
TO: Chair and members of the Board of Health

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Recommendations

It is recommended that the Board of Health:

1. **Receive this report for information.**

Key Points

- In Ontario, Public Health is mandated to assess, maintain and report the immunization records for students attending primary or secondary school in accordance with the *Immunization of School Pupils Act* (ISPA) and the *Immunization Management Protocol, 2017*.
- In the 2016/17 school year, Wellington-Dufferin-Guelph Public Health (WDGPH) sent 10,645 immunization notices to families of children aged 7-17 years old who did not have up-to-date immunization records with WDGPH.
- 83% of students notified updated their records prior to the deadline and 1,817 students were issued suspension orders.
- 397 statement of conscience or religious belief exemptions were applied in the 2016/2017 school year.
- The assessment of immunization records and suspension of students who did not meet ISPA requirements was effective at increasing immunization rates.
- The compliance rate has increased substantially over the past year. Less than 5,000 students are estimated to have incomplete records in the 2017/2018 school year.
- Moving forward, WDGPH will continue to work with school boards and licenced childcare centres towards improving immunization compliance rates prior to students becoming eligible for suspension.

Immunization of School Pupil's Act

The Immunization of School Pupils Act (ISPA) requires all families with children attending school to provide Public Health with proof of their child's immunization against designated diseases.

Health Units are required to assess students' immunization records. Students without the required immunizations or a legal exemption may be suspended from school.

2016/2017 Activities



Parents continue to be informed that they are responsible for reporting their children's immunizations.

Parents are encouraged to use the WDGPH online tool to report immunizations.



In January 2017, 10,645 letters were distributed to students / parents / guardians informing them that WDGPH did not have their complete immunization records.

From January 1 to March 31, 2017, WDGPH nurses provided 4377 immunizations to students who were overdue for scheduled vaccinations.



397 statement of conscience or religious belief exemptions were filed.

1817 students were issued suspension orders. 85% of secondary and 90% of elementary students updated their records and were back in school within a week.



Planning for 2017/2018



In the 2017/2018 school year the immunization records of all students will be assessed. Students between age 7 and 17 with incomplete records will be suspended.

Additional work will be completed with parochial schools to include them in the suspension process as appropriate.



5000 students are estimated to have outstanding records or overdue vaccines during this school year.

WDGPH is changing a process based on feedback from the community. The immunization notices will be mailed to students rather than distributed through the schools to make sure parents do not overlook the notice.



On April 12, 2018, secondary school students who have not reported their immunizations to public health will be suspended.

On January 31, 2018, elementary school students with incomplete immunization records will be suspended.



Public Health's Role and the ISPA

Ontario's *Immunization of School Pupils Act* (ISPA) currently requires that parents of children attending primary or secondary school provide their local Medical Officer of Health with proof of their child's immunization against designated diseases. Public health units are required to assess immunization records and contact parents of students for whom they do not have complete immunization records. Exemptions from immunization requirements are allowed for medical reasons, such as prior immunity or medical contraindications, or can be based on an affidavit of conscience or religious belief. Students without required immunization records or a valid exemption may be suspended from school until the required records are provided to public health.¹ Suspension of students is a last resort and it is the goal of WDGPH to provide ample opportunities to avoid this outcome.

Public Health Ontario (PHO) continues to refine how they monitor coverage rates for vaccines required under the ISPA with the Panorama database. It is important for all health units to follow the Ministry guidelines for records assessment and suspension processes as this affects the validity of the PHO coverage data for the province. Since 2016/2017 was the first year WDGPH assessed all student records, the coverage data for this year has not yet been provided by the Ministry and the data from 2015/2016 would not accurately reflect coverage for Wellington, Dufferin and Guelph (WDG) communities.

During the 2016/2017 school year, the immunizations of all WDG students in public, private and Catholic schools were assessed. The Mennonite and parochial schools were assessed for incomplete records but children were not suspended from these school. WDGPH is aware that many of these children were at risk of not returning to school if a suspension was enforced and many of these children already experience barriers to education.

