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2024-2025 Respiratory Vaccination Roll-out

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Agenda

- Previous respiratory seasons and 2024-25 expectations
- Vaccine uptake and information for 2024-25
- Vaccine hesitancy and staff immunization

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COVID-19 and Influenza cases and institutional outbreaks, Middlesex-London, 2019-2020 through 2023-2024 respiratory seasons

	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024
COVID-19					
Laboratory-confirmed cases*	738	12,749	28,565	7,844	2,881
Deaths	57	180	203	117	66
Institutional outbreaks	26	92	176	177	146
Influenza					
Laboratory-confirmed cases	347	0	53	497	819
Deaths	12	0	0	9	10
Institutional outbreaks	11	0	1	8	7

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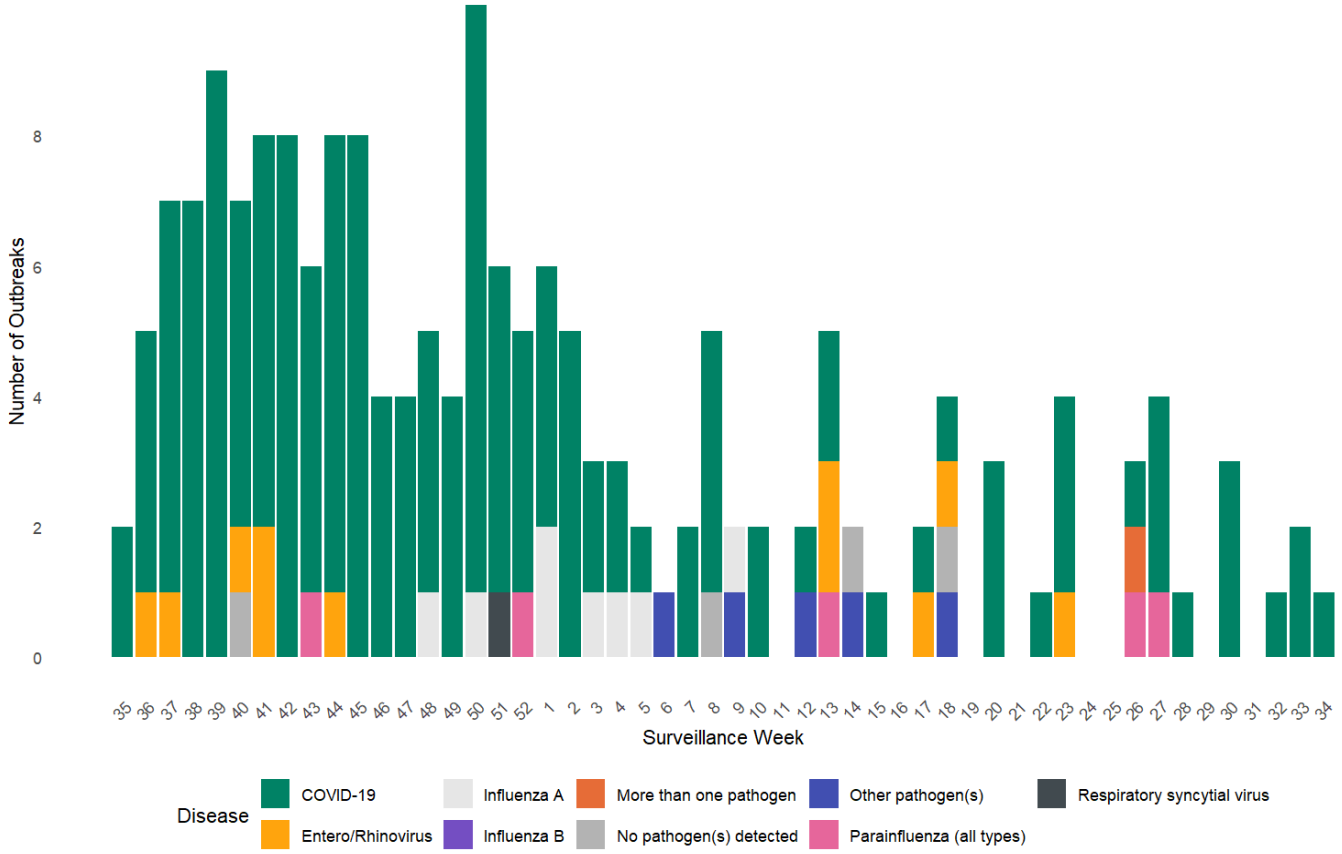
Number of confirmed institutional respiratory outbreaks by pathogen, Middlesex-London, 2023-2024 respiratory season



Source: Ontario Agency for Health Protection and Promotion (Public Health Ontario). Ontario Respiratory Virus Tool [Internet]. Toronto, ON: King's Printer for Ontario; 2024 Aug 30 [cited 2024 Sept 4]. Available from: https://www.publichealthontario.ca/en/Data-and-Analysis/Infectious-Disease/Respiratory-Virus-Tool

