

Clause 12 in Report No. 6 of Committee of the Whole was adopted, without amendment, by the Council of The Regional Municipality of York at its meeting held on April 20, 2017.

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Protecting York Region's School Children through Immunization

Committee of the Whole recommends adoption of the following recommendation contained in the report dated March 24, 2017 from the Medical Officer of Health and Commissioner of Community and Health Services:

1. Council receive this report for information.
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Report dated March 24, 2017 from the Medical Officer of Health and Commissioner of Community and Health Services now follows:

1. Recommendation

It is recommended that Council receive this report for information.

2. Purpose

This report outlines York Region Public Health Branch's role and recent efforts in enforcing the *Immunization of School Pupils Act*.

3. Background and Previous Council Direction

York Regional Council supports the ongoing enforcement of the *Immunization of School Pupils Act*

In February 2016, Council endorsed York Region Public Health's role in [Enforcement of the *Immunization of School Pupils Act*](#) (the Act). The report detailed the benefits of publicly-funded immunization programs, requirements for students under the Act and York Region Public Health's ongoing efforts to improve immunization compliance among the region's students. Council

requested an update on suspension enforcement activities that took place in 2016, along with plans for enforcing the Act among private schools.

Vaccines prevent disease and save lives

Immunization has saved more lives in Canada than any other health initiative in the last 50 years. It is also recognized as one of the most successful and cost-effective health investments available.

Being immunized against vaccine preventable diseases protects an individual from the negative health impacts of infectious diseases. When enough people are vaccinated against a disease, it reduces the likelihood that unimmunized people will come into contact with the infection and limit its further spread. This is known as herd immunity.

Immunization and herd immunity protect everyone: family members, fellow students, co-workers and people who are unable to be vaccinated including babies too young to receive vaccines, individuals with weakened immune systems or individuals allergic to vaccine components.

Publicly-funded immunization programs, like Ontario's, have been extremely effective at preventing diseases that would otherwise cause illness and death in our communities.

The Immunization of School Pupils Act requires proof of immunization for all children attending school

The Act requires that parents of school-aged children, from both public and private schools, provide the local Medical Officer of Health with proof of their child's immunization against the following designated diseases: diphtheria, tetanus, poliomyelitis, measles, mumps, rubella, meningococcal disease, pertussis (whooping cough) and varicella (chickenpox). Most of these designated diseases are highly contagious and all of these diseases can have serious health consequences that can lead to hospitalization or even death.

Students are exempt from this requirement if the Medical Officer of Health is provided with a statement of medical exemption or a statement of conscience or religious belief. The Act is enforced by the Medical Officer of Health to safeguard students and communities against potential outbreaks of harmful disease through the:

- Suspension of students for up to 20 school days if immunization records are not up to date or a valid exemption is on file

- Exclusion of unimmunized or under-immunized students from school if there is an outbreak or immediate risk of an outbreak of a vaccine-preventable disease at a school where the students attend

Changes to the Act have been proposed in the Ontario legislature which, if passed, will require parents seeking exemption to participate in a vaccine education session. The changes would also require physicians to report vaccines administered in their offices directly to public health units. Currently, parents/guardians are solely responsible for reporting and updating their child(s) immunization records to York Region Public Health via fax, mail or online.

York Region Public Health has improved the way publicly-funded vaccines are managed

Improvement 1: Investing in Inspections and Technology

In 2016, York Region Public Health was responsible for the supply-chain management of approximately \$31 million worth of publicly funded vaccines. As part of this, the health unit conducts annual inspections of all publicly funded vaccine storage facilities across the region, including those in health care provider offices, hospitals, pharmacies and long-term care homes. These inspections ensure that vaccines stored outside of the health unit are maintained at an appropriate temperature. In addition, investments in technology, including electronic portable coolers and temperature monitoring systems that continuously monitor temperatures and alert public health staff of any variations, have helped reduce vaccine wastage as a result of adverse storage conditions.

