

LTC/RH 2024 Fall Vaccine Campaign Mid-Year Update

To: Chair and Members of the Board of Health

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Prepared By: Shelby Leenders, Manager, Infection Control

Approved By: Christopher Beveridge, CD, MA, CMM, CPHI(C)
Vice President, Health Protection and Emergency Preparedness

Submitted By & Signature: **Original signed document on file.**
Dr. Nicola J. Mercer, MD, MBA, MPH, FRCPC
Medical Officer of Health & CEO

Recommendations

It is recommended that the Board of Health receive this report for information.

Key Points

- As of this update, all Long-Term Care Homes (LTCHs) and Retirement Homes (RHs) are positioned to complete their 2024 Fall Vaccine Campaign. This includes Influenza, COVID-19, and Respiratory syncytial virus (RSV).
- New this year, everyone 60+ living in an LTCH or RH can receive the RSV vaccine.
- In 2023, only LTCH residents were eligible; those who received a dose last year do not require a dose in 2024.

Background

Annual vaccination campaigns protect vulnerable populations from severe respiratory illnesses, especially in LTCHs and RHs. The 2024 Fall Vaccine Campaign targeted three major diseases: Influenza, COVID-19, and RSV. Residents in these settings face unique challenges, including higher risks of disease transmission due to communal living environments and greater vulnerability because of age-related factors and co-morbidities:

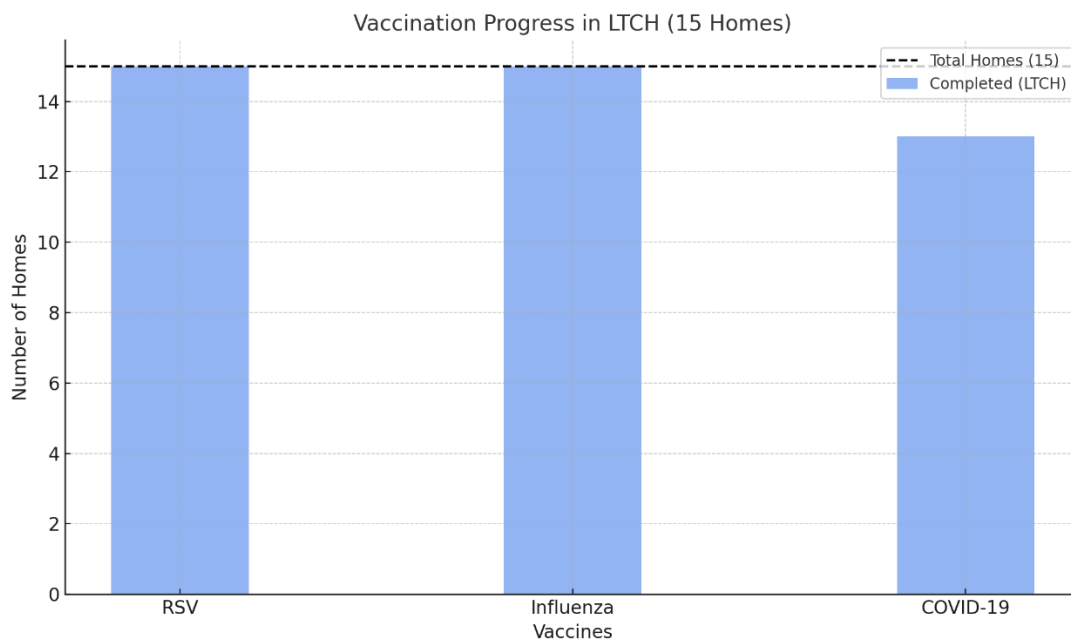
- **Influenza:** Recommended annually for all individuals 6 months and older, with special emphasis on people who live in LTCHs and RHs being preferential to receive high-dose vaccine options.¹
- **COVID-19 Vaccination:** Updated vaccines targeting the KP.2 strain available for those 6 months and up.¹
- **RSV Vaccination:** Newly available vaccines for adults 60 and older.¹

The campaign planning began in the spring of 2024, leveraging a collaborative approach with LTCH/RH administrators, local pharmacies, families and residents, the Ministry of Health, and family physicians. Early planning ensured a structured and responsive approach to address operational needs and community health priorities.

