

Immunization Program Updates Related to the COVID-19 Pandemic

Attention: Physicians, Walk-In Clinics/Urgent Care Clinics, Nurse Practitioners, Midwives, Family Health Teams, Pharmacies, Central LHIN, NSM LHIN, Beausoleil First Nation, Rama First Nation, Moose Deer Point First Nation, Wahta First Nation

Date: Updated April 27, 2020

With the declaration of an emergency in Ontario to help contain the spread of COVID-19 and protect the public, many changes have occurred that impact the Immunization program. While the public health measures currently in place across the province (i.e. physical distancing, travel restrictions, the closure of non-essential businesses) reduce the risk of transmission for many vaccine preventable diseases, it is important that we continue to maintain a high level of immunity in our communities to prevent disease transmission and outbreaks once these measures and restrictions are lifted.

The Ministry of Health is therefore recommending the following guidelines to support continued implementation of Immunization programs at this time:

Immunization Program / Target Group	Priority for Vaccination	Other Opportunities and Considerations
Routine Vaccines for Infants and Children	2 & 4 month vaccines <ul style="list-style-type: none"> • DTaP-IPV-Hib • Pneu-C-13 • Rotavirus 6 month vaccines <ul style="list-style-type: none"> • DTaP-IPV-Hib • Rotavirus 12 month vaccines <ul style="list-style-type: none"> • MMR • Pneu-C-13 • Men-C 15 month vaccine <ul style="list-style-type: none"> • Varicella 18 month vaccine <ul style="list-style-type: none"> • DTaP-IPV-Hib Children that are delayed with their immunizations and on catch-up schedules should continue to receive doses required to complete their primary series. 4 to 6 year boosters can be deferred unless the child is being seen for other care.	If HCPs are seeing infants or children for milestone visits or other urgent health issues, the opportunity to provide immunizations according to the Ontario immunization schedules should be considered at the same time. This includes those individuals that are inpatients in hospital or residents of an institution, where clinical care is continuing to be provided, or in the home where care is continuing to be provided.



Immunization Program / Target Group	Priority for Vaccination	Other Opportunities and Considerations
<p>Routine Vaccines for Adolescents and Adults</p>	<p>14 to 16 year boosters can be deferred unless the adolescent is being seen for other care.</p> <p>Vaccines for adolescents and adults that are delayed can be given at the earliest opportunity.</p> <p>If HCPs are seeing adolescents or adults for urgent health issues or for necessary visits such as prenatal care, the opportunity to provide immunizations should be considered. This includes pregnant women who have not received their adult dose of Tdap, and individuals that are in patients in hospital or residents of an institution, where clinical care is continuing to be provided, or in the home where care is continuing to be provided.</p>	<p>As school settings are closed, immunization programs that are provided in schools (hepatitis B, meningococcal-C-ACYW, and HPV) will be delayed. Public health units will provide catch-up opportunities at a later date.</p>
<p>Seniors</p>	<p>Given that COVID-19 illness and outcomes are more severe for seniors and the virus affects respiratory function, opportunities to complete immunizations against pneumococcal disease should be taken. This includes those individuals that are inpatients in hospital or residents of an institution, where clinical care is continuing to be provided, or in the home where care is continuing to be provided.</p>	<p>Having individuals attend a clinic setting at this time only for pneumococcal or other vaccines according to the Ontario immunization schedules should be avoided. This is especially true for individuals over 70 years of age who are being advised to self-isolate at this time.</p>
<p>High-Risk Immunization Schedule</p>	<p>Given that COVID-19 illness and outcomes are more severe for those with certain medical conditions (e.g. immunodeficiency, cardiovascular disease), if HCPs are seeing these individuals for urgent health issues or for other necessary visits, the opportunity to provide immunization should be considered at the same time. This includes those individuals that are inpatients in hospital or residents of an institution, where clinical care is continuing to be provided, or in the home where care is continuing to be provided.</p>	<p>Having these individuals attend a clinic setting at this time only for vaccination according to the Ontario immunization schedules should be avoided.</p>

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Outbreak Response and Case and Contact Management for Vaccine Preventable Diseases	Immunization services for post- exposure prophylaxis, including hepatitis B vaccination to newborns of carrier mothers, and outbreak control as a prevention and management strategy should not be delayed or deferred.	Public health will continue to follow up with any cases of vaccine preventable diseases and make arrangements for immunoprophylaxis as appropriate.
Health Care Workers	Vaccinations for health care providers and those working in health care settings, such as hepatitis B and MMR, should not be delayed as these groups are at increased risk of exposure to vaccine preventable diseases and transmitting them to others.	SMDHU has temporarily suspended the requirement for all new LTCH & Rhone staff to complete TST prior to employment (provided they are asymptomatic) due to the decreased availability of this service in the community.

