



Frequently Asked Questions

Q. What is the schedule and process for the vaccine clinics at Living Branches?

A. Vaccines at Living Branches will be provided through CVS; persons in Pennsylvania receive the Pfizer vaccine. At this time, we have two tentative dates for vaccine clinics. One will be at Souderton Mennonite Homes on January 4 and the other will be at Dock Woods on January 7. CVS technicians will come to residents in their apartment/residence, so you will not need to go anywhere to receive the vaccine.

Every person requires two doses of the vaccine in order for it to be effective. Those doses should be given 21 days apart. CVS will return to Souderton Mennonite Homes on January 25 and Dock Woods on January 28 to provide the second dose of the vaccine.

Q. What do I need to do in order to be vaccinated?

A. Persons who wish to be vaccinated need to sign a consent form and provide copies of insurance cards. While there is no cost for the vaccine, CVS will bill your insurance company for administration expenses. The social worker in your level of care will provide the consent form and obtain copies of your insurance cards if we do not already have them. If a family member needs to give consent for you, we can obtain the consent form electronically or through verbal authorization.

We have reserved enough vaccines with CVS for each resident in Health Care, Memory Care, and Personal Care at Souderton Mennonite Homes and Dock Woods to receive a vaccine. If you do not wish to be vaccinated, or if you have questions before making a decision, please email vaccines@livingbranches.org.

Please note: an additional clinic will be scheduled to vaccinate residents at The Willows of Living Branches. We have received initial communication from CVS regarding this clinic, but do not have the official date yet.

Q. How does the vaccine work?

A. The vaccine from Pfizer uses a technique known as mRNA, or messenger RNA. These vaccines give instructions for our cells to make a harmless piece of what is called the 'spike protein'. This protein is found on the surface of the coronavirus that causes Covid-19.

Once these vaccine instructions, or mRNA, are injected, our cells use it to make the spike protein; then the instructions are broken down and eliminated. The protein piece is displayed on the cell surface, triggering our immune system to make antibodies against it, just as it would if it were exposed to the real coronavirus that causes Covid-19. In this way, the body learns how to protect itself when and if the real virus shows up.

The mRNA vaccines don't use the live virus that causes Covid-19, nor does the mRNA get into the cell's nucleus, which is where our DNA (genetic material) is stored.

Q. How do we know if the vaccine is safe?

A. It's important to know that vaccines go through more testing than any other pharmaceuticals. Before any vaccine is made available, it must go through rigorous development and testing. Manufacturing is critical — every dose must consistently be high quality. Additionally, extensive testing in clinical trials is conducted to prove safety. The first step is for small groups of people receive the trial vaccine. Next the vaccine is given

to people with particular characteristics (e.g., age and physical health). Then the vaccine is given to tens of thousands of people and tested for effectiveness and safety.

After that, the data is reviewed by the FDA which approves the vaccine, and by an independent board, CDC's Advisory Committee on Immunization Practices (ACIP) which will make its recommendations for use. These bodies are the final safeguards for the public ensuring any vaccine is both safe and effective.

Q. How could they make the vaccine that quickly and still have it be safe?

A. There are multiple reasons this vaccine was developed both rapidly and safely. They are:

1. This coronavirus was very similar to viruses for which we already had vaccine research underway. Many of the teams pursuing vaccines for SARS-CoV-2 (the scientific name of the new coronavirus) have previously worked on vaccines for the original SARS virus, which caused a 2003 outbreak that killed some 800 people, and MERS, which has caused 2,500 cases since 2012.
2. This is the biggest public health emergency we have had in our lifetimes and governments, agencies, and foundations are all investing billions of dollars to develop vaccines. That level of funding allows research and manufacturing of the vaccine to proceed much more rapidly than it normally would.
3. Red tape in the vaccine approval process is being cleared out of the way. This not the first time that has happened; it also happened during the Ebola crisis. That gave government regulators experience and more comfort with the idea that they could have greater flexibility in the vaccine approval process than they normally would have. For example, clinical trials include three increasingly large phases that establish how safe and effective a drug or vaccine is. But with the Covid-19 pandemic, some of the trials have been collapsed into Phase 1/2 or Phase 2/3 trials. It's a very technical distinction, but it can shave weeks or months off the process by saving research teams from having to write new protocols or get additional clearances.

Q. What are the possible side effects from receiving the vaccine?

A. The Pfizer vaccine trials included more than 44,000 people. An FDA analysis of the vaccine's safety and effectiveness on people aged 16 and older found "no specific safety concerns" that would preclude the vaccine's use. Some mild to moderate side effects are common — mostly swelling, pain, redness at the injection site, fatigue, and sometimes fever that resolves within about 24 hours.

You will be monitored for 15 minutes after getting a Covid-19 vaccine to see if you have an immediate reaction. Most side effects happen with the first few days after vaccination and last no more than three days. If you experience side effects after getting the vaccine, it doesn't mean that you have Covid-19. It means that the vaccine is working.

If you have a reaction that prevents you from being able to eat, sleep, or work, contact your doctor. Also contact your doctor if you have a reaction that lasts longer than three days.

Signs of an allergic reaction include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. If you have any of these signs, seek care immediately.

Q. Who can get the vaccine?

A. The vaccine has been approved for persons age 16 and older.

Q. Once I have been vaccinated, how long does it take until I develop immunity?

A. It takes time for the mRNA to deliver the message to your cells, the cells to start making the spike protein, and then for the antibodies to be created. It will take a few weeks after the second dose for you to develop immunity—if the vaccine works for you. Remember that the vaccine has about 95% effectiveness, so about 5% of persons taking the vaccine will not become immune.

Q. If I've had Covid-19 should I get vaccinated anyway?

A. It appears that getting vaccinated when you've been infected in the past is safe — in both the Pfizer and Moderna trials, about 5% to 10% of volunteers turned out to have already been infected. Many experts say the extra protection of getting vaccinated might be helpful even if you had Covid-19, because most experts think immunity from having Covid may only last about 90 days or so.

Q. I don't want to get vaccinated now. Can I wait for a later date?

A. There is a limited supply of vaccines available across the world. Living Branches is able to offer vaccines now because skilled nursing and CCRCs (life plan communities) have been identified as top priority for vaccine distribution. If you do not receive a vaccine now, we have no information about when you might be offered another opportunity to get one. Presumably it would be when they are available to the general public, and that is expected to be late summer or fall at the earliest. We are strongly encouraging all Living Branches residents and staff to get their vaccine now.

Q. Are there preservatives in the vaccine? I'm concerned that I could be allergic.

A. The vaccines do not contain any preservatives, thimerosal, or egg products, so persons with allergies to those ingredients are unlikely to be affected. If you have any concerns, please speak with your physician.

CDC recommends that people with a history of severe allergic reactions not related to vaccines or injectable medications—such as allergies to food, pet, venom, environmental, or latex—may still get vaccinated. People with a history of allergies to oral medications or a family history of severe allergic reactions, or who might have a milder allergy to vaccines (no anaphylaxis)—may also still get vaccinated.

There have been a few instances of persons having an anaphylaxis reaction to the vaccine; epinephrine (what is in an Epi-pen) was used to treat the reactions. Everyone who receives the vaccine is required to be observed for 15 minutes to ensure they do not have a reaction, but if you have a history of anaphylaxis, please speak with your physician.

Q. Is there a cost to be vaccinated?

A. There is no cost to you to receive the vaccine. CVS will bill your insurance for the cost of administering the vaccine, but you will not be charged.