

The Alberta Outreach Immunization Program

Implementation date: July 2023

Background

The Alberta Outreach Immunization Program focuses on providing immunization services to those at highest risk of severe outcomes, hospitalization, and death due to vaccine preventable diseases; specifically, influenza, COVID-19, and invasive pneumococcal disease. Individuals living in senior congregate care settings are more likely to have underlying health conditions and have no easy access to immunization services in the community, which can increase the risk of poor health outcomes. A comprehensive, coordinated approach to offering immunization services to people living in senior congregate care settings is necessary to reach the goals of the program.

Collaboration, coordination, and communication among the appropriate congregate care setting staff, Alberta Health, Alberta Health Services (AHS) Provincial Partner Oversight (PPO) Team, public health staff, Indigenous Service Canada (ISC), First Nations and Inuit Health Branch (FNIHB), First Nations, and other immunization providers such as pharmacy are critical to strengthen Alberta's capacity to mitigate the impact of vaccine preventable disease on health and contribute to the well-being of seniors in congregate care settings.

The Alberta Outreach Immunization Program includes residents and staff of senior congregate care settings as per the three **definitions** below:

Highest Risk Congregate Care Settings that have 10 or more residents

1. **Long-term Care (LTC)** supports individuals with more complex health needs whose care cannot be safely provided in their own home, or in designated supportive living. Long-term care facilities are sometimes called nursing homes. May include beds designated for alternate level of care, restorative care, or respite care intended for shorter-term, transitional use.
2. **Designated Supportive Living (DSL)** provides accommodation, meals and some health supports yet still allow residents to live independently in a home environment. Supportive living can be in facilities or personal care homes. Care support is on-site if needed for any reason. DSL supports people with health and personal care needs ranging from more stable and predictable (DSL3) to less stable and predictable (DSL4 and DSL4-D). May include beds designated for alternate level of care, restorative care, or respite care intended for shorter-term, transitional use.
3. **Non-Designated Supportive Living (NDSL)** supports permanent residential living where an operator also provides or arranges for services (e.g., meals, housekeeping). May be licensed under the *Supportive Living Accommodations and Licensing Act* (SLALA) or unlicensed. In order to fall into this category, these additional criteria must also be in place:
 - Communal dining as an expected part of service for residents,
 - A senior's population age 65+ (Note that residents less than 65 years of age would also be included).

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The goals of the Alberta Outreach Immunization Program

- prevent severe outcomes due to vaccine preventable disease in the most vulnerable individuals;
- reduce outbreaks in senior congregate care settings; and
- achieve an 80% immunization rate for influenza and COVID-19 vaccines for residents living in senior congregate care settings.

Roles and Responsibilities for immunization providers participating in Alberta's Outreach Immunization Program

Immunization services in congregate care settings will include, at minimum, influenza and COVID-19 vaccines for residents and staff, and pneumococcal vaccine for eligible residents. Immunization services would be offered at least three times prior to and during the peak of influenza activity.

To be considered a partner and service provider for the Alberta Outreach Immunization Program, the following expectations must be met:

1. Comply with the [Immunization Regulation](#) and all Alberta Health immunization policies:
 - a. report immunizations and assessments electronically to Alberta Health;
 - b. report adverse events following immunization to Alberta Health Services;
 - c. follow requirements for the storage, handling and transportation of vaccines;
 - d. ability to assess immunization history to determine eligibility; and
 - e. follow the recommendations included in the [Alberta Immunization Policy](#)
2. Commit to providing immunization services to the facilities for the entire season, including the potential to go back for catch up as stated below:
 - a. Offer both influenza and COVID-19 vaccines to residents and staff as part of the fall outreach immunization program by November 15.
 - b. Multiple doses of COVID-19 vaccine may be recommended throughout the year and all recommended doses should be offered according to the Alberta Immunization Policy.
 - c. At minimum, immunization services would be offered at least three times prior to and during the peak of influenza activity. The **initial vaccine** service delivery must occur within the beginning of October (as vaccine is available) to November 15. A **second visit** between November 16-December 31 and a **third visit** between January 1-February 15 should be scheduled to offer vaccines to new or previously missed residents. Offer pneumococcal vaccines to eligible residents year-round.
3. If one service provider cannot administer vaccine to all residents/staff at a facility, the facility should partner with other providers to ensure all residents/staff have access to immunization services.
4. Collaborate with the facility and provide requested information regarding the immunization service delivery to assist in the program planning and oversight.

