

COVID-19 Vaccine Sequencing Interpretation Intake Form for SHA staff and physicians

National Advisory Committee on Immunization (NACI) issued guidance to provinces on the distribution of the COVID-19 vaccine. NACI affirmed in their guidance that the goal of the national vaccine program is consistent with the broader goal of Canada’s pandemic response: to minimize serious illness and death while also minimizing societal disruption.

In consultation with the Public Health Agency of Canada, the Government of Saskatchewan and SHA have formed the NACI guidelines into a framework, based on Saskatchewan’s demographics and logistical requirements, to guide sub-prioritization of vulnerable populations and healthcare workers. Phase 1 sequencing has been established based upon the following principles:

- those at highest risk of morbidity and mortality from Covid-19
- HCW providing direct care to covid-19 positive patients
- HCW providing direct patient care with inability to screen

An SHA sub-group has been established to review requests and make decisions about where SHA staff and physicians as individuals or groups fall within the framework, in the event it seems unclear. Applications are to be submitted to the sub-group via the regional IHICC Vaccine chief (or designate). If the submission and interpretation will have provincial implications, please contact your Executive Director and/or your Provincial Department Head. These individuals will view the submission from a provincial perspective and submit to the Interpretation sub group as applicable.

Note: While we are unable to respond individually to every inquiry received, we are committed to reviewing submissions on a weekly basis and in some cases, your message may be forwarded to another individual more appropriate to respond. Any formal decisions of the group will be communicated in writing to the contact information included in your request.

Please complete the fields below with as much detail as possible. All fields are required in order to ensure appropriate review.

Once complete, please follow the instructions below:

- **If you are a Saskatchewan Health Authority staff member or physician, please send this form to your Director, Area Department Lead or Area Chief of Staff for evaluation.**

Section 1 – General Information:			
Name		Phone number	
Email			
Requesting on behalf of self or group?			
If group, name and numbers of individuals for consideration:			

Section 2 - Review Request and Rationale:

Section 3: Additional supporting evidence if known (i.e. epidemiology or scientific rationale):

Section 4 – Additional Comments: