



## FROM THE MINNESOTA DEPARTMENT OF HEALTH

We have received many requests and questions about “clergy” qualifying as essential workers when it comes to vaccine prioritization distribution.

We recognize that faith leaders and clergy are critical to our communities during the COVID19 pandemic. We acknowledge that each of you may play a single role, or a variety of roles, under the umbrella of your title: Pastor, Counselor, Critical support staff, Nursing home/hospital/hospice clergy, Food shelf distributor, Administrator, Preacher, Home care provider, and the list goes on. Faith leaders and clergy also include a full representation of the diversity of our population, including some of those at high risk for COVID-19 due to age, health conditions, and other social vulnerabilities. Because of all of these variables, there is no one category that “clergy” falls under in terms of vaccine priority. Please evaluate your specific situation to determine where you fit. Right now vaccine eligibility is as follows:

### Phase 1a [Minnesota Guidance for Allocating and Prioritizing COVID-19 Vaccine - Phase 1A \(state.mn.us\)](https://state.mn.us)

- If you are a staff member of or provide direct patient services in a health care or long-term care facility, access vaccination through that facility. Go to the link above for specific information about who is eligible for Phase 1a.
- If you are 65 and over, a child care worker, or educator for pre-k through grade 12, make an appointment to be vaccinated by going to this State of MN website: [Find My Vaccine / COVID-19 Updates and Information - State of Minnesota \(mn.gov\)](https://state.mn.us)

*Please note:* There continues to be a very limited supply of COVID-19 vaccine in Minnesota. It will be quite some time before these two eligible categories of people receive vaccine. We encourage Minnesotans to remain patient as more vaccine arrives in the weeks and months ahead.

As more vaccine becomes available in Minnesota, health care providers will be reaching out to their patients as they become eligible for vaccination.

The Minnesota Department of Health will also keep the public informed about eligibility and availability of vaccine through our website, public announcements, social media and all other methods available to us. We will continue to also rely on trusted partners, like yourselves, to spread accurate and timely information about vaccination as it becomes available.

If you are interested in having a presentation or hosting a discussion with MDH, please contact us at [Health.FaithBased-Covid19@state.mn.us](mailto:Health.FaithBased-Covid19@state.mn.us)

Thank you for your partnership.

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Here are the questions and responses from the 1.11.21 WebEx about Covid-19 Vaccine

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### **1.11.21 Chat Room Questions & Responses from Faith-based Call**

**Question:** Might churches be able to help by serving as vaccination site in the future? Do you need our help? Who should we contact?

**Response:** Vaccination sites need to follow the priority based on risk criteria set by our Vaccine Distribution Advisory Council. Those vaccination sites include: pharmacies, primary care settings, hospitals, local public health settings, tribal health, specialty care centers, community vaccination sites (some faith communities), correctional facilities, and others. Not ALL clinics, local public health,

or community centers will become vaccination sites – they have to be registered and meet the criteria for safely administering the vaccine. When we know more about where these sites are in the communities and what their processes are for getting vaccinated, we will share this with you.

**Question:** Are there any concerns with fertility in taking the vaccine?

**Response:** This week, the U.K.'s Royal College of Obstetricians and Gynecologists and the Royal College of Midwives issued a statement about Covid vaccinations, fertility and pregnancy. In it, Dr. Edward Morris, president at the Royal College of Obstetricians and Gynecologists, said: "We want to reassure women that there is no evidence to suggest that Covid-19 vaccines will affect fertility. Claims of any effect of Covid-19 vaccination on fertility are speculative and not supported by any data." He continued: "There is no biologically plausible mechanism by which current vaccines would cause any impact on women's fertility. Evidence has not been presented that women who have been vaccinated have gone on to have fertility problems."

**Question:** Is it possible to have the name of churches that will receive vaccine in the Rochester area?

**Response:** "Churches" is not a vaccination category nor are churches distribution centers. Everyone in a faith community has a different risk level. Vaccine distribution is determined by risk level and type of work (health care personnel and frontline essential workers). Vaccination sites must be registered with the state and meet the requirements to safely administer the vaccine.

**Question:** My faith community consists of two law enforcement departments. Will they be able to receive vaccination soon? Their jobs as first responders puts them in close contact with crowds daily.

**Response:** First responders are considered "frontline essential workers" and are in the 1b category for vaccination.

**Question:** If someone had COVID-19 recently do they need to vaccinate. It has been publicized that they are COVID-19 immune.

**Response:** Immunity post-COVID19 infection is considered to last approximately 3 months, (one study indicated immunity up to 8 months). This is still a new virus and there is much we are learning about it. We are not sure yet how long this natural, post-infection immunity lasts across the population. The vaccines being developed have promising signs of providing longer-term protection from illness, and is being recommended for persons who have recovered from COVID19 after they are no longer symptomatic.

**Question:** I'm hoping to get more information about the possibility of being a carrier even after receiving the vaccine. I hear that you say it is not known. I thought Dr. Osterholm was saying you are a carrier.