Grade 7 School Immunization Program

With the current school closure, SMDHU has suspended the Grade 7 School Immunization Program for the remainder of the 2019/2020 school year. There will be a plan for completing any remaining doses of HB, HPV or Men-C-ACYW vaccine that students in grade 7 are still requiring once school resumes.

Infection Prevention and Control Measures to Consider When Providing Immunization

Refer to the Ministry of Health for guidance for primary care providers in a community setting related to COVID-19: http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/2019_guidance.aspx

Refer to Public Health Ontario for guidance on Infection Prevention and Control, Personal Protective Equipment, Disinfection and other related topics: <https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus>

Infection prevention and control strategies to consider for immunization services should include:

- Informing the parent/guardian at the time of booking that only one adult should accompany the child and the other family members should remain at home
- Pre-screening to ensure that ill children or accompanying adults stay home and do not come to the clinic
- Screening at the door to ensure anyone who has symptoms of respiratory illness is sent home and asked to rebook their appointment over the phone or via email
- Posting information on clinic websites and using appropriate signage throughout the clinic to communicate that patients should avoid coming to the clinic if they are feeling ill and proper hand hygiene practices

- If feasible, have a dedicated clinic time and space for immunizations, offered by appointment only
- Avoid using the waiting room by screening, conducting the assessment, immunizing, and completing the 15-minute post-immunization wait in the same clinic room, and/or ensuring physical distancing measures in the waiting area

Delayed and Catch-Up Immunization Schedules

Most routine vaccines which are delayed can be given at the earliest opportunity, and “off-schedule” for children, adolescents and adults. For vaccines that are given as part of a series, the intervals for remaining subsequent doses would be adjusted accordingly. The Canadian Immunization Guide (CIG) states that in general “regardless of the time between doses, interruption of the vaccine series does not require restarting the series as delays between doses do not result in a reduction in final antibody concentrations for most multi-dose products,” with the exception of cholera or rabies vaccine. However, it should be noted that maximum protection is generally not attained until the complete vaccine series has been administered. For this reason, catch-up schedules take into consideration the minimum interval between vaccine doses so that optimal protection can be achieved within the shortest amount of time, while still being effective. Administration of multiple vaccines at the same visit is one strategy for ensuring catch-up immunization.

The one exception to this is the Rotavirus vaccine (RotaTeq®), which is usually given at 2, 4 & 6 months. The first dose can be started as early as 6 weeks but must be given before 15 weeks of age, and the series of three doses must be completed before 8 months of age, with a minimum of 4 weeks between each dose. This schedule is to reduce the potential for adverse events, including intussusception.

Monitoring of Vaccine Fridges if Reduced Office Hours or Office Closure

We recognize that many HCPs have limited their office hours and are unable to fulfill the routine requirement of checking min/max temperatures twice daily at least 3 days a week. We are therefore temporarily reducing this requirement weekly if staff are not regularly in the office. If staff are in the office more than one day a week, they should continue to monitor temperatures as they normally would. Be sure to indicate any office closures in your Temperature Log Book.

To help minimize wastage in the event of cold chain failure, facilities should minimize their vaccine stock accordingly. If your office is currently closed, you can bag your vaccine and return it to your closest health unit office under cold chain and we will store it safely for you until your practice opens again.

Storage and Handling Inspections

With the current measures in place, SMDHU nurses will not be conducting storage and handling fridge inspections at this time. Once measures are lifted, SMDHU nurses will be in touch to book your annual inspection.

If you have any questions, please contact the Immunization program at 705-721-7520 ext. 8806 during regular business hours (Monday to Friday 8:30 a.m. to 4:30 p.m.).