

COVID-19 VACCINES FAQs

NEW - As a medical professional, am I required to be vaccinated for COVID-19?

CPSM requires all members to be fully vaccinated or tested for COVID-19 prior to treating patients, commencing October 18, 2021.

The most recent <u>Public Health Order</u> requires physicians to submit proof of vaccination or testing results. Regardless of your practice environment (institutions, facilities, private clinics, home visits, virtual, etc.) CPSM requires all members to comply with this Public Health Order.

If you are NOT fully vaccinated for any reason, you MUST notify the Registrar at

<u>TheRegistrar@cpsm.mb.ca</u> by October 8, 2021. This information will be kept secure and confidential. Along with your response please include your plan to ensure either full vaccination or testing are in place by October 18, 2021.

Additionally, members must follow PPE guidance per Shared Health or institutional policy, which in general, states that members must wear appropriate PPE for every single patient encounter. This will vary greatly depending upon your practice and the clinical encounter.

NEW - What about the employees or staff at my medical clinic – do they need to be vaccinated?

The <u>Public Health Order</u> applies to health care personnel who direct contact with patients, residents and clients at:

- (a) hospitals;
- (b) northern nursing stations operated by the Government of Manitoba;
- (c) personal care homes or supportive housing facilities;

(d) facilities operated by Shared Health Inc., a regional health authority, Addictions Foundation of Manitoba or a community services agency that are the subject of a funding agreement with Shared Health Inc. or a regional health authority;

(e) a residential mental health facility or addictions treatment facility that is operated by or the subject of a funding agreement with the Government of Manitoba.

As an employer, you are required to provide a safe workplace for all staff and the public that attend your clinic. As a CPSM member, you are required to engage only in medical care that is safe. This extends to your medical clinic.

Employees or staff who interact directly with the public should be fully immunized or submit to testing and wear the appropriate PPE.



A patient has requested a medical note for a vaccination exemption. What are the medical exemptions for COVID-19 immunization?

Members must ensure they are only allowing COVID-19 vaccine exemptions in the few situations where clinically indicated. A very limited list of conditions in which individuals require further consultation before being immunized, can be found on page 14 of the <u>Clinical Practice Guidelines for</u> <u>Immunizers and Health Care Providers</u>. Further medical exemptions were provided on September 15 and can be found <u>here</u>. If you are asked by your patient to provide information to support a medical exemption from receiving a COVID-19 vaccine, your patient must have one of the medical conditions listed and will require further consultation with a relevant specialist before immunizing.

CPSM has been informed that the process for consultation regarding alleged allergies to the COVID-19 vaccine, is to be a referral to the Health Sciences Centre allergist who will triage accordingly. Recognizing the increased volume of consults to allergists, a referral letter to an allergist will not be considered an exemption.

What do I need to know when writing medical notes of exemption?

As more hospitals, clinics, businesses, and other organizations across the province require their employees to be fully vaccinated, you may see an increase in patients seeking medical notes of exemption. Notwithstanding the medical note exempting vaccination, the patient may still require frequent testing to ensure public safety and compliance with the Public Health Orders, or their employer's policies.

Given the rarity of these exemptions and in light of the fact that vaccines have been proven to be both safe and effective, CPSM members are required to follow the following guidelines when providing any notes written for patients who qualify for a medical exemption:

- Document in the medical record your reasons to grant or refuse the exemption and indicate if it is time limited.
- Abstain from providing an exemption either written or verbal in the absence of a listed medical condition or based upon information that is known to be inaccurate.

Writing medical notes of exemption for COVID-19 vaccines is deemed a provision of medical care and you must adhere to the requirements of good medical care as defined in the regulations and Standards of Practice:

Section 3 of the Standards of Practice Regulation

Section 3 of the Practice of Medicine Regulation

As a practicing physician can I refuse to treat patients who are not vaccinated or refuse to be vaccinated?

NO. - The Code of Ethics and Professionalism also provides this professional responsibility:

1. Accept the patient without discrimination (such as on the basis of age, disability, gender identity



or expression, genetic characteristics, language, marital and family status, medical condition, national or ethnic origin, political affiliation, race, religion, sex, sexual orientation, or socioeconomic status). This does not abrogate the right of the physician to refuse to accept a patient for legitimate reasons.

An unvaccinated patient is not a legitimate reason to refuse treatment. Some patients may have a condition in which individuals require further consultation before being immunized. However, the list of conditions is very limited and can be found on page 14 of the <u>Clinical Practice Guidelines for</u> <u>Immunizers and Health Care Providers</u>.

The Code of Ethics and Professionalism also provides this professional responsibility:

12. Respect the decisions of the competent patient to accept or reject any recommended assessment, treatment, or plan of care.

Competent patients are entitled to make the decision to not be vaccinated. This cannot be used as a reason to deny any medical care.

Patients are asking me about eligibility for vaccines. What are the quick resources for clinical guidance?

