions, for example, during clinical trial. Vaccine effectiveness is used when a study is carried out under typical fields (that is, less than perfectly controlled) conditions.

How does the efficacy of the Pfizer and Moderna vaccines compare to other vaccines?

Both the Pfizer and Moderna vaccines efficacy is among the best we have available compared to all recommended vaccines. For example, compare the efficacy of COVID-19 mRNA vaccines to a selection of recommended vaccines:

- Pfizer novel coronavirus vaccine (2-doses): 95%
- Moderna novel coronavirus vaccine (2-doses): 94.1%
- Influenza vaccine (1 dose): ~44%
- Chickenpox vaccine (Varicella-2 doses): 90%
- Measles (MMR-2 doses): 97%

If one product has slightly higher efficacy than another vaccine, isn't it better to get the better vaccine with higher efficacy?

No. Any COVID-19 vaccine that is authorized for use in the United States has met the FDA's rigorous guidelines regarding EUA and has been reviewed by both VRBPAC and the ACIP (expert committees that provide recommendations and guidance on immunizations). In the last ten months, we have had over 250,000 deaths associated to COVID-19. While preventive measures like social distancing and masks help to slow the spread, the only truly preventive measure against this virus is to vaccinate. Preliminary data from Pfizer and Moderna is extremely promising. Phase III trial results on both vaccines indicate an efficacy around 95%, rivalling the effectiveness of some of the best vaccines available to us against other viruses such as MMR (97% effective) and Chickenpox (90% effective) vaccines. In addition, efficacy for the Pfizer and Moderna

vaccine was consistent across age, gender, race, and ethnicity demographics. There is no reason to wait for a better vaccine when both the Pfizer and Moderna vaccines efficacy is among the best we have available compared to all recommended vaccines

Who will get the vaccine first?

Early on, COVID-19 vaccine will be limited and need to be prioritized. Priority groups for vaccination have not been solidified; however, at the current time they will mostly likely include:

- Phase 1A: Healthcare workers and long-term care residents
- Phase 1B: Other essential workers (i.e., police, fire, teachers)
- Phase 1C: People 65 and older and people at high risk

The Advisory Committee on Immunization Practices (ACIP) will make recommendations as to who should be prioritized for COVID-19 vaccine. These recommendations will be available after the vaccine is approved for use.

How many doses of COVID-19 vaccine are required?

- Pfizer - The Pfizer COVID-19 vaccine requires two doses separated by 21 days.
- Moderna - The Moderna COVID-19 vaccine requires two doses separated by 28 days.

There are other COVID-19 vaccines currently in clinical trials. One vaccine requires only one dose, while others require two. It is important to know which vaccine you have received and when/if you need to return for additional doses.

Do I need to get the same vaccine to complete my two doses?

Yes. If you receive a vaccine product that requires two doses, the second dose must be the same brand/manufacturer as the first dose.

How will I know which vaccine product I received?

Each person will receive a vaccine record card that states the COVID-19 vaccine product that was administered. It is important to keep this card in a place where it will not be lost or misplaced in order to assure the second dose of COVID-19 vaccine is the same brand/manufacturer as the first dose received. Patients who are vaccinated are encouraged to take a picture of their immunization record card with their smartphone. Doses will also be documented in the MIIC – Minnesota Immunization Information Connection so health care providers across the state and nation will know which type of vaccine a patient received and when.

Will I need to get a COVID-19 vaccine annually like an influenza vaccine?

Currently, the answer is unclear. It is possible that over time, additional doses of vaccine may be needed to provide continued protection. It will take ongoing

evaluation over several months and years to understand how our immune systems respond to this virus and COVID-19 vaccines.

Should / can I still get a flu shot?

It is important that you still receive a flu shot. However, it is not recommended to have a flu shot within one month of the COVID-19 vaccine. If you have not already received your flu shot, speak with your doctor about the best plan for receiving the flu vaccine and COVID-19 vaccine.

Will I have to pay for it?

No, there will be no cost to you for the vaccine.

How many shots will I need and when?

The vaccine includes two injections. The second injection will either be given 21- or 28-days after the first injection. The timeframe for the second injection depends upon the manufacturer and what is written in the emergency use authorization. We will make sure you have this information once vaccines are distributed and ready for administration.

How long is the vaccine effective?

We don't know. Because the vaccine is new, the length of immunity is unknown. There are some vaccines that do not require additional shots and there are other vaccines, such as the tetanus vaccine, that require periodic boosters. The vaccine will continue to be studied over time and, if additional boosters are needed, that information will be released when it is known.

Is it better to get natural immunity for COVID by getting the virus instead of the vaccine?

In many cases, the way to develop natural immunity to a pathogen is to become sick, have our immune systems respond, and then our immune system "remembers" the pathogen to keep us from getting sick again. However, our immune systems cannot always "remember" the pathogen; or, it cannot always fight off the virus. Right now, we don't know if becoming sick with COVID-19 actually causes you to be immune to re-infection with the virus or not. We believe the vaccination does provide immunity to the disease. Additionally, there is no way to predict whether or not someone with COVID-19 will develop severe disease and suffer significant health complications or not; becoming sick is a risk and there is no way to predict the outcome of illness. You will not become sick from the COVID-19 vaccine.

What happens when long-term care residents are vaccinated? Can we begin to reopen our community?

Long term care facilities will not be able to return to normal until a vaccine is administered to most residents, staff and the general public. As we near that point, we hope that we can begin to discuss what's next for our community. Until that time, please continue adhering to our infection prevention and control practices and follow the most current visitation guidance.