Improvement 2: Hiring Registered Pharmacy Technicians

York Region Public Health was the first health unit in Ontario to employ Registered Pharmacy Technicians. Previously, the work of receiving, counting, storing and processing vaccines orders was the responsibility of other team members. However, in 2016, Registered Pharmacy Technicians were hired to leverage their expertise in the safe handling of complex and expensive pharmaceutical products. Other health units are now reaching out to York Region Public Health to learn from our experiences.

Improvement 3: Responding to complex vaccine system changes

Between 2014 and 2017, York Region Public Health has successfully responded to changes in the publicly funded vaccine landscape including:

- Changing eligibility criteria for publicly funded vaccines (e.g., HPV for Grade 7 boys)

- Increasing number of vaccine brands in the marketplace (e.g., influenza vaccine varieties)
- Introduction of new, costly vaccines (e.g., shingles vaccine)
- Addition of three new vaccines that are required for school attendance
- Pharmacists being legislated to administer influenza vaccine

As a result of these changes, vaccine management is more complex than ever, requiring innovative solutions. York Region has remained ahead of the curve through investments in technology, the employment of Registered Pharmacy Technicians and a commitment to minimizing vaccine wastage while ensuring vaccine safety and effectiveness through the routine inspection of the cold chain.

4. Analysis and Implications

Overview of 2016 Enforcement Activities

York Region Public Health implements an inclusive, comprehensive and collaborative approach to enforcing the Act, minimizing the number of students suspended

Since last reporting to Council in February 2016, York Region Public Health has enforced the Act in the spring of 2016 among 17 year old students attending the region’s Catholic, French and Public high schools and again in the fall of 2016 among 7 and 17 year old students attending the York Catholic District School Board. As seen in Table 1, only 425 (2.5%) students have been suspended to date.

Table 1
Student Suspensions due to Enforcement of the Act, York Region, 2016

Age of Students	Number of Students at Risk of Suspension	Number (and %) of Students Suspended
17 years old: YCDSB*, YRDSB**, and French Schools (Both Spring and Fall 2016)	13,336	385 (2.9%)
7 years old: YCDSB* only (Fall 2016)	3,588	40 (1.1%)
Total	16,924	425 (2.5%)

*YCDSB – York Catholic District School Board

****YRDSB – York Region District School Board**

The health unit has been very successful in minimizing the number of suspensions by:

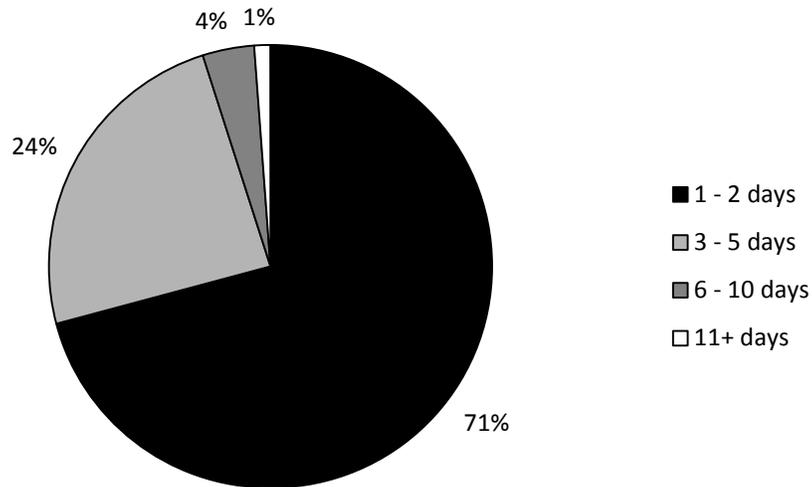
- Sending multiple letters to students at risk of suspension, reminding them of the vaccines required and where they can go to be vaccinated (e.g., public health clinics, their regular healthcare provider or walk-in clinics)
- Providing additional evening and school-based immunization clinics across the region for students at risk of suspension to increase convenient access to immunization. Additional immunization clinics were also held on and immediately following suspension day so suspended students could quickly access the required immunizations and return to school
- Communicating enforcement activities with York Region physicians and partners from the Catholic, French and Public school boards in order to elicit their assistance and support
- Working directly with students in alternative learning environments and co-operative education programs to ensure vaccines can be received without impacting their educational pathways
- Staffing dedicated phone lines to respond to questions and concerns from parents

Enforcement of the Act will continue on a yearly basis to ensure new students comply with the legislation and to ensure that students are vaccinated as they move through the publicly-funded vaccine schedule, before leaving high school.