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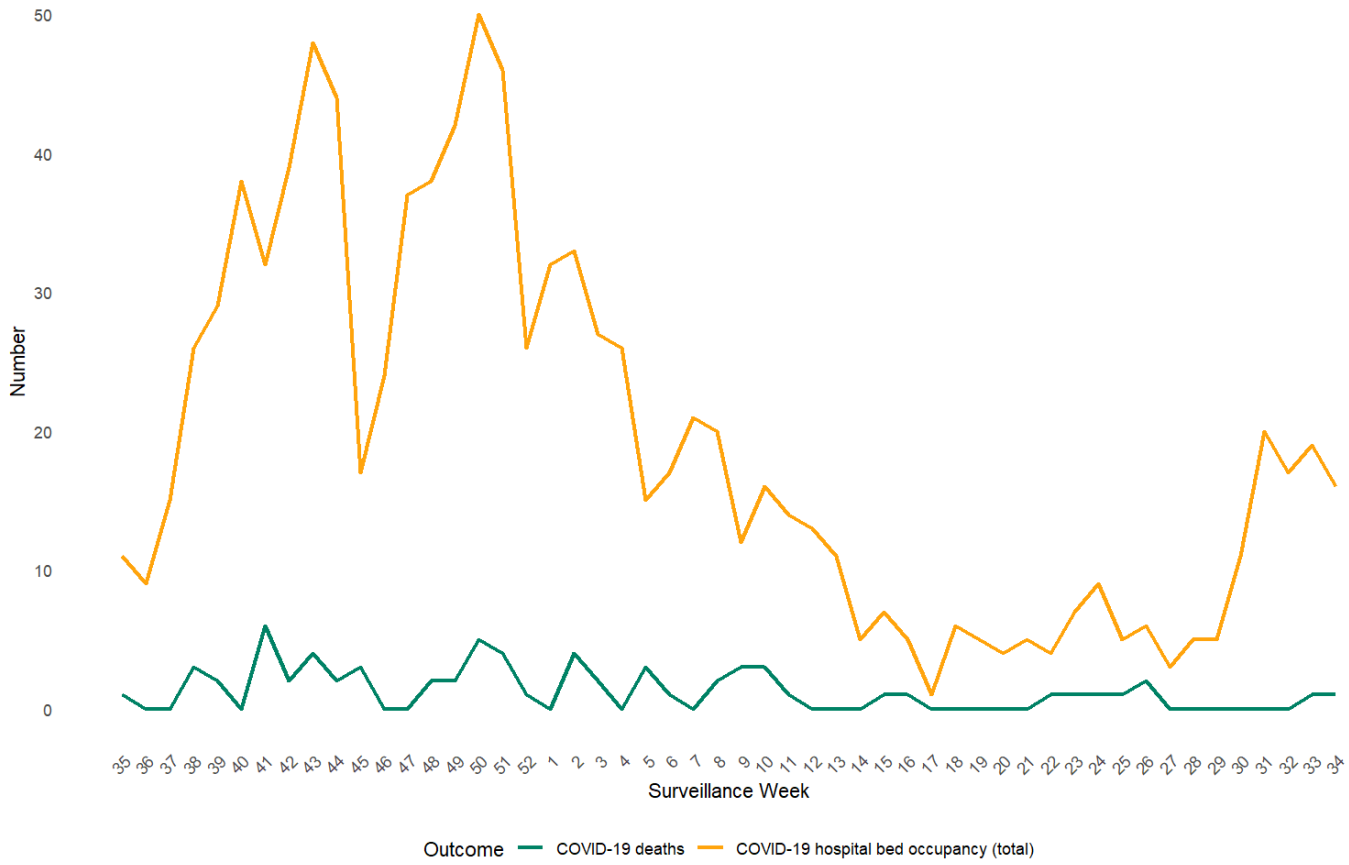
Number of confirmed COVID-19 case hospitalizations and deaths, Middlesex-London, 2023-2024 respiratory season



Source: Ontario Agency for Health Protection and Promotion (Public Health Ontario). Ontario Respiratory Virus Tool [Internet]. Toronto, ON: King's Printer for Ontario; 2024 Aug 30 [cited 2024 Sept 4]. Available from: https://www.publichealthontario.ca/en/Data-and-Analysis/Infectious-Disease/Respiratory-Virus-Tool

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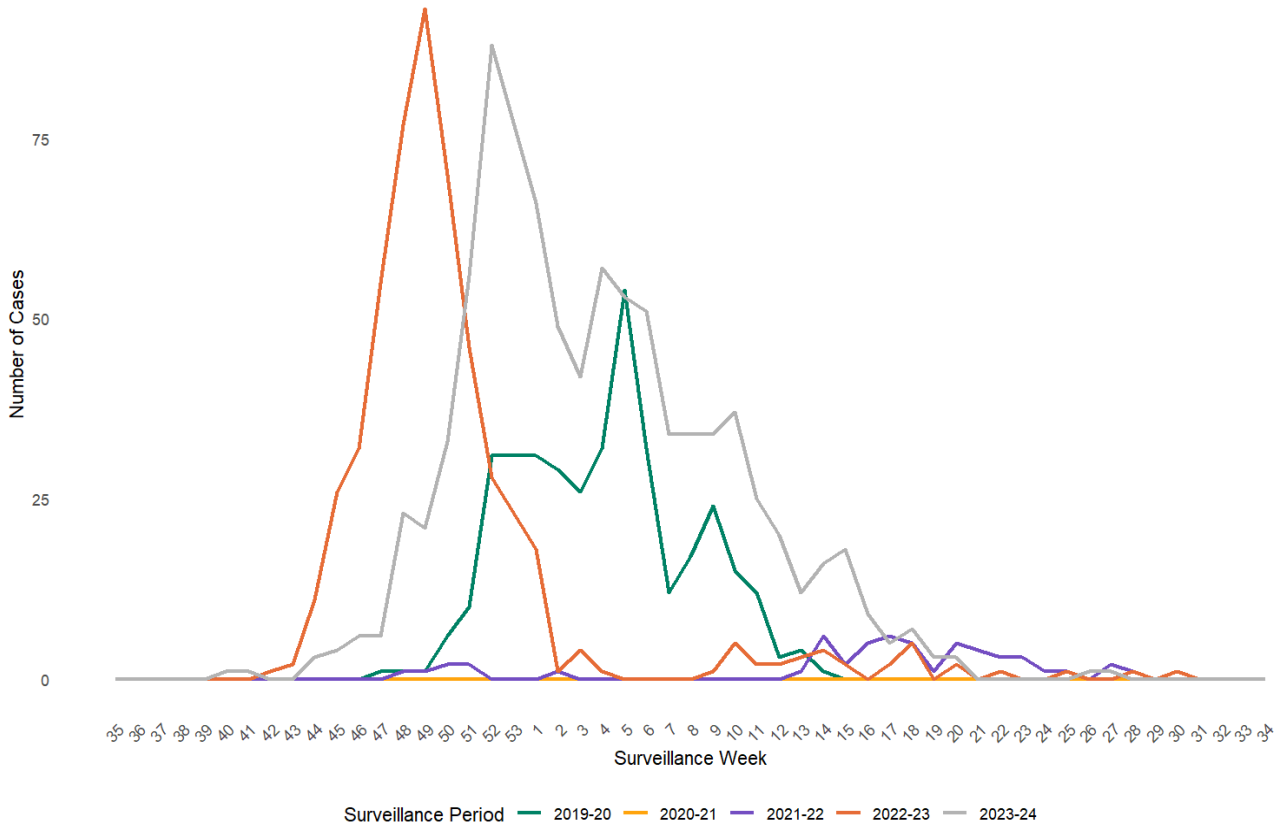
Number of confirmed influenza cases by week, Middlesex-London, 2019-2020 to 2023-2024 seasons



Source: Ontario Agency for Health Protection and Promotion (Public Health Ontario). Ontario Respiratory Virus Tool [Internet]. Toronto, ON: King's Printer for Ontario; 2024 Aug 30 [cited 2024 Sept 4]. Available from: https://www.publichealthontario.ca/en/Data-and-Analysis/Infectious-Disease/Respiratory-Virus-Tool

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Key Takeaways

- Last year was a relatively normal influenza season
- However, last year continued to be dominated by COVID-19
- COVID-19 outbreaks continued through the summer
- Expecting similar trends this year
  - COVID-19 will predominate
  - Respiratory season will be declared early – right around the corner
  - Mixed outbreaks are expected

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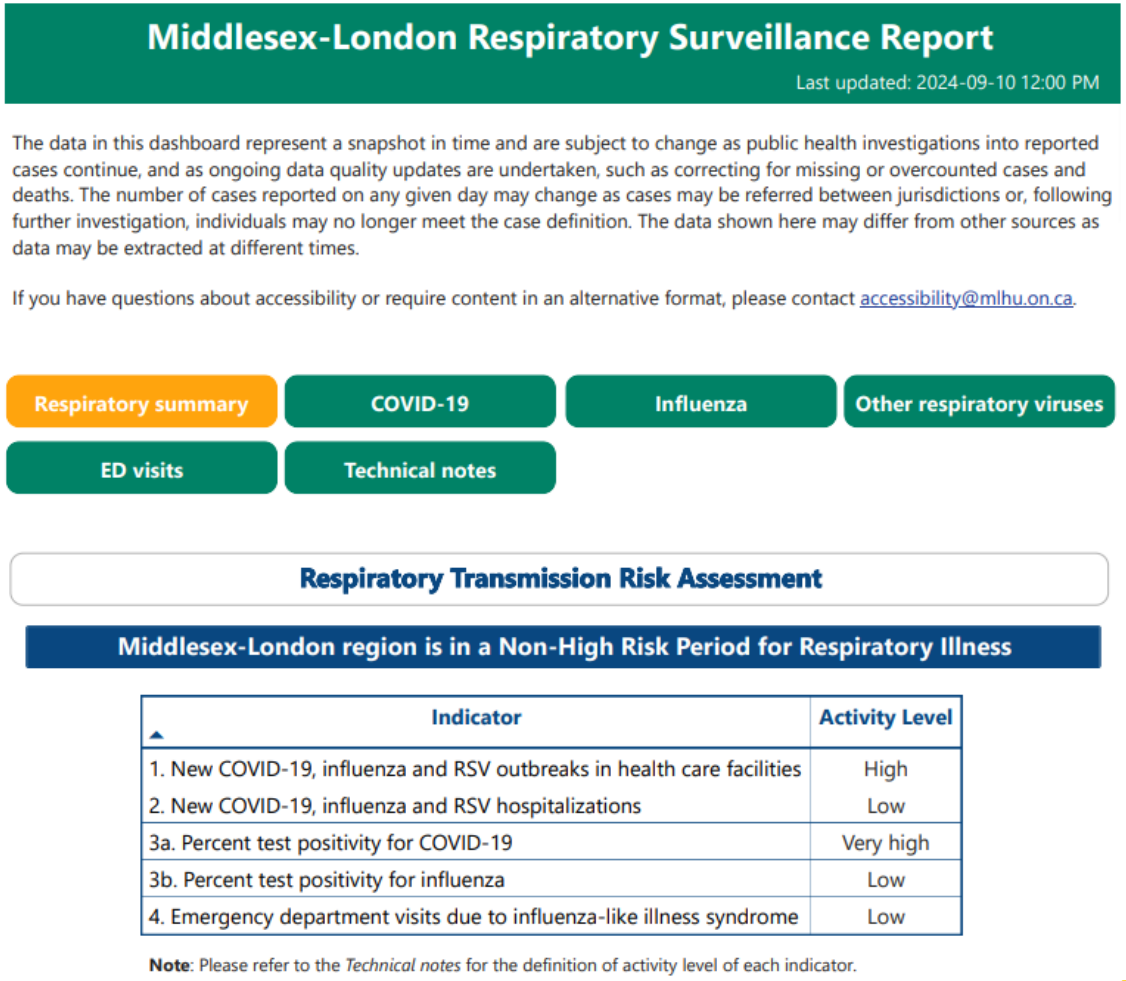
Respiratory 'Dashboard' is Back!

