

COVID-19 vaccine newsletter

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The Resource Center is grateful to all employees who have taken the step to further protect themselves, their family and persons receiving TRC supports by getting vaccinated against COVID-19. With many employees and self-advocates scheduled to receive their second dose of vaccine the week of February 8, while others have yet to decide whether to get inoculated, we wanted to share some information about the vaccine.



Staff who receive vaccine entered in drawings

Staff are reminded that when they get the COVID vaccine, they are entered into a weekly drawing for a \$150 gross payout! To be included in the drawings, send proof of vaccination to Denise Luce at the Dunham Avenue building. Good luck!



PHOTO BY JILL MARSH



PHOTO BY AUSTIN MITCHELL

Margaret "Cookie" Wilson, left, Direct Support Professional at our Edgewater Day Program, and Tim Perrin, right, Third Shift Supervisor, are two of the employees who have won a drawing.

TRC Health Care providers discuss vaccine's benefits, concerns

Most people want to be inoculated against COVID-19 and are grateful for the opportunity to receive the vaccine.

But with conflicting information floating around regarding the vaccine, it can be confusing to know what to believe. The providers at our TRC Community Health Center wanted to share their thoughts on why they decided to get vaccinated and why they think everyone should receive the vaccine.

Dr. Adnan Munir, Medical Director, received his first dose of vaccine several weeks ago and is scheduled for his second vaccine. Dr. Munir said the vaccine has given him a sense of control over what has been an uncontrollable situation.

"The pandemic has caused a great deal of disruption in all our lives," he said. "The vaccine is the first step in getting our lives back and is also important in protecting our loved ones, including our residents, who we all care so deeply for."

Dr. Munir noted the various mutations of the virus that are occurring and said getting the vaccine will provide protection against COVID now and position people to get another shot to ward off the mutations.

"Once you are vaccinated, the mutations can be managed through use of a booster, which is currently under development," he said.

Dr. Munir has treated a number of people who contracted COVID. He advises those who are hesitant about receiving the vaccine to consider the risks should they contract the virus.

"Despite the misconceptions and fear surrounding the vaccine, getting the dis-



Dr. Adnan Munir and Laura Seiberg, Supervising Nurse.

PHOTO BY CHRIS ANDERSON

ease potentially has a much worse outcome," he said.

Regarding instances of people having a bad reaction to the vaccine, Dr. Munir said this actually is a good sign.

"Serious adverse reactions to the vaccine are rare, and the mild reactions experienced are essentially the body's way of letting you know it's protected."

For people with allergies or other pre-existing conditions that are causing them to question whether to receiving the vaccine, Dr. Munir suggests they contact their primary care provider for advice.

In the meantime, he looks forward to his second dose of vaccine and moving further along the path to normalcy.

Other TRC health care providers who have received the vaccine shared why they decided to get vaccinated.

Laura Seiberg, Supervising Nurse, and Carla Hall, Medical Assistant, said it's important for people to educate themselves about the vaccine. They admitted they initially had concerns about the vaccine, but that once they learned more about how safe it is, they decided to get vaccinated.

Now, as they wait for their second dose, they are excited to have had the opportunity to get the vaccine.

"It's the only way we will get back to a normal life," Laura said.

We thank Steve Riczker, Medical Practice Manager, for providing the content for this article.

VACCINE MYTHS VS. FACTS

Dr. Lisa Maragakis, Senior Director of Infection Prevention, and Dr. Gabor Kelen, Director of the Johns Hopkins Office of Critical Event Preparedness and Response, review some common myths circulating about the vaccine and clear up confusion with reliable facts.

MYTH: *Side effects of the COVID-19 vaccine are dangerous.*

FACT: The COVID-19 vaccine can have side effects, but the vast majority are short term — not serious or dangerous. The vaccine developers report that some people experience pain where they were injected; body aches; and headaches or fever, lasting for a day or two. These are signs the vaccine is working to stimulate your immune system. If symptoms persist beyond two days, you should call your doctor.

