

Alberta  
COVID-19  
Immunization  
Policy

Effective February 2021  
Revised October 2021

Superseded

---

Ministry of Health, Government of Alberta

October 2021

Alberta COVID-19 Immunization Policy

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, without written permission of Alberta Health, Government of Alberta.

All information in the Alberta COVID-19 Immunization Policy (ACIP) is presented for public health and health sector purposes only.

© 2021 Copyright of this document and its contents belongs to the Government of Alberta.

The ACIP is presented with the intent that it is readily available for non-commercial informational use by health providers, organizations and other entities involved in the distribution and administration of COVID-19 vaccine and is not intended for use by the general public. Except where prohibited, the ACIP may be reproduced in part or in whole and by any means without charge or further permission from the government of Alberta provided that:

- users exercise due diligence in applying the ACIP; and
- the Government of Alberta is identified as the source of the ACIP.

Users are responsible for any changes and modifications they make to the ACIP and in any event, use of the ACIP is not a substitute for the proper exercise of professional judgment by the user in applying the ACIP. If modifications are made to the ACIP by anyone other than by the Government of Alberta, the modified ACIP must clearly indicate that it is not an official version of the original ACIP, and must not be represented as having been made in affiliation with or with the endorsement of the Government of Alberta.

For further information for health professionals on the use of this policy contact:

[health.imm@gov.ab.ca](mailto:health.imm@gov.ab.ca)

Health and Wellness Promotion Branch

Public Health and Compliance Division

Alberta Health

# Table of Contents

## Contents

I. INTRODUCTION.....	4
II. REQUIREMENTS FOR PARTICIPATION IN THE COVID-19 IMMUNIZATION PROGRAM.....	4
III. CLIENT ELIGIBILITY .....	5
Additional or third dose .....	5
IV. REPORTING IMMUNIZATIONS TO IMM/ARI.....	6
<b>Reason Codes</b> listed in order of priority:.....	7
V. REPORTING ADVERSE EVENTS FOLLOWING IMMUNIZATION (AEFI) .....	8
VI. VACCINE STORAGE AND HANDLING .....	8
VII. ALBERTA VACCINE INVENTORY (AVI) MANAGEMENT SYSTEM.....	9
VIII. WASTAGE MITIGATION STRATEGIES .....	9
IX. VACCINE PREPARATION .....	9
X. VACCINE ORDERING, ALLOCATIONS AND DISTRIBUTION .....	10
XI. EDUCATION/TRAINING RESOURCES.....	10

## I. INTRODUCTION

The Alberta COVID-19 Immunization Policy (ACIP) sets out the requirements for the delivery of the COVID-19 Immunization Program.

The COVID-19 Immunization Program supports the provincial and federal program goal: To minimize serious illness and overall deaths while minimizing societal disruption due to the COVID-19 pandemic.

The COVID-19 Immunization Program objectives are to:

- Provide a safe and effective COVID-19 vaccine for all Albertans for whom the vaccine is licensed and recommended;
- Allocate, distribute and administer COVID-19 vaccine as efficiently, equitably and effectively as possible; and,
- Monitor the safety and effectiveness of COVID-19 vaccines.

## II. REQUIREMENTS FOR PARTICIPATION IN THE COVID-19 IMMUNIZATION PROGRAM

Health practitioners must be compliant with the [Immunization Regulation](#), Alberta Health immunization policies and the following requirements:

- [Immunization Regulation](#)
  - All immunization events must be reported electronically to the Provincial Immunization Repository (Imm/ARI).
  - Follow the strict storage and handling requirements for the vaccines.
  - Report adverse reactions following immunizations as they become aware.
- Vaccine inventory must be reconciled in the Alberta Vaccine Inventory System **daily**.
- Follow the product monographs for information that includes:
  - Storage and Handling;
  - Vaccine preparation; and
  - Timeframe for use once thawed, reconstituted and/or vial punctured.
- Must have protocols in place for the management of anaphylaxis.
- Provide each client with complete informed consent (includes an overview of the vaccine, a discussion on the risks/benefits, side effects and verifying immunization history to determine if the client has received COVID-19 vaccine).
- Offer the client an immunization record.
- Include information to each client on participation in CANVAS active surveillance process for adverse events following immunization.
- Alberta Health Services will coordinate outreach immunization services.
  - As coordinated by AHS, community pharmacies can assist in offering outreach immunization services in seniors' congregate care facilities (e.g., long-term care, designated supportive living, supportive living).
- **COVID-19 vaccine must not be transferred between pharmacies or physician clinics unless directed by Alberta Health.**
  - Transferring vaccine increases risks of cold chain excursions.
  - Vaccine inventory cannot be tracked when transfers occur.
- COVID-19 vaccines can now be given simultaneously with all other vaccines.

### III. CLIENT ELIGIBILITY

Albertans 12 years of age and older are eligible for a primary series of COVID-19 vaccines (two doses for all vaccines currently used in Alberta). Non-Alberta residents who live, work, go to school or travel in the province are also eligible to receive vaccine. Individuals without an active Alberta Health Care number must book an appointment with Alberta Health Services by calling Health Link 8-1-1.

#### Additional or third dose

An **additional or third dose** may be required to provide stronger protection for those who have a suboptimal or waning immune response to vaccines.

#### Additional dose for immunocompromised individuals

It is recommended that a third dose of the COVID-19 vaccine be offered to individuals with certain immunocompromising conditions. An mRNA vaccine should be administered as the third dose except in the event of contraindication or refusal.

The specific immunocompromising conditions that make an individual eligible for a third dose are as follows:

- solid organ transplant recipients — pre-transplant and post-transplant
  - hematopoietic stem cell transplants recipients — pre-transplant and post-transplant while in immunosuppressed state (post-HSCT individuals are generally considered to be immunocompetent after 3 years as long as they are not on immunosuppressive drugs)
  - individuals with malignant hematologic disorders and non-hematologic malignant solid tumors prior to receiving or receiving active treatment which includes chemotherapy, targeted therapies, and immunotherapy or having received previous COVID-19 vaccines while on active treatment (does not include individuals receiving solely hormonal therapy, radiation therapy or a surgical intervention).
  - individuals on anti-B-cell therapies – including anti-CD19, anti-CD20, anti-CD22 and anti-CD52 monoclonal antibodies (such as rituximab, ocrelizumab, and ofatumumab)
  - individuals with chronic kidney disease on peritoneal dialysis or hemodialysis.
  - Individuals receiving chimeric antigen receptor (CAR)-T-cell therapy.
  - Individuals on:
    - long term high-dose systemic steroid treatment (prednisone equivalent of  $\geq 2$  mg/kg/day or 20 mg/day if weight  $> 10$  kg, for  $\geq 14$  days), or
    - alkylating agents, or
    - antimetabolites, or
    - tumor-necrosis factor (TNF) inhibitors (e.g., adalimumab, certolizumab, etanercept, golimumab, infliximab), or
    - other agents that are significantly immunosuppressive at clinicians' discretion
  - Individuals with advanced untreated HIV infection and those with acquired immunodeficiency syndrome (AIDS).
  - Individuals with moderate to severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome).
- ❖ The third dose can be administered at least 8 weeks after the second dose.

### **Additional dose for all residents of seniors congregate living facilities**

Applicable congregate settings include all private and public long-term care facilities, licensed supportive living facilities and seniors' lodges including First Nations elder care lodges.

An mRNA vaccine should be administered as the third dose except in the event of contraindication or refusal.

- ❖ The third dose can be administered at least 5 months after the second dose.

### **Additional dose for Albertans 75+, and First Nations, Métis and Inuit people 65+ no matter where they live**

All Albertans 75 years of age and older, and all First Nations, Métis and Inuit people 65 years of age and older no matter where they live are now eligible for a third dose of COVID-19 vaccine.

The same mRNA vaccine as the primary series should be administered as the third dose except in the event of contraindication or refusal.

- ❖ The third dose can be administered at least 6 months after the second dose.

### **Additional doses for travel**

Receiving an additional dose for travel purposes is not considered clinically necessary. Although in Canada, anyone who has received two doses of a Health Canada-approved vaccine is considered fully immunized, this is not the case in all jurisdictions. Additional doses of mRNA COVID 19 vaccine are available to Albertans who have received a vaccine series that is not currently recognized in a jurisdiction to which they are travelling. This includes complete AZ/Covishield series or a mixed series.

- ❖ The third dose can be administered at least 28 days after the second dose.
- ❖ If a fourth dose is needed, it can be administered at least 28 days after the third dose.

A number of health practitioners are administering COVID-19 vaccine across the province. Each health practitioner may be offering vaccine to different priority groups depending on geographical location and type of vaccine available. This will be communicated through [Alberta Health](#), [Alberta Health Services](#), [Alberta Medical Association](#) and [Alberta Blue Cross](#).

## **IV. REPORTING IMMUNIZATIONS TO IMM/ARI**

As of January 1, 2021, the Immunization Regulation requires health practitioners to ensure a report respecting immunizations is electronically submitted to the Provincial Immunization Repository (Imm/ARI) within 7 days in accordance with the [Immunization Data Submission and Response Guidelines](#).

### **For COVID-19 vaccine, immunization events must be reported daily to inform the Alberta Health daily immunization report.**

Required reporting can be accomplished through immunization web services, Immunization Direct Submission Mechanism (IDSM) or Alberta Blue Cross (ABC) claims.

- Alberta Health is working with vendors to integrate immunizing partner's point of care systems for to the Provincial Immunization Repository (Imm/ARI).
- Providers can [register to access the IDSM by following these instructions](#).
- For pharmacists: COVID-19 immunizations, are batched into Imm/ARI through the ABC claims data that pharmacists submit, (Immunization Direct Submission Mechanism is for privately funded vaccine only).

Reason Codes listed in order of priority:

Reason Codes	Descriptor	Pin (Pharmacy use)
03	Health Care Workers not including LTC/DSL	10000003 (Pfizer/BioNTech) 20000003 (Moderna) 50000003 (AstraZeneca)* 80000003 (COVISHIELD)*
44	LTC/DSL Staff	10000044 (Pfizer/BioNTech) 20000044 (Moderna) 50000044 (AstraZeneca)*
22	LTC/DSL Resident	10000022 (Pfizer/BioNTech) 20000022 (Moderna) 50000022 (AstraZeneca)*
70	Other congregate care living settings (e.g. senior lodges, corrections, group homes)	10000070 (Pfizer/BioNTech) 20000070 (Moderna) 50000070 (AstraZeneca)* 80000070 (COVISHIELD)*
02	Advanced age (65+)	10000002 (Pfizer/BioNTech) 20000002 (Moderna) 50000002 (AstraZeneca)* 80000002 (COVISHIELD)*
66	Other Risk (Individuals 12** years to 64 years of age with underlying health conditions, see appendix for details)	10000066 (Pfizer/BioNTech) 20000066 (Moderna) 50000066 (AstraZeneca)* 80000066 (COVISHIELD)*
72	12** years to 64 years of age	10000072 (Pfizer/BioNTech) 20000072 (Moderna) 50000072 (AstraZeneca)* 80000072 (COVISHIELD)*
73	COVID-19 in-school immunization program	N/A
74	COVID-19 additional dose for travel	10000074 (Pfizer/BioNTech) 20000074 (Moderna)
98	Research (AH approved)	10000098 (Pfizer/BioNTech) 20000098 (Moderna) 50000098 (AstraZeneca)

\* Pfizer and Moderna (mRNA) vaccines are preferentially recommended for all eligible individuals, however, AstraZeneca/COVISHIELD vaccine may be considered for individuals 18 years of age and older for whom mRNA vaccines are contraindicated (e.g. anaphylaxis to PEG), individuals who decline mRNA COVID-19 vaccine, or as a second dose for individuals who have received AstraZeneca/COVISHIELD to complete a two dose series.

\*\* Pfizer and Moderna vaccine are the only vaccines licensed for 12-17 year olds.

## V. REPORTING ADVERSE EVENTS FOLLOWING IMMUNIZATION (AEFI)

Health practitioners shall ensure that adverse events following immunization are reported to Alberta Health Services within 3 days of becoming aware.

**Passive Surveillance:** Passive AEFI surveillance systems rely on the client voluntarily reporting an AEFI for further investigation and reporting.

- As part of informed consent, clients are provided information on expected reactions following immunization and are encouraged to call Health Link or their health practitioner if there are events outside the expected reactions.
- As per the [Immunization Regulation](#) these events are to be reported to the AHS Provincial AEFI team, which determines if the events meet the reporting criteria for submitting the AEFI to Alberta Health.

**Active Surveillance:** Active AEFI surveillance involves proactively collecting data from clients who have received the vaccine through phone calls or surveys. The [CANVAS – COVID Study](#) is optional, and usually takes less than one minute to complete online. The initiative includes three email surveys sent to clients; one 8 days after dose 1, the second 8 days after dose 2, and the third six months later.

Enrollment should occur at the time of immunization and clients should be provided with the attached QR code from the printable poster which can be scanned or by provided the link: <https://canvas-covid.ca/>



COVID Vaccine QR  
Handout\_18DEC2020 |

The [Active Surveillance and Reporting of Adverse Events following COVID-19 Immunization](#) policy includes case definitions and reporting requirements for COVID-19 vaccine, the process for 'active and passive surveillance' of AEFIs following COVID-19 vaccine, and the list and description of [adverse events of special interest](#) to be monitored following COVID-19 immunization. The COVID-19 policy is a supplement to the current [Adverse Events Following Immunization \(AEFI\) Policy](#).

See [Alberta Health Services information](#) on how to report an adverse event following immunization.

## VI. VACCINE STORAGE AND HANDLING

The requirements for the storage, handling and transportation of all COVID-19 vaccines are outlined in the:

- [Alberta Vaccine Storage and Handling for COVID-19 Vaccine](#).
- [Alberta Vaccine Storage and Handling Policy for Provincially Funded Vaccine](#)
- Product monographs
  - [Pfizer-BioNTech COVID-19 vaccine](#)
  - [Moderna COVID-19 vaccine](#)
  - [AstraZeneca/COVISHIELD- COVID-19 Vaccine](#)

### Temperature Excursions

- Health practitioners must report temperature excursions to the vaccine manufacturer within 24 hours.
  - The [Alberta Vaccine Storage and Handling for COVID-19 Vaccine](#) includes manufacturer contact information (including after hours).



- Any vaccine that is determined not viable, must be discarded according to the health practitioners' standard of practice and must be entered into AVI as wasted using the correct reason.

## VII. ALBERTA VACCINE INVENTORY (AVI) MANAGEMENT SYSTEM

The AVI Management System is the administrative system that supports the vaccine inventory management within the Alberta Immunization Program and is integral to the management of the COVID-19 Immunization Program. It is a secure online information system used by Alberta for the ordering, receiving and reconciliation of vaccines in the province.

All immunizing partners, must receive the COVID-19 vaccine they have been shipped in AVI and are required to reconcile inventory using AVI **daily** by 9 pm.

All vaccine delivery sites must have at least one provider (up to 2) who will be responsible for AVI. Access and [training](#) will be provided by Alberta Health.

## VIII. WASTAGE MITIGATION STRATEGIES

It is imperative that every effort is made to reduce COVID-19 vaccine wastage.

- Follow the storage and handling requirements to minimize vaccine wastage due to improper transportation, storage or handling.
- When possible, group individuals to be immunized on the same day. However, some wastage will be inevitable to ensure that no immunization opportunity is missed.

## IX. VACCINE PREPARATION

Each COVID-19 vaccine has unique preparation requirements that health practitioners must be aware of.