[Middlesex-London Respiratory Surveillance — Middlesex-London Health Unit]



Middlesex-London Respiratory Surveillance Report

Last updated: 2024-09-10 12:00 PM

The data in this dashboard represent a snapshot in time and are subject to change as public health investigations into reported cases continue, and as ongoing data quality updates are undertaken, such as correcting for missing or overcounted cases and deaths. The number of cases reported on any given day may change as cases may be referred between jurisdictions or, following further investigation, individuals may no longer meet the case definition. The data shown here may differ from other sources as data may be extracted at different times.

If you have questions about accessibility or require content in an alternative format, please contact accessibility@mlhu.on.ca.

Respiratory summary | COVID-19 | Influenza | Other respiratory viruses | ED visits | Technical notes

Respiratory Transmission Risk Assessment

Middlesex-London region is in a Non-High Risk Period for Respiratory Illness

Indicator	Activity Level
1. New COVID-19, influenza and RSV outbreaks in health care facilities	High
2. New COVID-19, influenza and RSV hospitalizations	Low
3a. Percent test positivity for COVID-19	Very high
3b. Percent test positivity for influenza	Low
4. Emergency department visits due to influenza-like illness syndrome	Low

Note: Please refer to the *Technical notes* for the definition of activity level of each indicator.

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Vaccine Coverage 2023-2024

- COVID-19 and Influenza vaccines have both been offered each year since 2021
- COVID-19 vaccine had high uptakes at the beginning of the pandemic (mandates, severe illness reports), and subsequent doses have been decreasing over time
- Individuals > 65yrs have the highest uptake of both vaccines
- Many individuals have been opting to receive these vaccines on the same day (71% who received both vaccines last year)
- RSV and pneumococcal vaccines are also part of the overall plan for optimal protection against respiratory viruses and illnesses

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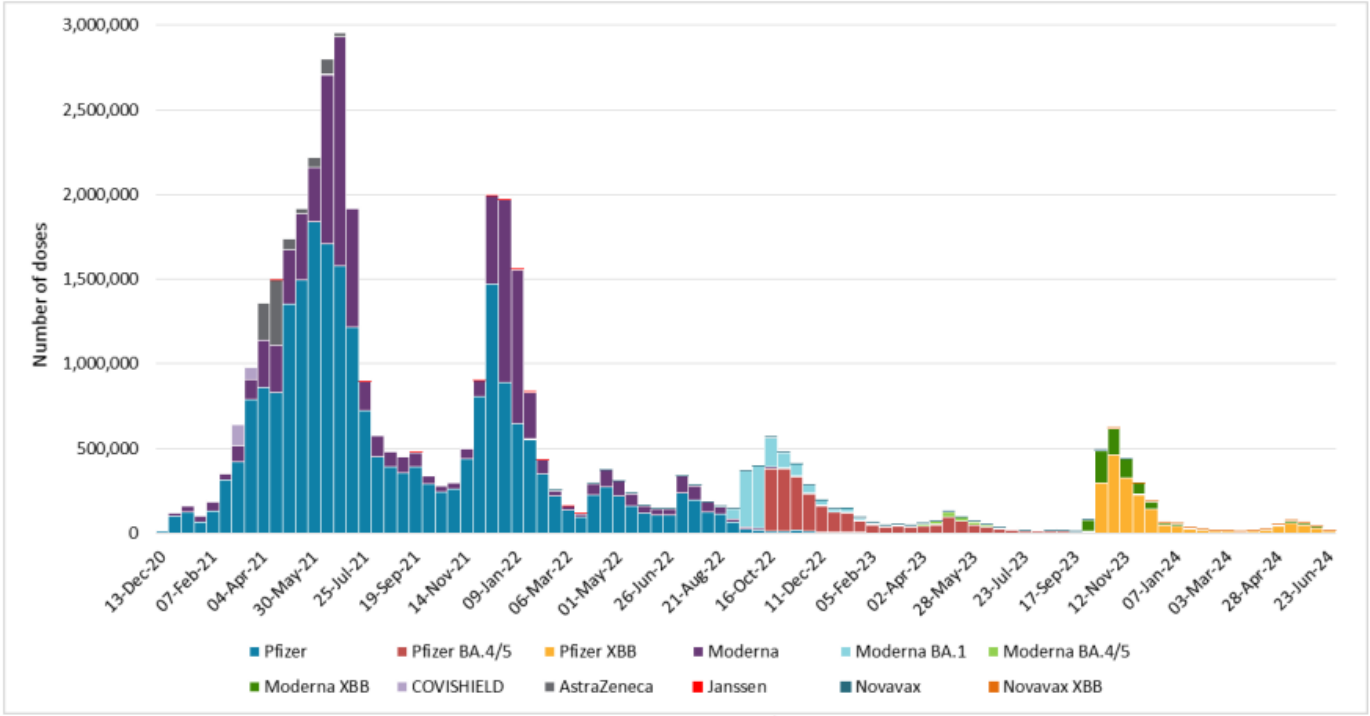
Vaccination Rates - Ontario