All members must consult the comprehensive <u>Public Health Clinical Practice Guidelines for Immunizers</u> <u>and Health Care Providers.</u> This is the standard of care CPSM expects members to follow. This document must be consulted regularly as it will be updated very frequently as new clinical evidence emerges, guidelines change, and clinical eligibility evolves. Information contained in this document includes clinical guidance on:

- Pregnant &/or Breastfeeding Patients
- Patients who are immunosuppressed &/or have an autoimmune condition
- People who should NOT be immunized and require further consultation
- Guidance for use of the viral vector vaccine

Even if you are not administering the vaccines, you will likely be providing medical advice on vaccines and therefore it is important that you review this information.

Other helpful information for health care professionals on vaccines is located on <u>Manitoba COVID-19</u> <u>Vaccine site</u>.

I want to vaccinate patients in my clinic. Are there any special CPSM considerations?

The <u>Code of Ethics and Professionalism</u> is always a good starting point as it articulates the ethical and professional commitments and responsibilities of the medical profession. In addition to the virtues of compassion, honesty, humility, integrity, and prudence the Code of Ethics and Professionalism contains the following:



- Promote the well-being of communities and populations by striving to improve health outcomes and access to care, reduce health inequities and disparities in care, and promote social accountability.
- 39. Support the profession's responsibility to act in matters relating to public and population health, health education, environmental determinants of health, legislation affecting public and population health, and judicial testimony.
- 40. Support the profession's responsibility to promote equitable access to health care resources and to promote resource stewardship.

The expectation is that as physicians we hold a unique position of trust with the public, especially during this pandemic. Family physicians (and perhaps some specialists) practicing in the community must exhibit the highest standards of practice, care, ethics, and professionalism to administer this vaccine equitably, quickly, and in accordance with Public Health direction, including the reporting requirements.

As a community doctor do I have to administer vaccines?

No, but consider it a privilege to be able to be able to assist in one of the largest challenges to health care and society since the Second World War.

Think about your relationships with your patients, your duty to provide medical care during the pandemic, and the health system's plans that exist in your community. Winnipeg is very different from a remote or rural community where Public Health or the RHA might be directly involved. Your practice, location, and other factors may mean that you are not provided with vaccines by Public Health.

Are there special expectations for administering the vaccine in the community?

COVID-19 has made many demands on all members, but particularly those working with COVID-19 patients in hospitals, especially ICUs. The vaccine roll-out will make many demands on members practicing in the community including additional hours, reporting, and patient demands. Here are some general expectations to follow to assist the systematic and quick rollout of the vaccines in the province:

- Administer vaccines in a quick and efficient manner Build capacity where possible to assist in vaccinating the public quickly.
- Follow the provincial guidelines for eligibility don't vaccinate friends and family who are outside the designated age bands.
- Adhere to the <u>program requirements</u> for administering vaccines, including reporting requirements. The reporting requirements <u>must</u> be adhered to strictly to ensure inventory management and patient safety by identifying first and second doses of which vaccine.



- Follow the provincial guidelines for eligibility on age (or other criteria such as First Nations members) and the <u>Clinical Practice Guidelines</u> even though you have patients with multiple significant risk factors, don't make your own clinical judgment.
- Use your clinical judgment to advise patients on the risks and benefits of immunization given their individual medical conditions
- Follow the <u>COVID-19 Vaccine Information for Health Care Professionals</u> and the <u>COVID-19</u> Vaccine Clinical Practice Guideline for use in Special Populations issued by Public Health.
- Consider how to avoid wasting doses, including having a stand-by list of patients to offer vaccination on very short notice or other acceptable means at the discretion of the member which can be justified to CPSM

Some patients have expressed vaccine hesitancy. What should I tell them?

The current evidence indicates that the COVID-19 vaccines offered in Manitoba are safe and offer a high degree of protection. Public Health has provided <u>clinical guidelines for special populations</u> with references to clinical studies and positions by clinical societies.

We must not use our medical credentials and reputation when making comments or providing advice relating to the COVID-19 pandemic, without scientific evidence, that may be interpreted as contrary to public health recommendations, the law, codes of ethics and professionalism, or regulatory standards and expectations; or pose a potential risk to personal and public safety.

As a member of the medical profession you must follow evidence-informed scientific information in providing medical care. Members must provide good medical care which includes:

"sufficient communication with the patient or his or her representative about the patient's condition and the nature of the treatment and an explanation of the evidence-based conventional treatment options, including the material risks, benefits, and efficacy of the options in order to enable informed decision-making by the patient." CPSM Standards of Practice Regulation

The Code of Ethics and Professionalism states, "6. Recommend evidence-informed treatment options..."

Even after I explain all that, my patient will not get the vaccine. Any direction?

Respect the individual's decision on their medical care. The patient is an active participant in their own care and can make such decisions if they have the capacity. You may not terminate the patient relationship due to their failure to vaccinate.