If you have allergies — especially severe ones requiring you to carry an EpiPen — discuss the COVID-19 vaccine with your doctor, who can assess your risk and provide more information about if and how you can get vaccinated safely.

MYTH: *The messenger RNA technology used to make the COVID-19 vaccine is brand new.*

FACT: The messenger RNA (mRNA) technology behind the new coronavirus vaccines has been in development for almost two decades. Vaccine makers created the technology to help them respond quickly to a new pandemic illness, such as COVID-19.

MYTH: *Researchers rushed the development of the COVID-19 vaccine, so its effectiveness and safety cannot be trusted.*

FACT: Studies found that the two initial vaccines are both about 95% effective — and reported no serious or life-threatening side effects. There are many reasons why the COVID-19 vaccines could be developed so quickly. Here are just a few:

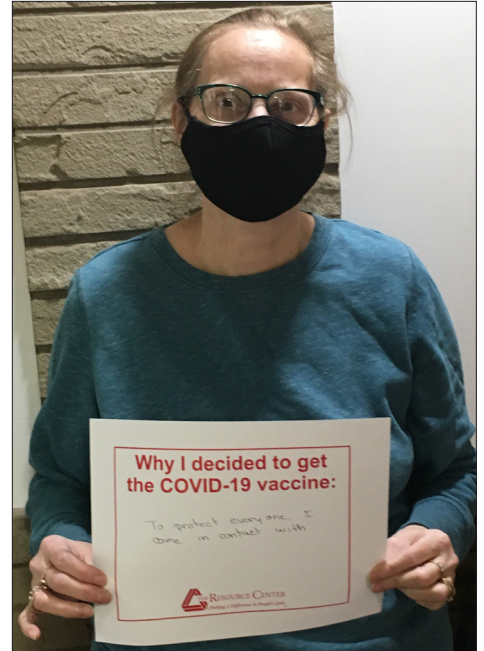
- * The COVID-19 vaccines from Pfizer/BioNTech and Moderna were created with a method that has been in development for years, so the companies could start the vaccine development process early in the pandemic.
- * China isolated and shared genetic information about COVID-19 promptly, so scientists could start working on vaccines.
- * The vaccine developers didn't skip any testing steps, but conducted some of the steps on an overlapping schedule to gather data faster.
- * Vaccine projects had plenty of resources, as governments invested in research and/or paid for vaccines in advance.
- * Some types of COVID-19 vaccines were created using mRNA, which allows a faster approach than the traditional way that vaccines are made.
- * Social media helped companies find and engage study volunteers, and many were willing to help with COVID-19 vaccine research.
- * Because COVID-19 is so contagious and widespread, it did not take long to see if the vaccine worked for those study volunteers who received vaccine.
- * Companies began making vaccines early in the process — even before FDA authorization — so some supplies were ready when authorization occurred.

MYTH: *The COVID-19 vaccine was developed with or contains controversial substances.*

FACT: The first two COVID-19 vaccines to be authorized by the FDA contain mRNA and other, normal vaccine ingredients, such as fats (which protect the mRNA), salts and a small amount of sugar. These COVID-19 vaccines were not developed using fetal tissue, and they do not contain any material such as implants, microchips or tracking devices.

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TRC staff share why they made the decision to get vaccinated:



Dawn Beardsley
Licensed Practical Nurse

Staff can check their eligibility for vaccine

The Resource Center has been fortunate to partner with Chautauqua County and CVS Pharmacy to conduct vaccine clinics for people living in our homes and some employees. We also have received approval to conduct our own vaccine clinic, which likely will take place in the near future once more vaccine is available.

While about 300 employees have been vaccinated thus far, hundreds more are waiting to receive the vaccine. Currently, New York State is allowing people in Phase 1A and Phase 1B to be vaccinated. Eligible people in these groups include:

- * staff working in our homes
- * people living in our homes
- * staff who have direct contact with clinic patients or self-advocates
- * staff who will be assisting with any of the vaccine clinics taking place at TRC
- * staff age 65 or older

To see if you're eligible for the vaccine, visit www.covid19vaccine.health.ny.gov and click on "Check Eligibility."

For information about vaccination clinics taking place in Chautauqua County, as well as other COVID-19 info, please visit www.chqgov.com/public-health/public-health.

Vaccine Myths vs. Facts (continued)

MYTH: *The vaccine enters your cells and changes your DNA.*

FACT: The two COVID-19 vaccines available to us are designed to help your body's immune system fight the coronavirus. The messenger RNA from two of the first types of COVID-19 vaccines does enter cells, but not the nucleus of the cells where DNA resides. The mRNA does its job to cause the cell to make protein to stimulate the immune system, and then it quickly breaks down — without affecting your DNA.



MYTH: *Getting the COVID-19 vaccine gives you COVID-19.*

FACT: The vaccine for COVID-19 cannot and will not give you COVID-19. The two authorized mRNA vaccines instruct your cells to reproduce a protein that is part of the SARS-CoV-2 coronavirus; this protein helps your body recognize and fight the virus. The COVID-19 vaccine does not contain the SARS-Co-2 virus, so you cannot get COVID-19 from the vaccine. The protein that helps your immune system recognize and fight the virus does not cause infection of any sort.



MYTH: *The COVID-19 vaccine can affect women's fertility.*

FACT: The COVID-19 vaccine will not affect fertility. The COVID-19 vaccine encourages the body to create copies of the spike protein found on the coronavirus's surface. This "teaches" the immune system to fight the virus that has that specific spike protein.

Confusion arose when a false report surfaced on social media, stating the spike protein on this coronavirus was the same as another spike protein called syncytin-1 that is involved in the growth and attachment of the placenta during pregnancy. The false report said that getting the COVID-19 vaccine would cause a woman's body to fight this different spike protein and affect her fertility. The two spike proteins are completely different and distinct, and getting the COVID-19 vaccine will not affect the fertility of women who are seeking to become pregnant, including through in vitro fertilization methods. During the Pfizer vaccine tests, 23 women volunteers involved in the study became pregnant, and the only one who suffered a pregnancy loss had not received the actual vaccine, but instead had received a placebo.

Getting COVID-19, on the other hand, can have potentially serious impacts on pregnancy and a mother's health. Women are encouraged to reach out to their medical providers to discuss questions about COVID-19 as it relates to fertility or pregnancy.



MYTH: *If I've already had COVID-19, I don't need a vaccine.*

FACT: People who have gotten sick with COVID-19 may still benefit from getting vaccinated. Due to the severe health risks associated with COVID-19 and the fact that re-infection with COVID-19 is possible, people may be advised to get a COVID-19 vaccine even if they have been sick with COVID-19 before.

There is not enough information currently available to say if or for how long people are protected from getting COVID-19 after they have had it (natural immunity). Early evidence suggests natural immunity from COVID-19 may not last very long, but more studies are needed to better understand this. Several subjects in the Pfizer trial who were previously infected got vaccinated without ill effects. Some scientists believe the vaccine offers better protection for coronavirus than natural immunity.

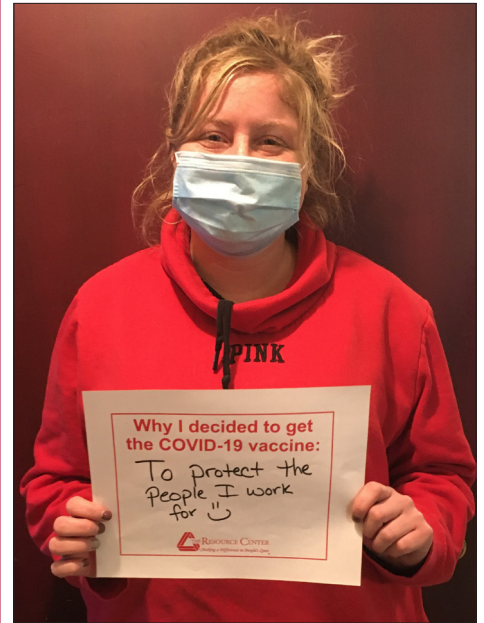


MYTH: *Getting the COVID-19 vaccine means I can stop wearing my mask and taking coronavirus precautions.*

FACT: People who get the COVID-19 vaccination still need to practice infection prevention precautions. Keep your mask on, and continue staying at least 6 feet from people outside your household, until further notice. Vaccines do not stop the coronavirus from entering your body; they only prevent you from developing moderate to severe COVID-19. It's not yet clear if people vaccinated for COVID-19 can still carry and transmit the virus, even when they themselves don't get sick.

We thank Ally Rounds, Population Health Manager, for sharing this helpful information.

TRC staff share why they made the decision to get vaccinated:



Amanda Trout
Direct Support Professional

Tips on how to cope with COVID-19 stress

It's important for us to take care of our physical and mental health during a crisis like the pandemic. The Centers for Disease Control and Prevention offer some tips to help manage and cope with stress:

Take care of your body

*Take deep breaths, stretch and meditate.
Try to eat healthy, well-balanced meals.
Exercise regularly.
Get plenty of sleep.
Avoid or limit alcohol and drugs.*

Make time to unwind

*Remind yourself that strong feelings will fade.
Try to do other activities you enjoy.*

Take breaks from the news

It can be upsetting to hear about the crisis and see images repeatedly.

Connect with others in a safe way

Talk with people you trust about your concerns and how you are feeling. Be sure to connect safely by maintaining social distancing.

TRC employees can access free support for managing depression, stress and anxiety through MyStrength. Visit the web site at www.mystrength.com or download the app. STARS Health Plan members will use the access code **TRCStar**; non-members use **TRCClinical**.

TRC staff share why they made the decision to get vaccinated:

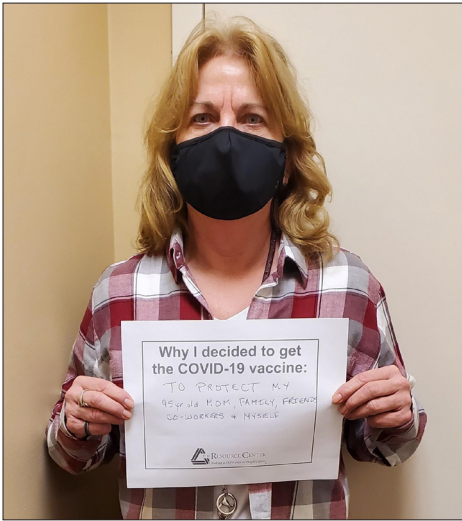


PHOTO BY JENNIFER DIAZ

Sandra Greenman
Mental Health Clinician

Staff may use CAT if they experience vaccine side effects

Some people experience side effects after receiving the vaccine, and this is an indication the vaccine is stimulating your immune system.

Common side effects include fever, fatigue, headache, chills, nausea, vomiting, muscle aches, and joint pain. Side effects are more common after people receive the second dose. Side effects usually occur within one day of being vaccinated and typically are mild to moderate.

If you experience side effects after receiving the COVID vaccine, use the guidance at right to determine if you should come to work. Employees who are experiencing fever should not come to work.

Staff whose side effects from the second dose of vaccine prevent them from working are authorized to use up to one day of Catastrophic Account Time (CAT), to the extent they have CAT available.

Staff who already used Paid Time Off (PTO) to recover from the second dose may complete a TRC Payroll Time Sheet for an "Adjusted Time Sheet" to convert the PTO to CAT, then have it approved by their supervisor and submitted to Payroll.

For questions about using CAT Time or to obtain a TRC Payroll Time Sheet, phone Human Resources at 661-4711.

Vaccine side effects in people with I/DD

HRS, Inc., and Irwin Siegel Agency created the following information to assist Direct Support Professionals and others in monitoring people with intellectual and developmental disabilities for signs of adverse reactions to COVID-19 vaccine.

Possible Reactions	How they might appear in people with IDD
Fatigue	Not wanting to eat or drink, not acting like their typical selves, loss of interest in regular activities, sleeping more than usual
Muscle or Joint Pain	Irritability, striking out at others, wanting to curl up in a ball, wanting to sleep more, hitting the joint or area, guarding the area, refusing to participate in activities
Fever	Lethargy, decreased appetite, change in interest in activities, wanting to remain in bed covered up
Chills	Shaking that could resemble a seizure, change in behavior, covering themselves with a blanket
Nausea or Vomiting	Refusing to eat or drink, resistance in going to the location where meals are served, refusing to take medications, rumination
Pain, redness or swelling at the injection site	Hitting or rubbing the injection site, guarding that arm, not using that arm, agitation, aggression toward themselves or others
Swollen lymph nodes in the same arm as the injection	Hitting at the arm, guarding that arm, increased agitation or self-abusive behavior

HRS and Irwin Siegel Agency recommend monitoring people with I/DD twice a day for 72 hours for the following:

- *Fever *Elevated pulse *Shaking or chills *Changes in eating or drinking patterns
- *Changes in self-abusive behavior or aggression toward others *Changes in sleeping patterns
- *Hitting, rubbing or picking at the injection site *Resisting use of arm which received the injection
- *Any changes in a person's baseline level of behavior or interactions

If you note any of these, tell a nurse or a healthcare provider immediately!

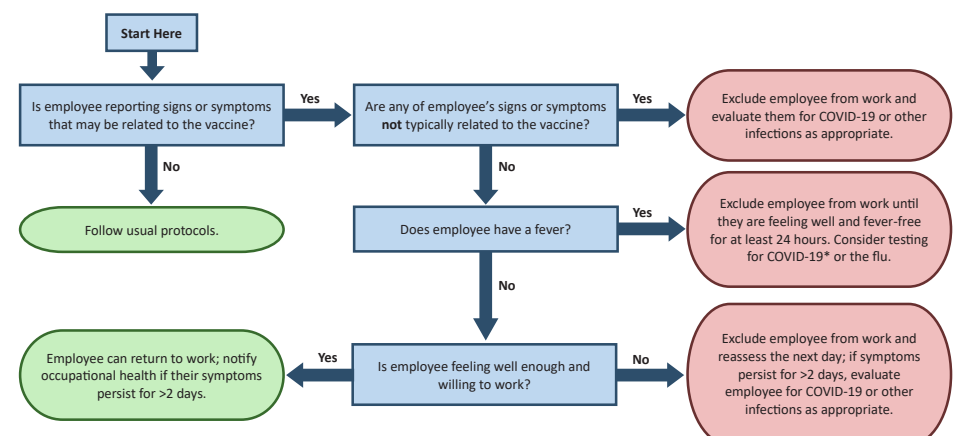
Health Care Facility Decision Support for Health Care Workers Experiencing Potential Side Effects After Receiving a COVID-19 Vaccine

This tool (adapted from the Centers for Disease Control and Prevention's [Post Vaccine Considerations for Healthcare Personnel](#); updated on December 30, 2020) is designed to aid in the evaluation of health care workers who are reporting potential side effects within three days of receiving a COVID-19 vaccine (the day of vaccination is considered the first day). These considerations are based on our current understanding of COVID-19 vaccine side effects and may evolve as we gain more information. Health care personnel exclusion requirements may vary; consult the New York State Department of Health for guidance.

Side effects following COVID-19 vaccination can include **fever, fatigue, headache, chills, nausea, vomiting, muscle aches** and **joint pain**. Most side effects:

- Are mild to moderate in severity
- Occur within the first three days of vaccination, usually the day after vaccination
- Resolve within one to two days of onset
- Are more frequent and severe following the second dose and among younger people compared to older adults

Cough, shortness of breath, runny nose, congestion, sore throat and loss of taste or smell are **not** consistent with post-vaccination symptoms and may be symptoms of COVID-19 or another infection.



*A nucleic acid amplification (NAA) test is preferred. If an antigen test is used, negative results should be confirmed with an NAA.