### Pfizer

- [COVID-19 vaccine \(mRNA\) – Pfizer ultra-frozen vaccine](#)
- [Pfizer-BioNTech COVID-19 vaccine \(Product Monograph\)](#)
- [The S.T.E.P.S. to Pfizer-Biotech COVID-19 vaccination](#)
- [Information about Low Dead-Volume Syringes and/or needles for Pfizer-BioNTech COVID-19 vaccine](#)

### Moderna

- [COVID-19 Vaccine \(mRNA\) – Moderna frozen vaccine](#)
- [Moderna COVID-19 vaccine \(Product Monograph\)](#)
- [Moderna COVID-19 Vaccine Storage & Handling](#)

### AstraZeneca/COVISHIELD

- [COVID-19 Vaccine – AstraZeneca/COVISHIELD](#)
- [AstraZeneca/COVISHIELD COVID-19 vaccine \(Product Monograph\)](#)

## X. VACCINE ORDERING, ALLOCATIONS AND DISTRIBUTION

Advanced purchase agreements with the Government of Canada are in place with seven COVID-19 vaccine manufacturers, and they have secured ~200 million doses of vaccine with options for another ~200 million doses if needed. A National Allocation Framework was developed to ensure allocation is on a per-capita basis until such time as there is enough COVID-19 vaccine supply to resume the FPT allocation process using the established Vaccine Supply Working Group (VSWG) framework.

COVID-19 vaccines enter the province in various logistical distribution routes. Depending on vaccine type and storage and handling requirements, the vaccines can be distributed:

- From the manufacturer directly to the location immunizations are being offered.
- From the manufacturer directly to a third party distributor for further distribution (for example, pharmacy wholesale distributors that ship the vaccine to pharmacies).
- From the manufacturer to the Provincial Vaccine Depot for further distribution.

Allocations are based on the health practitioners ability to administer the vaccine within the timeframes allowed based on the type of vaccine and the amount of vaccine available. Instructions on how health practitioners will receive the vaccine will be communicated through Alberta Health in partnership with Alberta Health Services, Indigenous Services Canada, Alberta Blue Cross and Alberta Medical Association.

## XI. EDUCATION/TRAINING RESOURCES

Alberta Health:

- [The Alberta COVID-19 Immunization Policy](#)
- [COVID-19 vaccine biological pages:](#)
  - [COVID-19 Vaccine \(mRNA\) – Pfizer ultra-frozen vaccine](#)
  - [COVID-19 Vaccine \(mRNA\) – Moderna frozen vaccine](#)
  - [COVID-19 Vaccine – AstraZeneca/COVISHIELD](#)
- [Alberta Vaccine Storage and Handling for COVID-19 Vaccine](#)
- [Active Surveillance and Reporting of Adverse Events following COVID-19 Immunization \(AEFI\) Policy](#)
- [COVID-19 Vaccine – Questions and answers for public and health care practitioners](#)
- [COVID-19 immunization: Guidance during the COVID-19 pandemic](#)
- [Alberta Inventory System \(AVI\) training must be complement for those health practitioners not already using AVI](#)

Alberta Health Services:

- [Health Professional Immunization Information COVID-19](#)
  - COVID-19 Immunization Orientation - [PowerPoint](#) | [Recording Session](#)
  - [COVID-19 Immunization Demonstration](#)
- [COVID-19 Vaccine Fact Sheet](#)

Pharmacies:

- [Alberta Blue Cross pharmacy COVID-19 immunization](#)

Physicians:

- [Alberta Medical Association community physician vaccine distribution plan](#)

National resources:

- The [National Advisory Committee on Immunization \(NACI\) Recommendations on the use of COVID-19 vaccine](#)
- [Health Canada taking further action to confirm the benefit-risk profile of the AstraZeneca vaccine](#)
- [NACI rapid response: Recommended use of AstraZeneca COVID-19 vaccine in younger adults](#)
- [COVID-19 for health professionals: Vaccines](#)
- [COVID-19 Vaccination Information Resources: Tool Kit for Health Care Providers](#)

Manufacturer resources:

- COVID-19 vaccine product monographs
  - [Pfizer-BioNTech COVID-19 vaccine](#)
  - [Moderna COVID-19 vaccine](#)
  - [AstraZeneca/COVISHIELD- COVID-19 Vaccine](#)
- [Pfizer- BioNTech COVID-19 Vaccine Information for Canadian Health Care Professionals](#)
- [Important Safety Information on AstraZeneca COVID-19 Vaccine and COVISHIELD: Risk of Thrombosis with Thrombocytopenia](#)