

# VIRTUAL COVID-19 VACCINES TOWN HALL FAQs



*Updated January 8, 2021*

1. Are there any issues with taking the vaccine while on medications like warfarin?
  - A. Patients who are stable on their warfarin therapy may take the vaccine. As always, consult your physician with any additional questions or concerns.
  
2. If one has already had COVID-19, is it still sound to take the vaccine?
  - A. Yes, even if you have had COVID-19, it is safe to get the vaccine, and this can add additional protection without causing any harm. • If you have had a test that shows you have COVID-19 antibodies, you should still get the vaccine. It is safe and can increase your protection from future COVID-19 infections. (AMDA)
  
3. What do you know about the new strain of COVID coming out of England?
  - A. The new strain of COVID seen in the United Kingdom has several mutations, some of which affect the spike protein. The changes in the spike protein may cause the strain to be more contagious. Researcher explain that the vaccine is expected to remain effective against the strain, and they are conducting research on the effectiveness of the vaccine on the strain in the United Kingdom.
  
4. This was the most informative and concise education I have seen about the COVID-19 vaccine. Can this be shared with our families since, unfortunately, most companies don't have someone like Dr. Williams to lay out the facts?
  - A. Yes. These webinars are being recorded and are available as follows:
    - For Associates: [COVID-19 Vaccine folder on Moss](#)

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- For Residents and Families: [Christian Horizons COVID-19 Information](#)
5. Are immunocompromised patients safe to take the vaccine? For example, patients that are transplant recipients?
    - A. Yes, immunocompromised patients are encouraged to take the Covid-19 vaccine.
  6. Where can we find accurate data on the clinical trials of the vaccine?
    - A. Both the Centers for Disease Control and Prevention (CDC) and Food and Drug Administration websites have detailed information regarding the clinical trials.
  7. What is the difference between the Pfizer and Moderna vaccines?
    - A. Both vaccines are mRNA vaccines. The timing of the second doses varies. For Pfizer, the second dose is administered 21 days after the first dose. For Moderna, the second dose is administered in 28 days after the first dose.
  8. I didn't get my flu shot yet. Can I get both shots and the same time?
    - A. The COVID-19 vaccine and other vaccinations should be given 14 days apart.
  9. I have a resident with a history of Guillain Barre and therefore, can't take the flu vaccine. Will he be excluded?
    - A. Please consult with the resident's primary provider regarding the risks and benefits of the covid-19 vaccine.

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10. Will independent living (IL) residents be included in the vaccine clinics?
- A. The ACIP recommendations have specified that when sub prioritization is needed in case of initial vaccine shortage, skilled nursing facilities and nursing homes should be prioritized over other long-term care settings. After nursing communities, vaccine would be distributed to other long-term care settings, including assisted living facilities, residential care communities, intermediate care facilities for individuals with developmental disabilities and state veterans' homes. The initial shipments of the vaccine will not be enough to cover the entire population of the priority group (healthcare workers and long-term care), which is anticipated to be approximately 25-30 million people. As such, the pharmacy partnership program will prioritize skilled nursing facilities above other long-term care settings. However, we anticipate the supply of vaccine to quickly increase and be able to cover all long-term care settings quickly after the distribution begins. (AHCA NCAL)
11. Can the injection go into the hip or does it have to be in the arm?
- A. The injections were created to be administered in the arm.
12. When will residents be vaccinated?
- A. Vaccine clinics are being scheduled at all Christian Horizons communities. As soon as we know dates, you will be notified.

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13. Will people in the COVID unit be vaccinated?

- A. People with current COVID-19 will be vaccinated when they have recovered. Once a person who had COVID-19 has recovered, and isolation can be discontinued, they can receive the COVID-19 vaccine. Individuals who had COVID-19 and received antibody treatment are advised to wait 90 days prior to receiving the COVID-19 vaccine.

14. How long will antibodies be in the body?

- A. We are still learning about how long antibodies last following vaccination. COVID-19 vaccine clinical trial participants are being monitored to observe the duration of the antibodies and determine how often the vaccine will need to be taken.

15. Who should NOT take the vaccine at this time? For whom is the vaccine contraindicated, NOT recommended?

- A. Contraindication to receiving the COVID-19 vaccine include allergy to any component of the vaccine. The vaccine is not recommended for any individual who has experienced a serious reaction (e.g., anaphylaxis) to a prior dose of SARS-CoV-2 vaccine or to any of its components.

16. Are there any known issues for the immunocompromised or immune suppressed with these vaccines?

- A. For people with immunocompromise, individuals may still receive COVID-19 vaccination if they have no contraindications to vaccination. However, they should be counseled about the unknown vaccine safety profile and effectiveness in immunocompromised populations, as well as the potential for reduced immune responses and the need to continue to follow all current guidance.

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17. Is the vaccine required to reside at a Christian Horizons community or be employed there?

A. The COVID-19 vaccination is currently not a condition of employment or residency at Christian Horizons.

18. What does it cost?

A. There is no cost to the individual. The federal government covers the cost of the vaccine, and the cost of administering the vaccine is covered by health insurance. For individuals who are uninsured, the cost of vaccine administration is covered by Health Resources and Services Administration (HRSA).

19. Will masks and social distancing still be required after both doses of vaccine?

A. Yes. Masks, physical distancing, and frequent hand hygiene will still be required. These interventions are effective in reducing the spread of COVID-19, and they remain crucial until herd immunity is achieved.