**Response:** Research is being done in this area. This is a new (novel) virus and we are still learning a lot about it. Vaccines are just starting to be widely administered. We will know more certain information about this question over time. It is safest to assume that you might be able to be an asymptomatic carrier if re-exposed to COVID after you are vaccinated, and to act accordingly (continue to distance and mask, etc.). *Out of context, we cannot confirm something our colleague, Dr. Osterholm, has said.*

**Question:** Are there ways to have presentation like this for our faith communities to inform them?

**Response:** Yes. You can use this information to present to your own faith community, or if you need someone from MDH to present, let us know at: [Health.FaithBased-Covid19@state.mn.us](mailto:Health.FaithBased-Covid19@state.mn.us) and we can set up a time to present with/for you.

**Question:** Will there be antigen testing to determine immunity after receiving the vaccine?

**Response:** We do not know if individuals will be able to request antigen testing to determine immunity post vaccine, but there will be studies on the effectiveness and length of immunity, likely through antigen testing and other proven methods.

**Questions/Concerns:**

- When will clergy & pastoral staff, e.g. Catholic priests receive vaccinations so they can safely enter long term care facilities safely are care spiritually for their flocks? What about family caregivers for people who are vulnerable, e.g. receiving chemo?
- What is the bottom line for ministers - when are we going to get vaccine?
- Is it possible to have the monks and temple leaders receive vaccine?
- Would faith community nurses be able to get their vaccines sooner? We could see a number of people who are living alone at home.
- Will Pastoral Ministry church employees be considered essential employees for purposes of vaccinations?
- Do we have any idea yet whether ministers and/or those who visit sick and elderly in their ministry might fit into the vaccine distribution plan?
- As a RN employed by a Faith Community seeing clients to advice on health concerns etc. when or where can I get vaccine?

#### **Responses:**

- Some clergy will be prioritized for vaccination differently than others, depending on their specific roles. Those who work in long-term-care facilities may be able to get vaccinated with the staff at those facilities – check with them. Others work in health care systems and/or provide direct service. Reach out to your partners if you are a part time staff in those organizations to see if you can be included in their vaccination roll-out (as some of you have already done).
- The MDH Faith-based outreach team has raised this question with leadership and they will consider this request as they continue to develop and refine the vaccine distribution schedule and who to include in the “essential” and “frontline” worker category.
- We will need to address how you access vaccine if you are determined to be in the frontline essential worker category and are not on staff at an institution that is automatically given the 1b priority. As soon as we have information, we will share it with you and it will be posted on the MDH website: <https://www.health.state.mn.us/diseases/coronavirus/vaccine/stats/index.html>

**Concern:** The biggest issue now from my point of view is getting people vaccinated. Only 30% of vaccines distributed have been used.

**Response:** In MN, we do not have vaccine “sitting there” waiting to be used. Vaccines are allocated by the federal system on Tuesdays. States request as much of their allocation as they can distribute on Thursdays. Then it takes time for them to be shipped. So far, MN has requested the full amount of vaccines in our allocation and distribution and implementation of vaccinations based on the roll-out priorities is occurring as efficiently and safely as possible.

**Question:** Why are people with high risk medical conditions not included in 1b?

**Response:** There are many things to consider when prioritizing the vaccine: risk of exposure, risk of severe illness or death if infected, risk of spreading it to others, role in serving ill patients, level of vulnerability, etc. The categories have been determined by federal and state agencies as well as the Vaccine Advisory Council in MN. The decisions are based on ethical and equitable considerations. Any time there is more demand than supply these decisions are made, and we will continue to work ethically and equitably with our partners to implement vaccinations.

**Question:** What can you tell us about the more contagious mutation of the virus? I understand there are 5 cases of it that have been identified in MN at this point. How concerned should we be? I've read conflicting info about whether the vaccines work against it. Can you address that?

**Response:** With a global pandemic of this scale, a virus is very likely to mutate over time, and go through several mutations before we are through. The new mutation of COVID19 appears to be more contagious and, therefore, more easily spread than the first strain. Early studies show that the vaccines available are equally effective against this strain. Here is more information about this topic: [https://www.reuters.com/article/us-health-coronavirus-pfizer-vaccine/pfizer-biontech-vaccine-appears-effective-against-mutation-in-new-coronavirus-variants-study-idUKKBN29D0DX?utm\\_source=reddit.com](https://www.reuters.com/article/us-health-coronavirus-pfizer-vaccine/pfizer-biontech-vaccine-appears-effective-against-mutation-in-new-coronavirus-variants-study-idUKKBN29D0DX?utm_source=reddit.com)

**Question:** I have staff questioning if temperature checks for key volunteers at Mass are necessary or effective. What is the latest thinking on temperature checks?

**Response:** Screening of volunteers and employees is an optional strategy that you can use. Performing screening or health checks will not be completely effective because asymptomatic individuals or individuals with mild non-specific symptoms may not realize they are infected and may pass through screening. Encourage individuals to self-screen prior to going leaving their home. All volunteers should continue to follow wearing of masks, social distancing and frequent washing of hands.

**Request:** Please include links re fetal cells in vaccines. Thank you.

**Response:** A good reference is the CDC (Centers for Disease Control and Prevention) website. It has information on a variety of topics about vaccines and immunizations. [What's in Vaccines? Ingredients and Vaccine Safety | CDC](#)

**Question:** Might persons who are diabetic or on dialysis be more prone to have a toxic reaction to the vaccine?

**Response:** Having underlying medical conditions or a disability does not make a person more susceptible to a reaction. If you have been told your immune system or metabolic systems are different, you may want to talk to your doctor. Otherwise, the vaccine is safe for most people. And, as always, if you have questions, talk to your doctor.