In January 2017, 10,645 letters were distributed to students/parents/guardians informing them that WDGPH did not have their complete immunization records. These letters also included the student's overdue vaccinations and instructions for submitting records, along with a deadline for submission. During the month of February, WDGPH provided immunization clinics in each secondary school to provide students with easy access to immunization services. Additional WDGPH clinics were added during March break and after school hours to accommodate the volume of students requiring updated immunizations. From January 1st to March 31st, 2017 WDGPH nurses provided 4,377 immunizations to students who were overdue for scheduled vaccines.

	Assessment Letters Sent Out in January 2016	Overdue Pre Secondary School clinics	March 20
Elementary School	4,663	3,883	2,506
Secondary School	5,982	4,912	1,008
Grand Total	10,645	8,795	3,514

Parents and students were advised that failing to update their immunization records could result in suspension. Several measures were implemented to help support families that may experience additional challenges in having their children immunized:

- The assessment and suspension timeline allowed a minimum of five weeks for students with incomplete immunization records to become up to date before students were suspended. This was done to accommodate families who may have needed extra time

to access immunizations or submit records. During this time, families had several options for both receiving immunizations and submitting records.

- The decision was made not to suspend students who could have been at risk for adverse events if unable to attend school. WDGPH nurses worked closely with school staff to identify these students. Once identified, these families were contacted and offered support in accessing immunization or submitting records. In some cases, if a student's records could not be brought up to date, the decision was made to forego suspension.
- Due to the volume of records remaining outstanding in February, a robo-calling software system was implemented using the primary phone number parents provided to their school. A phone call was initiated for each student/family with outstanding records along with information regarding upcoming clinics.
- The Vaccine Preventable Disease (VPD) program converted to a live answer phone system in order to offer more timely and helpful immunization advice to parents. From the time that the call centre system was activated until the end of suspension (January 9 - April 24), public health nurses answered 3,161 calls from community members on the Vaccine and Immunization Help Line.
- The elementary school suspensions were divided across two days to account for the high number of elementary schools that public health nurses had to assist with the suspension process and provide improved customer service to parents of elementary students.
- Over 85% of secondary students and 95% of elementary students returned to school within a week of receiving suspension orders. In cases where students were suspended for more than a week, public health nurses followed up with the principals and families to discuss any barriers that may have stopped families from updating their child's immunization records. Support was offered to help these students update their records and return to school as soon as possible.

Table 1. The number of secondary school students who did not meet ISPA requirements at specific points in the assessment and suspension process.