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Alberta Health Services (AHS) Provincial Partner Oversight Team (PPO)

Alberta Health Services PPO will lead and coordinate the Alberta Outreach Immunization Program for the congregate care settings (as defined above).

Responsibilities include:

- Collaborating with senior congregate care settings to document the provider(s) responsible for providing immunization services (e.g., facility staff, pharmacy, AHS Public Health).
 - The PPO team will provide instructions to the facilities regarding the required information and submission process.
 - For larger facilities, a combination of facility staff, and specialty or community pharmacies or AHS Public Health nurses, may be needed to ensure all residents have access to immunization services. Therefore, a facility may identify multiple providers, and the necessary information for each provider must be provided to the PPO team.
- Ensuring all facilities have an immunization provider for outreach and collecting the contact information for each provider.
- Providing the senior congregate care facilities with a form to collect the information about the immunization service provider(s). If a pharmacy is the provider, the facility must collect the following information:
 - the full pharmacy name and store number (e.g., Rexall 7220), address, pharmacy contact name, phone number, and email;
 - The Alberta Blue Cross ID (ABCID) and the pharmacy's primary wholesale distributor with account number; and
 - the number of residents and staff (broken down by 65 years of age and older and under 65 years of age) that each pharmacy service provider is responsible to immunize.
- For seasonal vaccines, AHS will provide the Alberta Health Immunization Team a list of facilities where a pharmacy is the immunization service provider with the data elements collected by the facilities as listed above.
 - The list will be shared with the Alberta Health Immunization Team by **August 14**, to facilitate influenza vaccine allocation and delivery schedules for AHS and wholesale distributors.
- Non-AHS pharmacies should direct clinical questions and Alberta Immunization Policy questions to contact health.imm@gov.ab.ca. AHS will not be the direct point of contact for these pharmacies.
- In the absence of another provider (as the last option), AHS will provide the immunization service through AHS Public Health. This must be indicated by **July 28, 2023**.

Congregate Care Settings Owner/Operators/Staff

Owners and operators of facilities are responsible for facilitating immunization services for residents with either using their own facility staff with the authority to provide immunizations, engaging a community or specialty pharmacy, or, if no other provider can be found, as a last option, AHS Public Health.

Responsibilities include:

- Determining if there are on-site staff with the authority and competencies to immunize both staff and residents.
 - If qualified staff are on-site, they are expected to provide immunization services to residents and staff.
 - Facilities that will be administering their own immunizations are responsible for completion of the Provincial Partner Oversight Immunization Outreach Survey and ordering vaccine as per AHS guidance and direction.
 - If on-site staff have limited capacity and can only provide immunizations to a portion of the residents, it is the responsibility of the facility to request and coordinate support from another provider (e.g., community pharmacy).
 - Facilities that do not have RNs or LPNs with immunization competencies on-site should engage pharmacy partners.
- If facilities do not have on-site staff or require an immunization service provider to support the on-site staff, they must provide AHS PPO team with the required immunization service provider details by **July 21, 2023**. The AHS PPO team will provide the Provincial Partner Oversight Immunization Outreach Survey and a worksheet to facilitate completion of the survey to collect the information about the immunization service provider(s). If a pharmacy is the provider, the facility will collect the following information using the worksheet provided:
 - the full pharmacy name and store number (e.g. Rexall 7220), address, pharmacy contact name, phone number and email;
 - The Alberta Blue Cross ID (ABCID) and the pharmacy's primary wholesale distributor; and
 - the number of residents and staff (broken down by 65 years of age and older and under 65 years of age) that each pharmacy service provider is responsible to immunize.
- For larger facilities, a combination of facility staff, and specialty or community pharmacies or AHS Public Health nurses, may be needed to ensure all residents have access to immunization services. Therefore, multiple providers may be identified by one facility. The facility needs to provide the required information for each provider to the PPO team.
- Changes made to the immunization provider offering the service in facilities after **July 28, 2023** may not be accommodated.
- Facilities and immunization service providers will aim to complete most of the on-site immunization to residents and staff for fall outreach immunization programs by **November 15, however, are expected to return to catch-up residents and staff who may have missed the first round.**
- During the fall immunization campaign, facilities will work with immunization service providers on plans and processes to ensure that new or missed residents are up to date with their immunizations. Immunization service providers are to return at least three times during the peak of the season as outlined above under "Roles and Responsibilities for immunization providers".

