

## **MCFN COVID-19 Vaccination Survey**

The MCFN COVID-19 Working Group is working hard to ensure that once vaccines are available to the community, we are able to vaccinate interested community members in a timely, effective, and efficient manner. As part of the planning process, it is important that we gather some information to determine overall community interest in receiving the vaccination. We are kindly requesting that you complete the following survey. You are encouraged to answer all applicable questions, however, providing an answer to every question is not mandatory. **Disclaimer:** All of the questions within this survey have been completed on a voluntary basis.

- 1. Name: \_\_\_\_\_\_
- 2. Age:\_\_\_\_\_

3. # of MCFN Members residing in household: \_\_\_\_\_\_

4. # of non-MCFN Members residing in household:\_\_\_\_\_

5. Are you interested in receiving the COVID-19 vaccine once available? Yes No Unsure

(If you replied 'yes,' to the above, please complete the below. If you replied 'no,' please do not complete the below, if you replied 'unsure' please proceed to question 11.)

## 6. What is your workplace setting? (please check all that apply):

Public Service (ex. Food service, gas station, etc.)

Health Care Worker

Care Giver (child care provider, volunteer driver, providing care to ill/elderly family member)

Other (Please specify) \_\_\_\_\_

## 7. Is there anything you would like to share regarding your health history? (ex. immunocompromised, allergies)





Do you have a Healthcare Provider? (Family Doctor, Nurse Practitioner) Yes 8.

No

9. Are there any barriers that would prevent access to receiving the vaccine outside your home? (i.e. lack of transportation, lack of child care?) if so please provide details below:

10. I would attend a COVID vaccine clinic (check any that apply): inside the MCFN community

outside of the MCFN community

11. Do you require further information on the vaccine before making a decision? If so, please provide details below.

12. Do you have any additional questions?

Please note: the COVID-19 vaccine is currently not available for distribution within MCFN. Completion of this survey will help us determine and advocate for doses directly into the community.

PLEASE RETURN COMPLETED FORMS TO GEORGIA LAFORME, at Gov.Comm@mncfn.ca, or drop off at the admin building in the blue recycling bin, or mail to: 2789 Mississauga Road R.R. #6 Hagersville, Ontario N0A 1H0

Any questions regarding the survey, contact Margaret Copeland at: Margaret.Copeland@mncfn.ca or 905-768-1181 ext: 239