Doses Administered

Figure 1. Number of COVID-19 vaccine doses administered over time by vaccine product: Ontario, December 14, 2020 to June 30, 2024



Note: Non-XBB.1.5 COVID-19 vaccine products have now been fully phased out in Ontario.[1]

Source: Public Health Ontario. Surveillance Report; COVID-19 Vaccine Uptake in Ontario December 14,2020 to June 30,2024. (cited 2024 October 11). COVID-19 Vaccine Uptake in Ontario: December 14, 2020 to June 30, 2024 (publichealthontario.ca)

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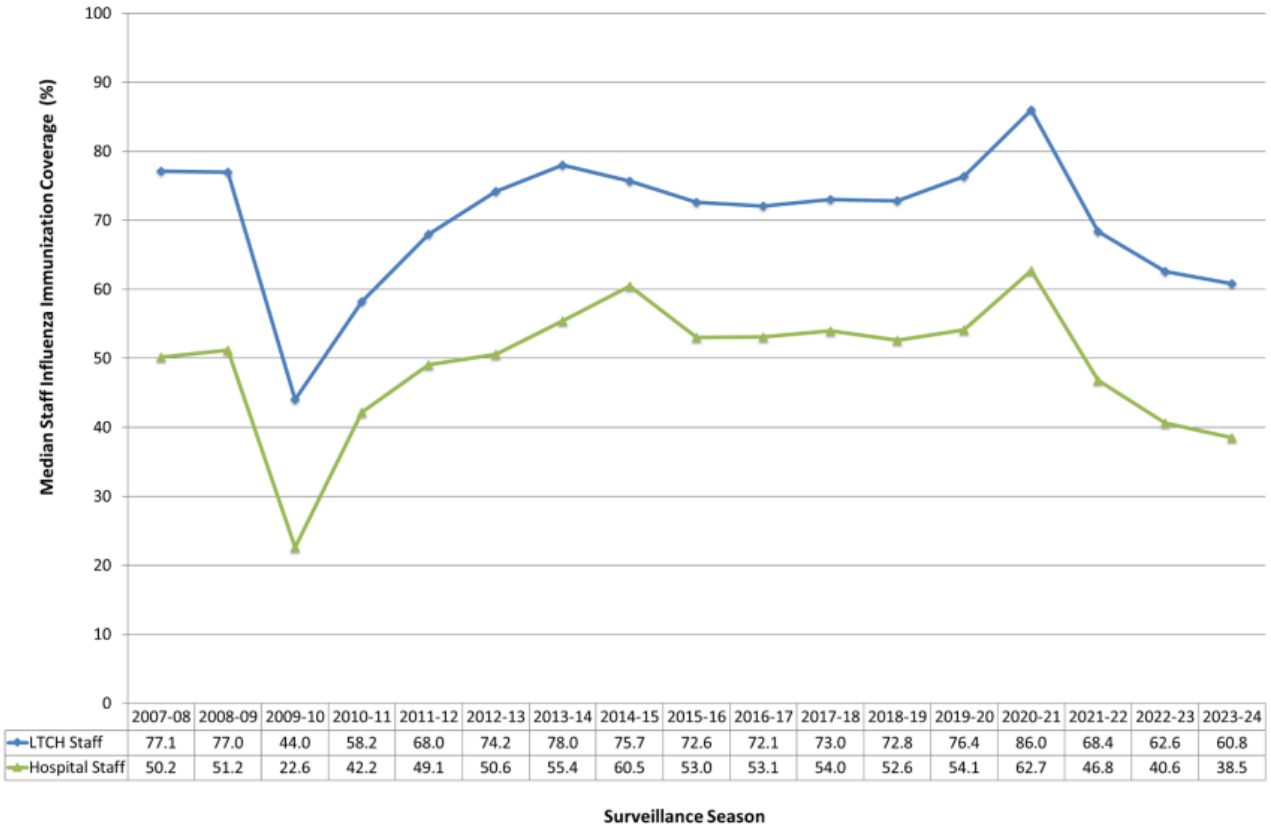
Figure A. Median staff influenza immunization coverage among hospitals and LTCHs, by respiratory virus surveillance season: Ontario, 2007-08 to 2023-24 seasons



	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24
LTCH Staff	77.1	77.0	44.0	58.2	68.0	74.2	78.0	75.7	72.6	72.1	73.0	72.8	76.4	86.0	68.4	62.6	60.8
Hospital Staff	50.2	51.2	22.6	42.2	49.1	50.6	55.4	60.5	53.0	53.1	54.0	52.6	54.1	62.7	46.8	40.6	38.5

Source: Public Health Ontario. Quick Epidemiological Summary: Staff Influenza Immunization Coverage among Hospitals and Long-Term Care Homes, Ontario (July 2024). Staff Influenza Immunization Coverage among Hospitals and Long-Term Care Homes, Ontario (publichealthontario.ca)