20. When visitors are again allowed will you require proof of vaccination?

A. The health and safety of our residents is always our top priority, and we are confident this vaccine is a much better option than the risk of getting this virus. We will continue to take all necessary precautions after the vaccine is administered, including wearing personal protective equipment and conducting regular testing, to ensure the safety of our residents and staff. We will also work with public health officials to determine how and when to adjust our policies for visitations and social activities and keep you updated.

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21. Will those who are not vaccinated be excluded for any activities, privileges, etc?
- A. The COVID-19 vaccination is currently not a condition of residency. Masks, physical distancing, and frequent hand hygiene will still be required. These interventions are effective in reducing the spread of COVID-19, and they remain crucial until herd immunity is achieved.
22. When, after receiving the vaccine, will you consider it to be successful? How is that measured?
- A. The vaccine is considered to be effective 1-2 weeks after the second dose. The effectiveness of vaccines is measured as a component of the vaccine clinical trials.
23. Will residents then be allowed to come and go freely and not be withheld as they are now?
- A. The health and safety of our residents is always our top priority. We will continue to take all necessary precautions after the vaccine is administered, including wearing personal protective equipment and conducting regular testing, to ensure the safety of our residents and staff. We will also work with public health officials to determine how and when to adjust our policies for visitations and social activities and keep you updated. These interventions are effective in reducing the spread of COVID-19, and they remain crucial until herd immunity is achieved.
24. Do you have any concerns that this vaccine, using messenger RNA that has never been used in vaccines before, skipped animal trials and term studies due to emergency authorization?
- A. There have been animal studies, and the science has been used in cancer therapy for a decade. In addition, mRNA vaccines have been

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studied in other viral illnesses including rabies, Zika, influenza, and HIV. The data that are needed to evaluate safety and efficacy were reviewed by the FDA and CDC, and the safety and efficacy of the Pfizer and Moderna vaccines was confirmed.

25. If I was recently tested for the virus and yet to receive my results, should I receive the vaccine?

A. You should wait until results are back to receive the vaccine. Because the efficacy is really proven when one does not have symptomatic active or asymptomatic active SARS-CoV2. Your doctor can help you decide if it is safe for you to get vaccinated.

26. Are Independent Living/Garden Home residents eligible to get the vaccine? When will this group be vaccinated? Will we have access to the second dose that is required? Will it come from the same manufacturer?

A. Yes. The prioritization of vaccinations is determined by each state. Christian Horizons is working with Walgreens to administer the COVID-19 Vaccine. Leaders at our communities are notified by Walgreens when a clinic is scheduled for their community. Leaders at the communities will use its standard communication to reach to residents. It can be short notice. We will let you as soon as we know of a clinic schedule. As per CDC and FDA guidelines, everyone will receive a second vaccine from the same manufacturer as the first vaccine.

27. How does billing work for a private pay resident who gets the virus, goes to the Red Zone 11 days with COVID, then returns to a private pay room after recovering.

A. Billing questions are beyond the scope of this webinar. Please contact your community's Business Office for assistance.

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28. Because of disability, a home care giver visits twice a week. Can she receive the vaccination when we do?
- A. The caregiver should check with her employer, Comfort Keepers, regarding the vaccination.
29. Have Springfield, IL communities had their first COVID-19 vaccine clinic. Which vaccine was administered, Pfizer or Moderna?
- A. Yes, Lewis Memorial Christian Village had its first clinic Thursday, December 31, 2020. River Birch Living will have its first vaccine clinic Friday, January 8. The Pfizer vaccine was administered.
30. Will residents receive notice and have a form to fill out in advance? Will consent form be sent to assisted living resident POAs?
- A. Yes. Walgreens has started contacting Christian Horizons communities to coordinate dates and times of clinics. Signed consent forms are required for the pharmacy to administer the vaccine. Resident Power of Attorneys will be notified of scheduled clinics and needed consent. Please contact your local community with questions.
31. We missed giving permission for our loved one to get the vaccine on the 29th. Will he/she have to wait until the next clinic to get the first shot?
- A. Yes. Walgreens is scheduling Christian Horizons community clinics as well as other senior living community clinics. The clinics are scheduled to ensure 21 to 28-day dose schedules are maintained based on which vaccine they received, Pfizer or Moderna. Your loved one will be able to get the first dose at the second clinic.

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32. Is it true that there are new variants of COVID-19? If so, what is known about them?

A. Yes. Multiple COVID-19 variants are circulating globally. In the United Kingdom (UK), a new variant has emerged with an unusually large number of mutations. This variant seems to spread more easily and quickly than other variants. Currently, there is no evidence that it causes more severe illness or increased risk of death. This variant was first detected in September 2020 and is now highly prevalent in London and southeast England. It has since been detected in numerous countries around the world, including the United States and Canada.

In South Africa, another variant has emerged independently of the variant detected in the UK. There have been cases caused by this variant outside of South Africa. This variant seems to spread more easily and quickly than other variants. Currently, there is no evidence that it causes more severe illness or increased risk of death.

Another variant recently emerged in Nigeria. CDC also is monitoring this strain but, at this time, there is no evidence to indicate this variant is causing more severe illness or increased spread of COVID-19 in Nigeria.