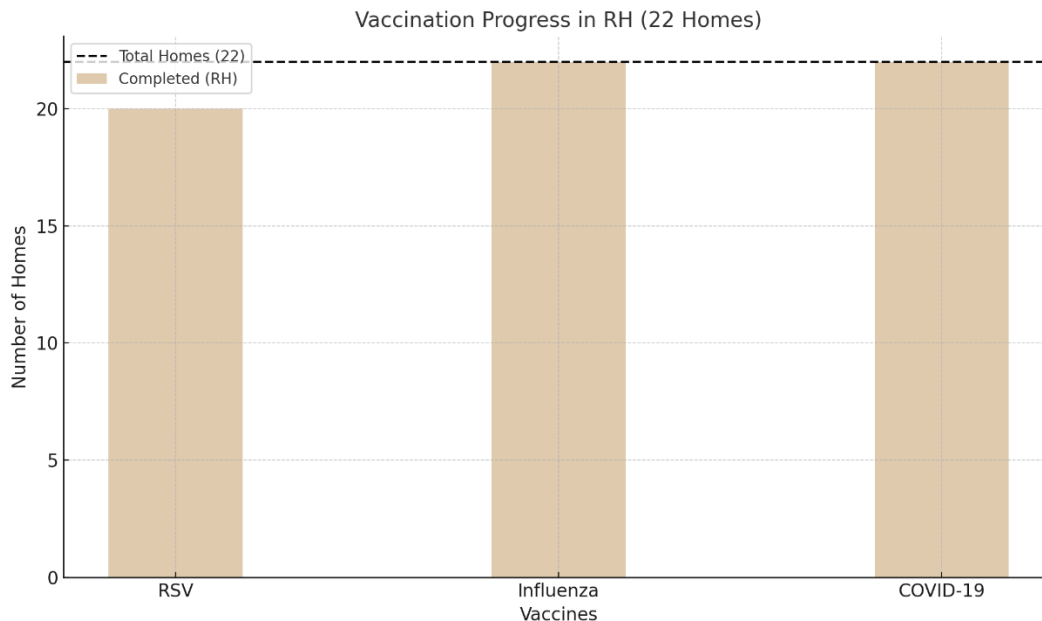
Discussion

The Campaign Progress

The 2024 Fall Vaccine Campaign has been officially underway since September and is set to conclude in December 2024. The current vaccination data for LTCH and RHs are as follows:



All 15 LTCH have either completed or are actively conducting campaigns for Influenza and RSV. Two LTCHs have plans to administer COVID-19 in early December.



Influenza and COVID-19 campaigns are in progress or completed across all 22 RHs. 2 homes are not showing as in progress or complete for the RSV campaign; 1 home has no eligible residents as they all received the vaccine the previous year, and the second home is working through the logistical complexities and finalizing their RSV Campaign.

Supporting Activities

The success of the 2024 Fall Vaccine Campaign relied on comprehensive preparation across six critical areas:

1. **Information Packages:** Detailed materials provided to LTCHs and RHs, including campaign timelines, eligibility criteria, and logistical steps, ensuring home preparedness.
2. **Vaccine Storage Inspections:** Inspections were conducted on all vaccine storage facilities to ensure proper handling and efficacy.
3. **Consent and Coordination:** Homes coordinated vaccine orders through multiple physicians, while staff worked to obtain consent from residents or their substitute decision-makers, often requiring significant outreach efforts.
4. **Education and Awareness:** A virtual information session led by Dr. Mercer addressed vaccine hesitancy and planning barriers with evidence-based guidance to encourage vaccine uptake.
5. **Partnerships:** Collaboration with pharmacies and family doctors facilitated efficient vaccine administration, particularly in larger homes with limited registered staff.
6. **One-on-One Support:** A Public Health Nurse provided tailored assistance, offering one-on-one support to address unique challenges faced by specific homes.

Challenges and Solutions to Date

Several challenges have impacted the campaign's timeline and efficiency:

1. **COVID-19 Outbreaks:**

- Outbreaks in late summer made some residents ineligible to receive the vaccine for at least 3 months after COVID-19 infection. Ongoing outbreaks strained resources and delayed administration schedules.
- **Solution:** Flexible scheduling and enhanced coordination ensured homes could adapt to delays without compromising campaign goals.

2. **Data Management:**

- The use of multiple reporting systems for RSV, Influenza, and COVID-19 vaccines caused inconsistencies and delays in data aggregation, delaying the availability of accurate dose counts.
- **Solution:** End-of-season data consolidation and ministry reporting will provide a complete overview, allowing for detailed analysis and reporting.

3. **Billing Barriers:**

- There are limitations with pharmacists providing RSV vaccine administration, creating logistical hurdles for homes relying on pharmacies to support their campaign.
- **Solution:** With the Public Health Nurse support, homes adapted their vaccination plans by leveraging other partnerships or building an in-house campaign.

4. **Consent and Coordination:**

- Obtaining consent remained a time-intensive process involving multiple physicians and family members.
- **Solution:** Early initiation of consent and coordination efforts significantly improved timelines compared to previous years for many homes.

Health Equity Implications

This campaign is grounded in a commitment to health equity. By prioritizing access for residents in LTCHs and RHs, the campaign addresses systemic barriers that disproportionately affect older adults and individuals with chronic conditions. The targeted approach ensures that those most at risk receive essential vaccines, mitigating the likelihood of severe health outcomes and reducing strain on healthcare resources.

Conclusion

The 2024 Fall Vaccine Campaign has made significant strides in protecting residents of LTCHs and RHs from respiratory illnesses. Through comprehensive planning, robust partnerships, and a steadfast commitment to health equity, the campaign has successfully enhanced vaccine accessibility. As the campaign continues, WDGPH remains focused on continuous improvement, leveraging lessons learned to inform future vaccination efforts.

Ontario Public Health Standards

Foundational Standards

- ☐ Population Health Assessment
- ☒ Health Equity
- ☒ Effective Public Health Practice
- ☒ Emergency Management

Program Standards

- ☐ Chronic Disease Prevention and Well-Being
- ☐ Food Safety
- ☐ Healthy Environments
- ☐ Healthy Growth and Development
- ☒ Immunization
- ☒ Infectious and Communicable Diseases Prevention and Control
- ☐ Safe Water
- ☐ School Health
- ☐ Substance Use and Injury Prevention

2024-2028 WDGPH Strategic Goals

More details about these strategic goals can be found in [WDGPH's 2024-2028 Strategic Plan](#).

- ☒ Improve health outcomes
- ☐ Focus on children's health
- ☒ Build strong partnerships
- ☐ Innovate our programs and services
- ☐ Lead the way toward a sustainable Public Health system

References

1. Public Health Agency of Canada. National Advisory Committee on Immunization (NACI): Addendum to the Seasonal Influenza Vaccine Statement 2024–2025 [Internet]. Ottawa: Government of Canada; 2024 [cited 2024 Nov 19]. Available from: <https://www.canada.ca/en/public-health/services/publications/vaccines-immunization/national-advisory-committee-immunization-statement-addendum-seasonal-influenza-vaccine-2024-2025.html>