Public Health enforces the Act to ensure high vaccination coverage rates in school settings. For example, in the 2015/16 school year vaccination coverage for measles, mumps and rubella ranged from 80 percent to 87.5 percent for seven year olds and 93 percent to 96 percent for 17 year olds.

Figure 1 outlines the proportion of total days suspended students were away from school. The majority of students suspended by the Act were in compliance within two days and returned to school.

Figure 1
Total Days Suspended among 425 Suspended Students, York Region



Private Schools are also impacted by the Act

Private school students can also be suspended if their immunization records are not up to date

In York Region, there are 71 private schools with approximately 10,500 students between seven and 17 years old.

Each school year, all private schools provide an annual list of student enrollment to York Region Public Health. In addition, the health unit delivers school-based immunization clinics for hepatitis B, human papillomavirus and meningococcal vaccines in these schools. To date, York Region Public Health has not enforced the Act in private schools. Across the province, other jurisdictions are at various stages of enforcement with some health units fully enforcing and others not enforcing the Act.

Enforcing the Act within private schools requires a collaborative and tailored approach – one size will not fit all

Unlike York Region's Catholic, French and Public school boards, private schools do not have a centralized governing school board. Individual approaches and relationships are needed to effectively work with the 71 private schools across the region. This approach has challenges including keeping track of schools that are operating, determining underlying religious or cultural characteristics of schools related to views on immunization and successful communication approaches with parents and school administration. In essence, working with

private schools to enforce the Act is similar to working with 71 additional school boards.

Given the uniqueness of private schools, York Region Public Health used the first half of the 2016/17 school year to interview private school principals and administrators as part of an environmental scan of York Region private schools.

While awareness of the Act is high, application of the Act differs among the schools. This further reinforces the need for a collaborative and tailored approach for each school to establish an inclusive immunization program that will reach all private school students.

An action plan is being implemented to build relationships with private schools and increase cooperation regarding Act requirements

York Region Public Health has developed an action plan to build relationships with private schools, establish tailored processes and increase education for families with the ultimate goal of increasing the number of private school students in compliance with the Act. Timelines of this action plan include:

- Fall 2016 and Winter 2017: Environmental scan of York Region private schools
- Winter and Spring 2017: Development and distribution of communication materials, including school letters, presentations and updated website information
- Fall 2017 to Spring 2018: Continued implementation of communication tactics
- Fall 2018 and beyond: Implementation of school-specific enforcement strategies, including letters to parents/guardians. Provide opportunities for immunization clinics for private school students.

5. Financial Considerations

In 2016, activities related to the enforcement of the Act were managed within the Public Health Branch approved budget of \$60.6 million and one-time funding received from the Ministry of Health and Long-Term Care of \$119,900. In 2017, program activities related to the enforcement of the Act will be managed within the approved Public Health Branch budget of \$62.6 million. Historically, the Province has provided one-time funding for some of these activities, but these funds are not guaranteed going forward.

6. Local Municipal Impact

There is no direct impact from these recommendations on local municipalities. While enforcement of the Act is a responsibility of the local health unit, this enforcement relies heavily on a partnership with the local school boards to support suspension orders to students.

7. Conclusion

Immunization is an important part of maintaining a healthy community. Raising immunization rates and enforcing the Act protects the health of York Region residents long after they leave school.

Through dedicated, collaborative efforts York Region Public Health has made a significant improvement in compliance rates in both the Public and Catholic school boards. York Region Public Health will continue to work with private schools and their communities to ensure that the health benefits of immunization are shared among all students in York Region.

For more information on this report, please contact Marjolyn Pritchard, Director, Infectious Disease Control at 1-877-464-9675 ext. 74120.

The Senior Management Group has reviewed this report.

March 24, 2017

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Accessible formats or communication supports are available upon request