- When possible, influenza and COVID-19 vaccines should be offered to staff and residents on the same day. While it is ideal to offer pneumococcal vaccines to eligible residents at the same time as influenza and COVID-19 vaccines, it can also be offered year-round.
- In situations where residents cannot provide their own verbal consent, facilities are responsible for obtaining written consent.

Pharmacy Providers

Pharmacies participating in the Outreach Immunization Program will collaborate with Congregate Care Settings Owner/Operators/Staff to administer vaccine(s) on-site.

Additional responsibilities include:

- Collaborating with Congregate Care Settings Owner/Operators/Staff to confirm their participation as the immunization service provider for the Alberta Outreach Immunization Program and commit to the roles and responsibilities for immunization providers participating in Alberta's Outreach Immunization Program (listed above).
- Providing the required information to the Congregate Care Settings Owner/Operators/Staff. The facility will collect the following from the pharmacy:
 - the full pharmacy name and store number (e.g. Rexall 7220), address, pharmacy contact name, phone number and email;
 - The Alberta Blue Cross ID (ABCID) and the pharmacy's primary wholesale distributor and account number; and
 - the number of residents and staff (broken down by 65 years of age and older and under 65 years of age) that each pharmacy service provider is responsible to immunize.
- For influenza vaccines, Alberta Health will provide the vaccine allocations for the Outreach Immunization Program to the appropriate pharmacy wholesale distributors for priority vaccine distribution.
- Ordering COVID-19 and pneumococcal vaccines will be done through routine processes with the pharmacy wholesale distributor.
- In situations where residents cannot provide their own consent, pharmacies are to confirm with the facility that appropriate consent was obtained.
- Immunization policy questions should be sent to the email Health Immunization Inbox email (health.imm@gov.ab.ca), which is monitored during business hours.
- Clinical practice questions should be sent to the Alberta Pharmacy Association or Alberta College of Pharmacy.

First Nation Inuit Health Branch

First Nations and Inuit Health Branch (FNHIB) will collaborate with First Nation Communities that have senior congregate care settings on-reserve or associated with a reserve to identify the immunization service provider and the required amount of influenza, COVID-19, and pneumococcal vaccines.

Responsibilities include:

- Collaborating with First Nations Communities to identify the immunization service provider for the senior congregate care settings.
- Collecting the vaccine requirements for each community.
- Providing the AHS PPO team with the vaccine requirements for each First Nation.

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Alberta Health

Alberta Health is responsible for overseeing compliance with all parts of the *Immunization Regulation*, Alberta Health Immunization Policies, immunization surveillance, vaccine allocation, establishing immunization targets, and providing immunization coverage rates. The Alberta Health Immunization Team will collaborate with AHS as they lead and coordinate the program.

Responsibilities include:

- Updating the Alberta Immunization Policy, including the Roles and Responsibilities for the Alberta Outreach Immunization Program, as required.
- Procuring vaccine for the province.
- Allocating vaccine, creating delivery schedules, and distributing vaccine for:
 - AHS depots;
 - Select rural and remote First Nations; and
 - wholesale distributors.
- Alberta Health Immunization team will receive the list of participating pharmacies and create allocations for the influenza vaccine for each pharmacy. This information will be shared with the primary pharmacy wholesale distributors indicated by the pharmacy for priority vaccine distribution.
 - Each pharmacy will also be informed of their allocation amount in September.
- Answering immunization policy questions from providers through the Health Immunization Inbox (health.imm@gov.ab.ca).
- Calculating the immunization coverage rates for residents of senior congregate care settings.