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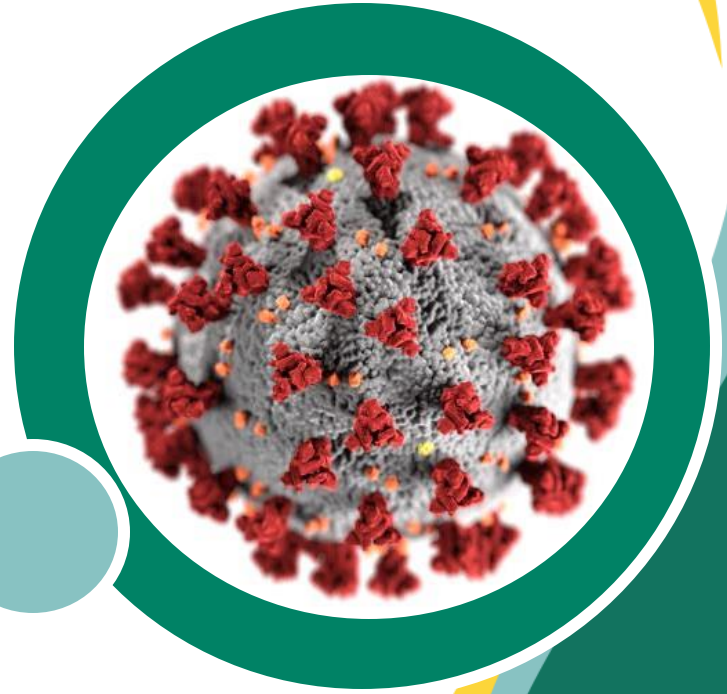
Recommendations for Vaccines in Ontario: Respiratory Season 2024

- While respiratory viruses circulate year-round, there is a significant increase in fall and winter months when individuals tend to gather inside, amplifying the spread of pathogens causing illness
- Immunization is one effective way to prevent spread and severity of illness
- Vaccines that are available to protect against respiratory diseases:
    - Influenza
    - COVID-19
    - Respiratory Syncytial Virus (RSV)



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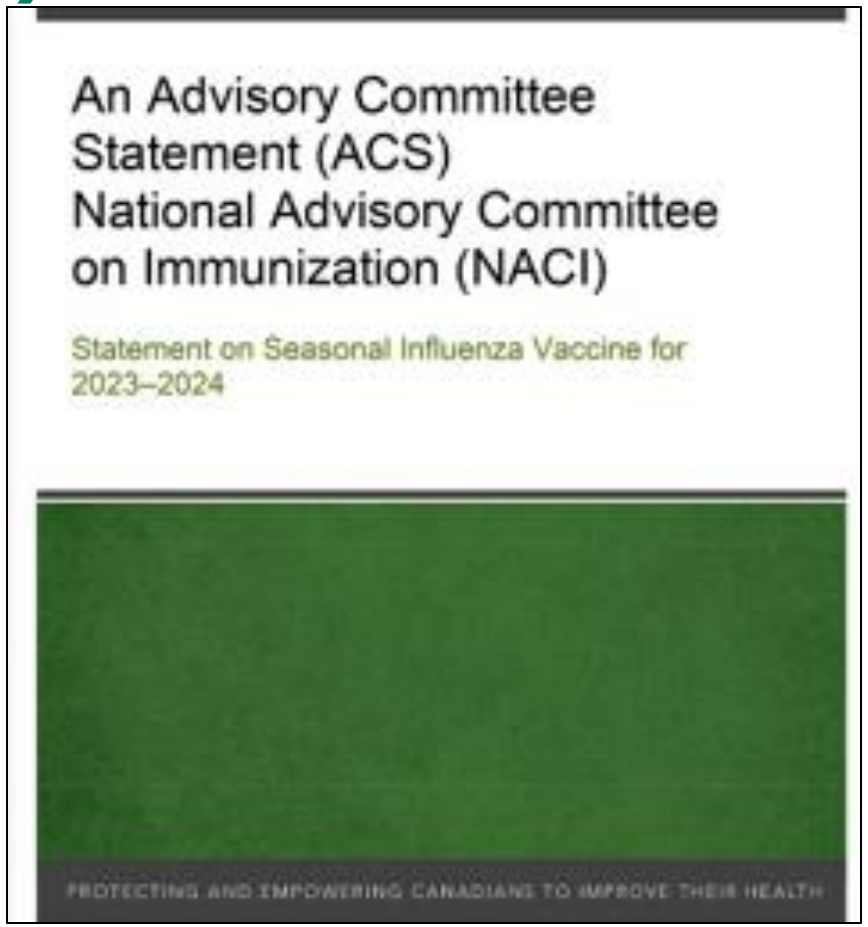
National Advisory Committee on Immunization (NACI) Statements 2024

- NACI is comprised of Canadian experts who state recommendations for vaccines (dosing, eligibility, vaccine types, timing, etc.)
- Every fall, there is a NACI statement for Influenza vaccine, and one for COVID-19 vaccine (takes into account all recent research, updated information and vaccine updates)
- Provinces adapt NACI information into Ministry guidelines and recommendations



Link: National Advisory Committee on Immunization (NACI): Statements and publications - Canada.ca

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NACI Statements

- **Influenza:**
  - NACI recommends that influenza vaccine should be offered annually to anyone 6 months of age and older who does not have a contraindication to the vaccine.
- **COVID-19**
  - COVID-19 vaccination is **strongly recommended** for previously vaccinated and unvaccinated individuals at increased risk of SARS-CoV-2 infection or **severe COVID-19 disease**
  - All other previously vaccinated and unvaccinated individuals (6 months of age and older) who are **not at increased risk** for SARS-CoV-2 infection or severe COVID-19 disease (i.e., not on the list above) **may receive** the most recently updated vaccine in the fall of 2024.
- **RSV**
  - NACI recommends building towards a **universal RSV immunization program for all infants.** NACI recommends RSV immunization programs use nirsevimab to prevent severe RSV disease.
  - NACI recommends RSV immunization programs for adults 75 years of age and older, particularly for those who are at increased risk of severe RSV disease.

