

January 24, 2021

General (retired) Rick Hillier, Chair
COVID-19 Vaccine Distribution Task Force
Ministry of the Solicitor General
George Drew Bldg., 18th Floor
25 Grosvenor Street
Toronto, Ontario M7A 1Y6

Re: COVID-19 Vaccination Prioritization and Distribution in Community Cardiology Clinics

Dear Retired General Hillier:

The Ontario Association of Cardiologists (OAC) welcomes and supports the important work of the COVID-19 Vaccine Distribution Task Force to advise the Minister of Health and the Solicitor General in developing and overseeing the province's COVID-19 immunization strategy, including the ethical, timely and effective distribution of COVID-19 vaccines in Ontario.

We are writing to advocate for prioritizing all health care professionals and staff, including physicians, nurses, echocardiography technologists, and others, working in non-hospital ambulatory (i.e. community) cardiology clinics within Phase 1 of the vaccination prioritization program. As well, we would like to propose that the Task Force consider integrating Ontario's vast community-based cardiology clinic infrastructure within the program's vaccine distribution plan.

The OAC is a voluntary professional organization that represents Ontario's cardiologists. Working with stakeholders including the provincial government, the OMA and others, the OAC's mandate is to protect, maintain and improve the high standard of cardiac patient care in Ontario.

1. Prioritizing the Vaccination of Health Care Professionals and Staff in Community Cardiology Clinics

More than three-quarters of Ontario's outpatient cardiac patient care is delivered through community-based cardiology clinics and diagnostic lab facilities spread across the province. Health care professionals and staff working in these clinics do not yet have access to the COVID-19 vaccine despite being involved in providing essential health care services to vulnerable cardiac patient populations.

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Ontario's cardiologists and their staff come into direct physical contact with patients as they carry out necessary diagnostic imaging tests and interventional procedures to help manage a patient's heart disease. Performing these procedures often includes preparing, positioning, and administering drugs and/or contrast agents to these patients. While all clinics have implemented protocols to protect the safety and well-being of patients, clinicians and staff during COVID-19, providing clinic staff with prioritized access to the vaccine is crucial to ensuring the continuation of essential cardiac care service delivery in Ontario. If staff become infected, clinics will need to halt or curtail services thereby putting more pressure on hospital emergency rooms.

Research shows that patients with cardiac disease represent a very high risk population with high mortality following COVID-19 infection. In addition to protecting clinic staff, prioritized vaccination in these clinics will protect vulnerable cardiac patients who remain at risk of contracting COVID-19 despite the various protocols being followed every day. These staff, like hospital-based workers who come into direct physical contact with patients, deserve to be prioritized within Phase 1 of the vaccination prioritization program.

2. Integrating Ontario's Community Cardiology Clinics into the Provincial Vaccination Distribution Plan

Ontario boasts a large and comprehensive community-based cardiology clinic infrastructure located in cities and towns throughout the province. We believe these clinics, staffed with professionally trained health care personnel, are ideally suited to assist the provincial government to achieve its mass vaccine distribution objectives, beginning with high-risk populations (such as cardiac patients) and extending to all members of the general public at the appropriate time. Utilizing this infrastructure could result in tens of thousands of patient vaccinations being delivered across the province each week.

The OAC recognizes the immense challenges the provincial government and the COVID-19 Vaccine Distribution Task Force face to ensure equitable safety and access to vaccines for all populations, including health care professionals and staff working in community-based clinics, high-risk patient populations, and the general public. We offer these recommendations, as well as our support and expertise, to the Task Force as it continues its important work in the weeks and months ahead.

Sincerely,

John D. Parker, MD, FRCPC

Board Member, on behalf of the OAC Board of Directors

cc: Hon. Doug Ford, Premier
Hon. Christine Elliott, Minister of Health
Hon. Sylvia Jones, Solicitor General
COVID-19 Vaccine Distribution Task Force members
Ken Chan, Assistant Deputy Minister, Vaccine Distribution Secretariat