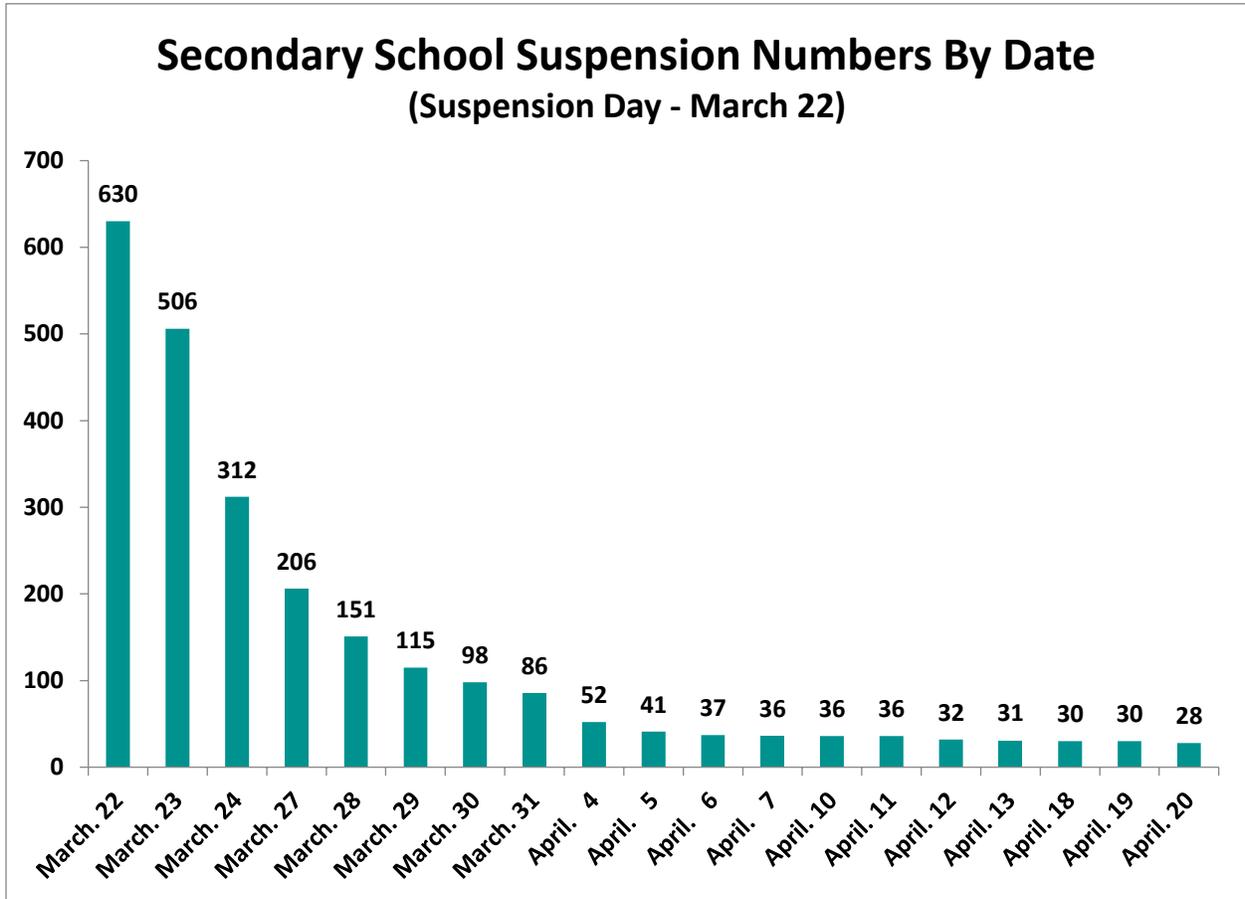
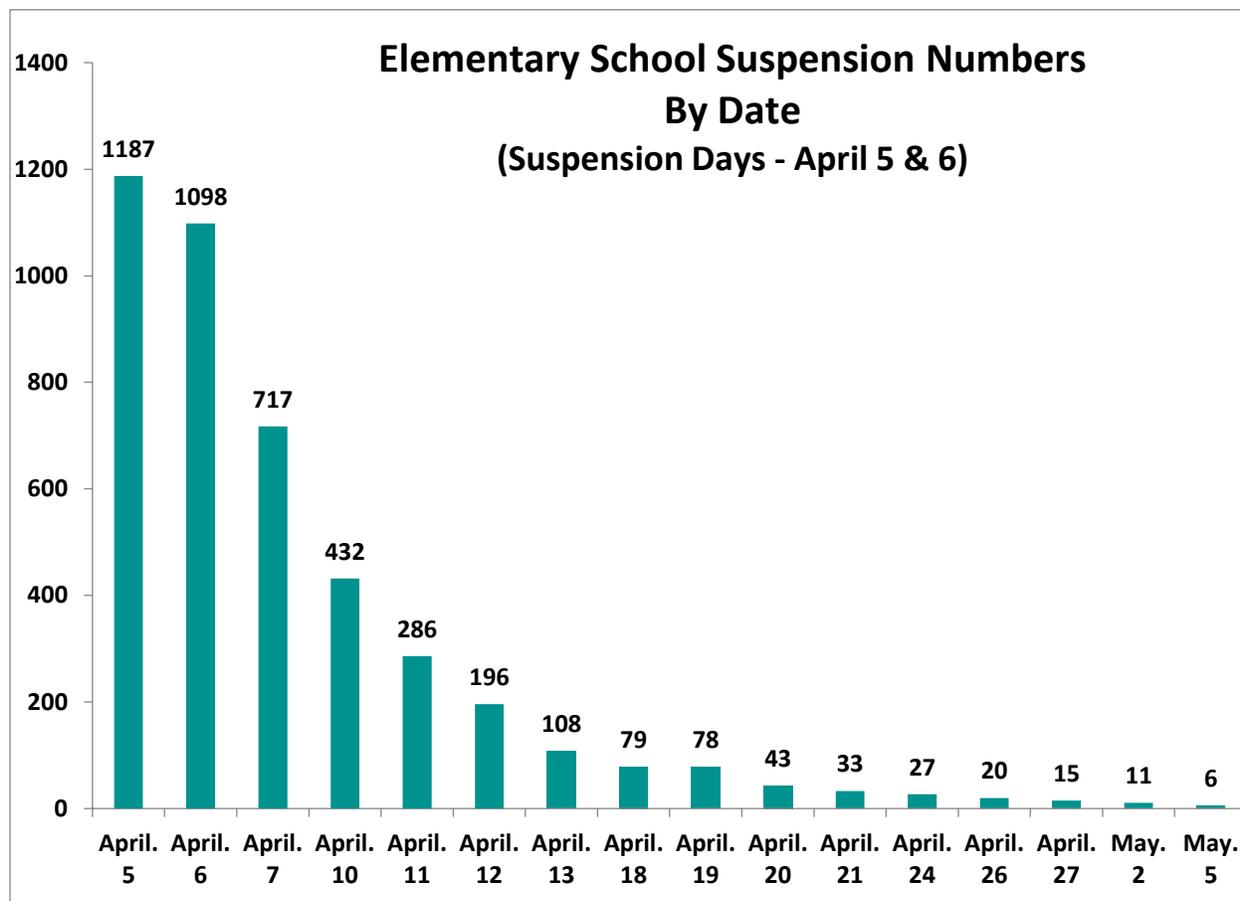