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Fall Respiratory Season 2024

Vaccine	Timeline
Influenza – High Risk Individuals COVID-19 – High Risk Individuals	Available now
Influenza – General Population COVID-19 – General Population	Available now
RSV – High Risk Individuals (adults, pregnant women, infants)	Available now
Pneumococcal – individuals >65 yrs	Available now

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Vaccine Campaigns: Ontario

In order to promote Influenza and COVID-19 vaccine co-administration:

- The high-risk criteria has been aligned for both vaccines in most categories
- The vaccine campaigns are timed to happen at the same time, to allow for a focus on the respiratory season overall, including both vaccines
- The vaccines will be available at the same time for efficient ordering and dose administration
- COVID-19 vaccine dosing is one dose for most individuals, which now matches Influenza
- More effective use of health care provider and patient time

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Influenza Vaccine

UIIP Program 2024-25

Coverage of strains:

- A(H3N2)
- A(H1N1)
- B/Victoria lineage
- B/Yamagata lineage (not in TIV-adj)

Age Group	QIV			QIV-HD	TIV-adj
	FluLaval Tetra	Fluzone® Quadrivalent	Flucelvax® Quad	Fluzone® High-Dose Quadrivalent	Fluad®
6 months to 64 years	✓	✓	✓		
≥ 65 years	✓	✓	✓	✓	✓

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Influenza & COVID-19 Vaccines

Eligibility 2024/25:

Should receive vaccine as priority:

Priority Populations	
Individuals with significant exposure to birds or mammals	Health care workers, first responders
Those at high risk of influenza-related complications or more likely to require hospitalization:	
Residents, staff and care providers in congregate living settings (e.g. chronic care facilities, long term care, retirement homes)	People 65 years of age and over
Individuals in or from First Nations, Métis or Inuit communities	All pregnant women
Members of racialized and other equity deserving communities	All children 6 months to 4 years of age
Individuals 6 months of age and older with underlying health conditions	

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Influenza & COVID-19 Vaccines

Eligibility 2024/25:

Should receive vaccine when vaccine opens to the general public (end of October):

Individuals capable of transmitting influenza to those listed in the priority population chart, as well as the following:
-Care providers in the community
-Household contacts (adults and children) of individuals at high risk of influenza related complications
-Persons who provide care to children ≤ 4 yrs of age
-Members of a household expecting a newborn during influenza season
-Those who provide services within a closed or relatively closed setting to persons at high risk of influenza complications
People who provide essential community services

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mRNA COVID-19 Vaccines

Moderna KP.2

- Health Canada approved
- 6m–11yrs (25 mcg / 0.25ml)
- 12yrs + (50 mcg / 0.5ml)
- 5 doses per vial

Pfizer KP.2

- Health Canada approved
- 12 yrs+ (30 mcg / 0.3ml)
- 6 doses per vial
- No reconstitution required

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RSV

	Arexvy	Abrysvo	Nirsevimab (Beyfortus)
WHO	1 dose over the age of 60, for high-risk populations	1 dose over the age of 60, for high-risk populations; OR 1 dose during pregnancy 32-36 weeks gestation	Infants born in the last year (or high-risk up to 24 months)
WHAT	Active immunity	Active immunity for immunized; passive immunity for infant	Passive immunity for infant
WHEN	RSV season	RSV season	RSV season
HOW LONG	Unclear	6 months	6 months

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MLHU Vaccine Activities

- Process COVID-19 and Influenza vaccine orders for Hospitals, LTCH, RH, Health Care Providers
- No mass clinics (will provide mobile clinics for priority populations)
- Hold bi-weekly clinics for children <2yrs of age for COVID-19
- Assist retirement homes with RSV vaccine administration (if required)
- Continue to promote respiratory vaccines and co-administration for all individuals

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Where to go for Respiratory Vaccines in Middlesex/London

	Influenza	COVID-19	RSV (Publicly funded/free)
0 - 6 Months	x	x	All born in 2024 & early 2025
6 months - 2 years	MLHU (& some primary care providers)	MLHU (& some primary care providers and pharmacies)	Primary care provider Eligibility at: www.healthunit.com/respiratory-syncytial-virus
2 - 18 years	Pharmacies (& some primary care providers)	Pharmacies (& some primary care providers)	x
Adults	Pharmacies (& some primary care providers)	Pharmacies (& some primary care providers)	Pregnant people during 32-36 weeks of pregnancy at primary care provider or Ob/Gyn. Older adults who meet high-risk eligibility criteria at primary care provider.
Long-Term Care Home Residents	On-site	On-site	On-site
Retirement Home Residents	On-site	On-site	On-site

For more information: www.healthunit.com

Last Updated: October 17, 2024

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How do we work together to increase vaccine rates and discuss facts about immunization?

