Hon. Sylvia Jones  
Minister of Health & Deputy Premier  
College Park 5th Flr, 777 Bay St  
Toronto, ON M7A 2J3

Dear Minister Jones,

Re: Expansion of Publicly Funded Vaccines in Ontario Pharmacies

On behalf of the Association of Local Public Health Agencies (alPHa) and its Council of Ontario Medical Officers of Health, Boards of Health Section and Affiliate Organizations, we are writing to provide our input on the above-named consultation, which seeks to assess the potential for expanded routine vaccine administration through pharmacies.

We are aware that this survey has been sent to a variety of stakeholders, including each of Ontario’s 34 public health units. While the channels of vaccine delivery are numerous, immunization is a core function of public health. Local public health units have the capability, experience and know-how to successfully deliver comprehensive and cost-effective population-wide immunization programs. Their submissions will therefore provide your Ministry with more detailed advice on this matter.

Owing to the process and timelines of this consultation, I am confident that you will appreciate that we will not have had had the opportunity to review each of these in detail. We therefore invited our members to suggest key themes that should be amplified. I am pleased to be able to present these here, with a note that these do not represent consensus statements based on a comprehensive survey but rather topics that were suggested to us with some consistency. We recommend you refer to the individual public health unit submissions for specific details and rationale.

**Information management / Central vaccine registry:** maintaining a centralized immunization registry that is accessible to all providers remains an essential support for health care, public health, and the population. Ensuring that comprehensive and current immunization data are available to public health and others who require it is essential for surveillance, assessing vaccine safety, minimizing errors, managing complex immunization schedules, vaccine inventory management, record keeping, and informing outbreak and infection control responses. A comprehensive immunization registry / information system accessible to all vaccine delivery agents should be a foundation upon which the expansion of routine vaccine administration occurs.

**Ensuring optimal, integrated care for all residents:** while immunization is of critical importance on its own, some patients may have additional needs that can best be addressed at the appropriate point of contact. Examples include the routine immunization of young children who may need a more supportive environment, adolescents whose appointments are opportunities to address related developmental and health issues, patients who are off-schedule or have complex needs, or newcomers who may need additional advice and benefit from referrals. Should such individuals choose to avail themselves of pharmacies for their vaccination needs, additional resources should be available to pharmacists to facilitate their ability to meet those needs.
Human resource and infrastructure support: with increased demand on pharmacies as they take on an expanded role in vaccination, consideration will need to be given to ensuring that trained staff are available to meet these additional responsibilities in addition to the ones they already oversee. This will also create additional demands on local public health for its existing vaccine inventory management program, surveillance activities, and other direct support for service providers. In addition to ensuring public health units will have sufficient resourcing to support additional pharmacies, the pharmacy sector would benefit from dedicated human resource and infrastructure support to set this channel up for success.

Public health achieves its aims with greatest success by working in collaborative partnership with numerous community stakeholders. The success of the COVID-19 vaccination campaign in Ontario is a clear illustration of this, with public health clinics, hospitals, primary care, and pharmacies providing multiple options for coverage. We are supportive of building on this success to meet the objective of increasing access to timely immunization for all vaccine preventable diseases for all Ontarians and are pleased that you are gathering valuable input to ensure that the implications of this proposal are carefully examined.

We look forward to working with you and would be pleased to meet with you and your staff. To schedule a meeting, please have your staff contact Loretta Ryan, Executive Director, alPHa, at loretta@alphaweb.org or 647-325-9594.

Sincerely,

[Signature]

Dr. Charles Gardner,
President

Copy: Dr. Kieran Moore, Chief Medical Officer of Health
Dr. Daniel Warshafsky, Associate Chief Medical Officer of Health
Elizabeth Walker, Executive Lead, Office of the Chief Medical Officer of Health

The Association of Local Public Health Agencies (alPHa) is a not-for-profit organization that provides leadership to Ontario’s boards of health. alPHa represents all of Ontario’s 34 boards of health, medical officers and associate medical officers of health, and senior public health managers in each of the public health disciplines – nursing, inspections, nutrition, dentistry, health promotion, epidemiology, and business administration. As public health leaders, alPHa advises and lends expertise to members on the governance, administration, and management of health units. The Association also collaborates with governments and other health organizations, advocating for a strong, effective, and efficient public health system in the province. Through policy analysis, discussion, collaboration, and advocacy, alPHa’s members and staff act to promote public health policies that form a strong foundation for the improvement of health promotion and protection, disease prevention and surveillance services in all of Ontario’s communities.