Table 2. The number of elementary school students who did not meet ISPA requirements at specific points in the assessment and suspension process.



WDGPH nurses followed up with all of the students/families of the students who did not submit records prior to the deadline and throughout the suspension period of 20 days. In several cases, families did not update their child’s records because the child was not attending school at that time. If the student was not currently attending school or out of the country, there was little incentive to report immunizations to Public Health.

Discussion

Implementing the assessment of all students has resulted in ongoing opportunities for collaboration with school boards as well as extensive interactions between WDGPH nurses, students and parents. Comprehensive assessments and suspensions will assist WDGPH in obtaining accurate immunization coverage data for our communities to inform our programs and practice.

The follow-through on the comprehensive communications campaign targeting school boards, schools, physicians and the public was helpful in reinforcing the message that Public Health would be assessing the records of all school-age children. Each school partnered with a public health nurse during the suspension process and extra staff updated records so Public Health

could be accurate in what it communicated to schools, families and students. The VPD help line staffing was greatly increased and the system switched to a live-answer intake line where parents, physicians, and school staff could call in with questions and receive immediate support.

A key risk for WDGPH enforcing the ISPA is the impact on community relationships. WDGPH continues to reiterate the role of the schools and the responsibilities of the parents/guardians and students in their obligation to be immunized for school attendance. Physician offices continue to experience the impact of increased numbers of patients asking for their immunizations to be updated or records sent to Public Health.

Moving Forward

On September 1, 2017 the ISPA was amended to require parents seeking a statement of conscience or religious belief exemption, to also complete an immunization education session at their local public health unit. In preparation for the 2017/2018 school year, all web-based content and exemption packages were revised and updated. The education component to the application of a statement of conscious or religious belief exemption has been initiated. In summer of 2017, WDGPH also initiated the assessment of immunization records for all children ages 4-6 attending school in WDG and all children enrolled in licensed childcare centres. These families are notified of immunization requirements in order to minimize the number of children facing suspension as per the ISPA in the future. These records will continue to be assessed annually with the VPD help line available to assist parents early with record discrepancies and/or updating vaccines.

Beginning in November 2017, the records for all students ages 7-17 in WDG will be assessed and immunization notices will be mailed directly to all students with incomplete records. The immunization notices will advise families that the student's immunization records are incomplete and will explain how to submit records to WDGPH. The notices will also advise families of the deadline to submit immunization records in order to avoid suspension. Mailings will be completed in waves, by school, to ensure WDGPH has the capacity to assist parents efficiently on the VPD help line.

In February and March, WDGPH will offer clinics in all secondary schools. Parents of elementary children will be encouraged to have their vaccines updated by their family doctor or at WDGPH clinics. Extra clinic times will be made available for families who wish to access services directly from WDGPH. On January 31st, elementary students who are not yet up to date will be issued suspension orders. Secondary students with outstanding records will be issued orders for suspension on April 12th. Public health nurses will work alongside our partners in the school system to assist suspended students in returning to school as quickly as possible.