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Canadian Stats (2023-2024)

- The most common reason for getting the flu shot was to prevent infection (23%), whereas the most common reason for not getting the flu shot was the perception that the vaccine was not needed (31%).
- The most common reason for not receiving a COVID-19 vaccine in the 2023-2024 Fall campaign was concerns about the safety or side effects of having so many COVID-19 vaccines (19%).
- Despite most people agreeing that the flu shot is safe (87%), 43% of adults mistakenly believed that they could get the flu from the flu vaccine.

Source: Government of Canada (2024). Highlights from the 2023-2024 Seasonal Influenza (Flu) Vaccination Coverage Survey, https://www.canada.ca/en/public-health/services/immunization-vaccines/vaccination-coverage/seasonal-influenza-survey-results-2023-2024.html

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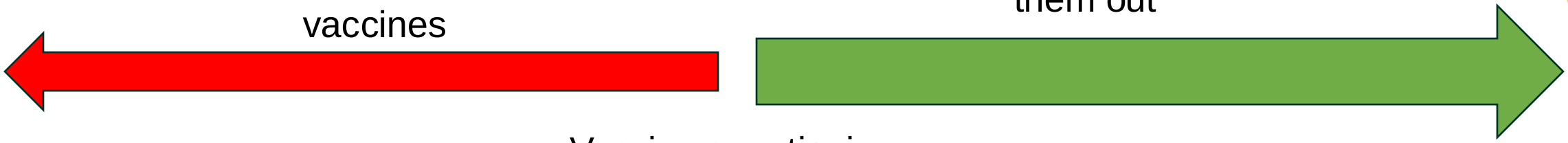
Vaccine hesitant:
May want to talk a bit further about each vaccine, refuses some vaccines

Vaccine accepting:
Accepts all vaccines, may want to spread them out



Fixed anti-vaccine:
Refuses all vaccines

1-2%

Vaccine questioning:
Delays in vaccination, may have specific questions about vaccines

Fixed pro-vaccine:
Accepts all vaccines, on schedule, without questioning

15-20%

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Factors in Vaccine Acceptance: 5 Cs

Confidence

Complacency

Convenience

Collective responsibility & Communication

Context and culture

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Increasing Confidence

Messages that emphasize effectiveness of vaccines

Transparency related to immunization side effects and safety profile

Messages that outline approval process for vaccines

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Increasing Convenience

Increase access to vaccination	E.g., Healthcare Providers, Pharmacies E.g., Provide messaging in multiple languages
Decrease barriers to getting vaccinated	E.g. Provide an onsite clinic at the workplace for staff

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Changing the Context

- Messages that everyone else is getting vaccinated
- Vaccination 'events', creating a social environment, workplace competitions
- Having community leaders encourage vaccination

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Decreasing Complacency

Messages that emphasize seriousness of illness	E.g., News stories of 'low-risk' people becoming seriously ill E.g., Illustrations of death rates before vaccination
Evidence of other public health measures in community	E.g. Masking due to level of risk
Reminders	

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Encouraging Collective Responsibility

Workplace immunization policies

Messages that emphasize risk of illness to others

E.g., Stories told by loved ones

E.g., Sharing rates needed for herd immunity

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Refer to Reputable Resources

- Middlesex-London Health Unit website www.healthunit.com
- Public Health Agency of Canada website and Canadian Immunization Guide - Canada.ca
- Ontario Ministry of Health website www.ontario.ca
- VaxFacts+ Clinic: OHIP-covered telephone consultations with physicians to discuss vaccination questions

Resources that maybe helpful for your staff:

❖ Government of Canada Vaccination for Adults

❖ Government of Canada An Adult's Guide to Vaccination

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Vaccine Hesitancy References

Public Health Agency of Canada (2024). Vaccine Hesitancy in Canadian Parents. Retrieved 2024 October9: https://www.canada.ca/en/public-health/services/publications/healthy-living/vaccine-hesitancy-canadian-parents.html

Gravelle, T. B., Phillips, J. B., Reifler, J., & Scotto, T. J. (2022). Estimating the size of “anti-vax” and vaccine hesitant populations in the US, UK, and Canada: A comparative
latent class modeling of vaccine attitudes. *Human Vaccines & Immunotherapeutics, 18*(1), 2008214. https://doi.org/10.1080/21645515.2021.2008214

Immunize BC. (2021). Immunization Communication Tool 2021.

http://www.bccdc.ca/resourcegallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Immunization/Vaccine%20Safety/ICT-2021.pdf

MacDonald, N. E. & SAGE Working Group on Vaccine Hesitancy. (2015). Vaccine hesitancy: Definition, scope and determinants. *Vaccine, 33*(34), 4161-4164. https://doi.org/10.1016/j.vaccine.2015.04.036

Owen, T., Loewen, P., Ruths, D., Bridgman, A., Saleem, H. M., Merkley E., & Zhilin O. (2020).*Understanding vaccine hesitancy in Canada: Attitudes, beliefs, and the information ecosystem.* Media Ecosystem Observatory. https://www.mcgill.ca/maxbellschool/files/maxbellschool/meo_vaccine_hesistancy_1.pdf

Public Health Agency of Canada. (2021, May 7). *Addressing vaccine hesitancy in the context of COVID-19: A primer for health care providers.* Government of Canada. https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/vaccines/vaccine-hesitancy-primer.html

Razai MS, Oakeshott P, Esmail A, Wiysonge CS, Viswanath K, Mills MC. COVID-19 vaccine hesitancy: the five Cs to tackle behavioural and sociodemographic factors. J R Soc Med. 2021 Jun;114(6):295-298. doi:10.1177/01410768211018951