Conclusion

Outbreaks of vaccine-preventable diseases have become more common globally and across Canada. Aside from the mumps outbreak in two Guelph schools in 2015, there have also been sporadic cases of measles in communities across Canada in the past year. Globally, there are large outbreaks reported in Europe which have subsequently affected several countries.² Preventing sporadic cases from spreading into outbreaks is both time-consuming and a strain on healthcare resources. Infectious diseases do not respect boundaries and with increased

rates of global travel, the benefit of maintaining vaccine coverage rates for all vaccine-preventable diseases remains.

WDGPH continues to experience some challenges during the assessment and suspension process. In some cases, parents report immunizations online that are incomplete. The volume of phone calls from physicians, parents, students, and local school staff affected the workload of WDGPH staff. WDGPH also recognizes the increased workload for local physicians who collaborated with WDGPH in providing immunizations to students with outstanding records. Increased numbers of time-sensitive records to process, combined with parents submitting records close to/after the deadline, negatively impacted the ability of WDGPH to prevent some students from being suspended.

Collaboration with schools was crucial to ISPA-related assessments and suspensions. The lessons from the 2015/2016 year's activities were considered and incorporated into planning. However, the sheer volume of students with outstanding records and the changes from assessing cohorts to assessing all student records makes it impossible to compare to prior years. Overall, feedback regarding the collaboration between schools and WDGPH was positive. Feedback regarding workload for the school staff in regards to the distribution of letters was taken into account for the upcoming school year, as was the large number of calls from parents who did not receive the notification letter through the school distribution system.

Suspension dates for 2018 were chosen in collaboration with the school boards and during the 2017/2018 school year the suspension notices will be delivered one day prior to suspension in order to allow the schools the opportunity to have appropriate supports in place for suspension day.

Ontario Public Health Standard

- VPD Goal: To reduce or eliminate the burden of vaccine preventable diseases.
- There is reduced incidence of vaccine-preventable diseases.
- Target coverage rates for vaccine-preventable diseases are achieved.
- There is increased healthcare provider knowledge of immunization.
- There is increased public knowledge of immunization.
- There is improved effectiveness of publicly funded immunization programs.

WDGPH Strategic Direction(s)

Check all that apply:

Health Equity: We will provide programs and services that integrate health equity principles to reduce or eliminate health differences between population groups.

Organizational Capacity: We will improve our capacity to effectively deliver public health programs and services.

Service Centred Approach: We are committed to providing excellent service to anyone interacting with WDG Public Health.

☒ **Building Healthy Communities:** We will work with communities to support the health and well-being of everyone.

Health Equity

Immunization rates for vaccine-preventable diseases are a recognized health equity concern. Families with fewer social and economic resources are more likely to have children that are not fully immunized.³ To accommodate families who may need extra time to access immunizations or submit records, the assessment and suspension timeline allowed five weeks for students with incomplete immunization records to become up to date before suspending students. WDGPH nurses also worked closely with school staff to identify students who could have been at risk for adverse events if unable to attend school. These families were contacted and offered support in accessing immunization or submitting records.

WDGPH also initiated the assessment process for all young children enrolled in licensed childcare centres and school aged children 4-6 years old. Incomplete records for this age group are flagged and parents notified (on an annual basis moving forward) in order to provide these parents with ample time to receive the required immunizations prior to the risk of suspension from school.

Several parochial and small private schools were identified as having increased numbers of students at greater risk of dropping out of school entirely, if suspended. Although these students were notified of incomplete records, no students were suspended. Moving forward in 2017/2018, a similar approach will be taken as we expand our assessment and suspension efforts within the private and parochial schools where students may be at increased risk.

References

1. Population and Public Health Division, Ministry of Health and Long-Term Care. Immunization management Protocol, 2017. 2017 Sept. Available from http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/immunization_management.pdf
2. Centers for Disease Control and Prevention. Morbidity and Mortality Report. Measles Outbreak — Minnesota April–May 201. July 14, 2017 / 66(27); 713–717. Available from: <https://www.cdc.gov/mmwr/volumes/66/wr/mm6627a1.htm>
3. Child Trends Data Bank. Immunization: Indicators on children and youth. 2015, Dec. Available from <http://www.childtrends.org/?indicators=immunization>.

Appendices

None.