

# Seasonal Update & Education Session for Long-Term Care & Assisted Living

Viral Respiratory Infection (VRI)  
Viral Gastrointestinal Illness (VGI)



2025/2026

# Territory Acknowledgement

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Vancouver Coastal Health is committed to delivering exceptional care to 1.25 million people, including the First Nations, Métis and Inuit, within the traditional territories of the Heiltsuk, Kitasoo-Xai'xais, Lil'wat, Musqueam, N'Quatqua, Nuxalk, Samahquam, shíshálh, Skatin, Squamish, Tla'amin, Tsleil-Waututh, Wuikinuxv, and Xa'xtsa.

**We wish to acknowledge that the land on which we gather is the traditional and unceded territory of the Coast Salish Peoples, including the x<sup>w</sup>məθk<sup>w</sup>əyəm (Musqueam), Sk̓wx̓wú7mesh (Squamish) and səliłwətał (Tsleil-Waututh) Nations.**

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# AGENDA

## Dr. Rohit Vijn

- *Medical Health Officer*

## Dr. Meena Dawar

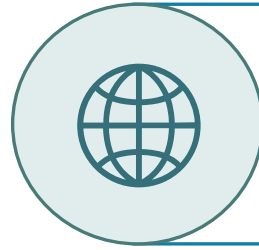
- *Medical Health Officer*

## Raquel Ramos

- *Regional Practice Initiative Lead –  
Nursing, LTC Professional Practice*

## Jacqueline Hlagi

- *Infection Prevention & Control*

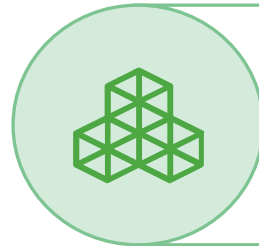


## PRESENTATION PURPOSE

VCH Response, Roles & Responsibilities

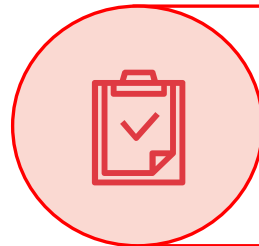


## IMPACTS OF INFLUENZA & COVID-19



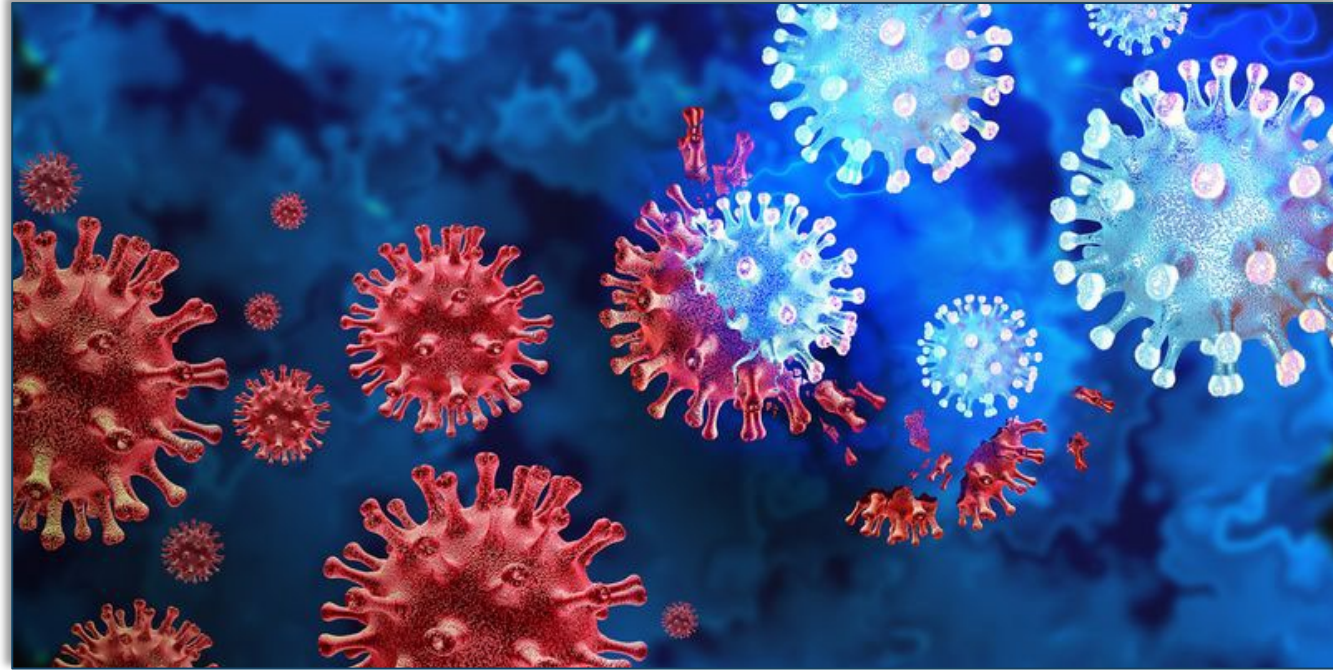
## FALL VACCINATION CAMPAIGN

COVID-19, Influenza, Pneumococcal



## FALL READINESS

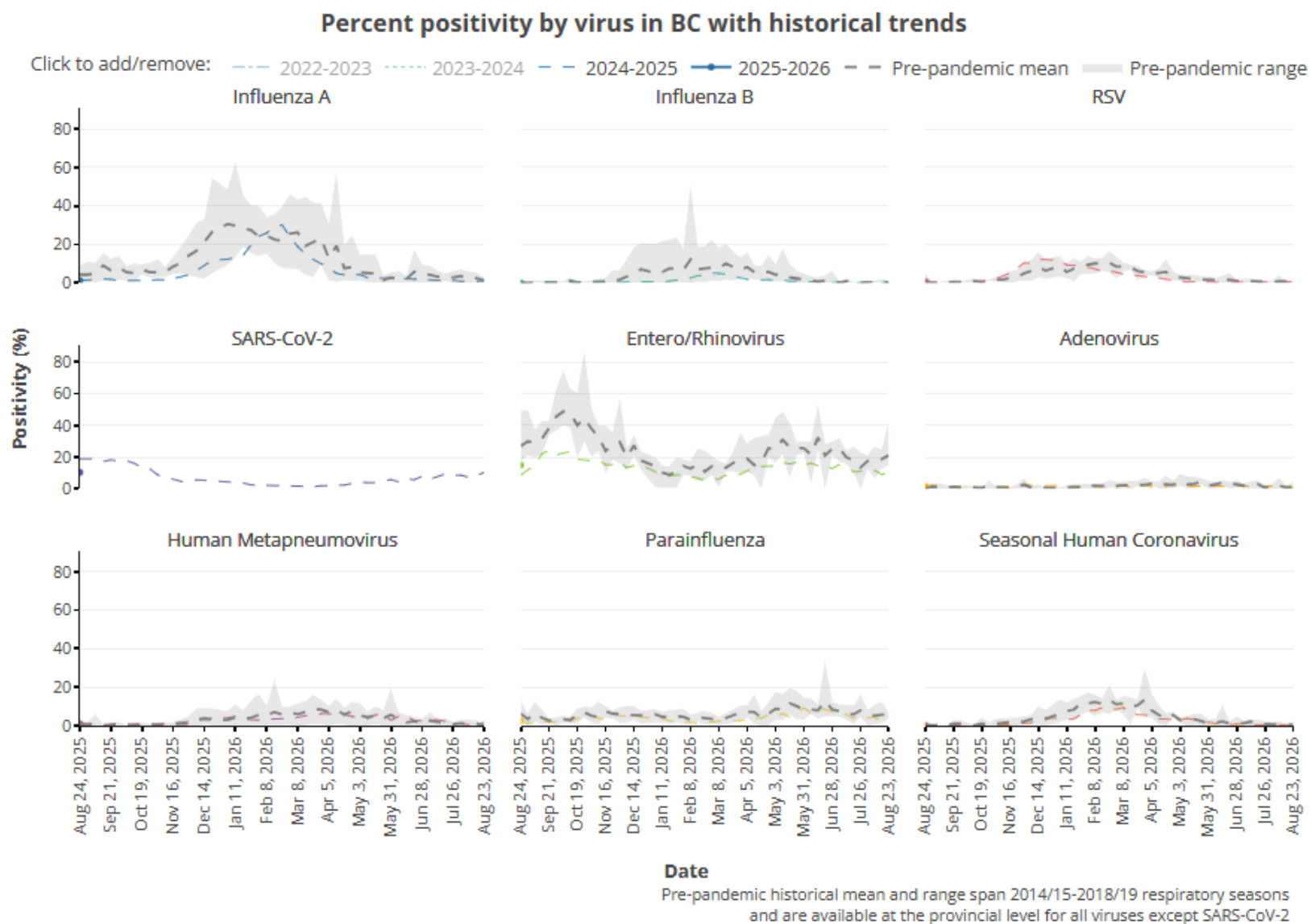
Readiness reminders; Antivirals; Infection Control



# IMPACTS OF INFLUENZA AND COVID-19

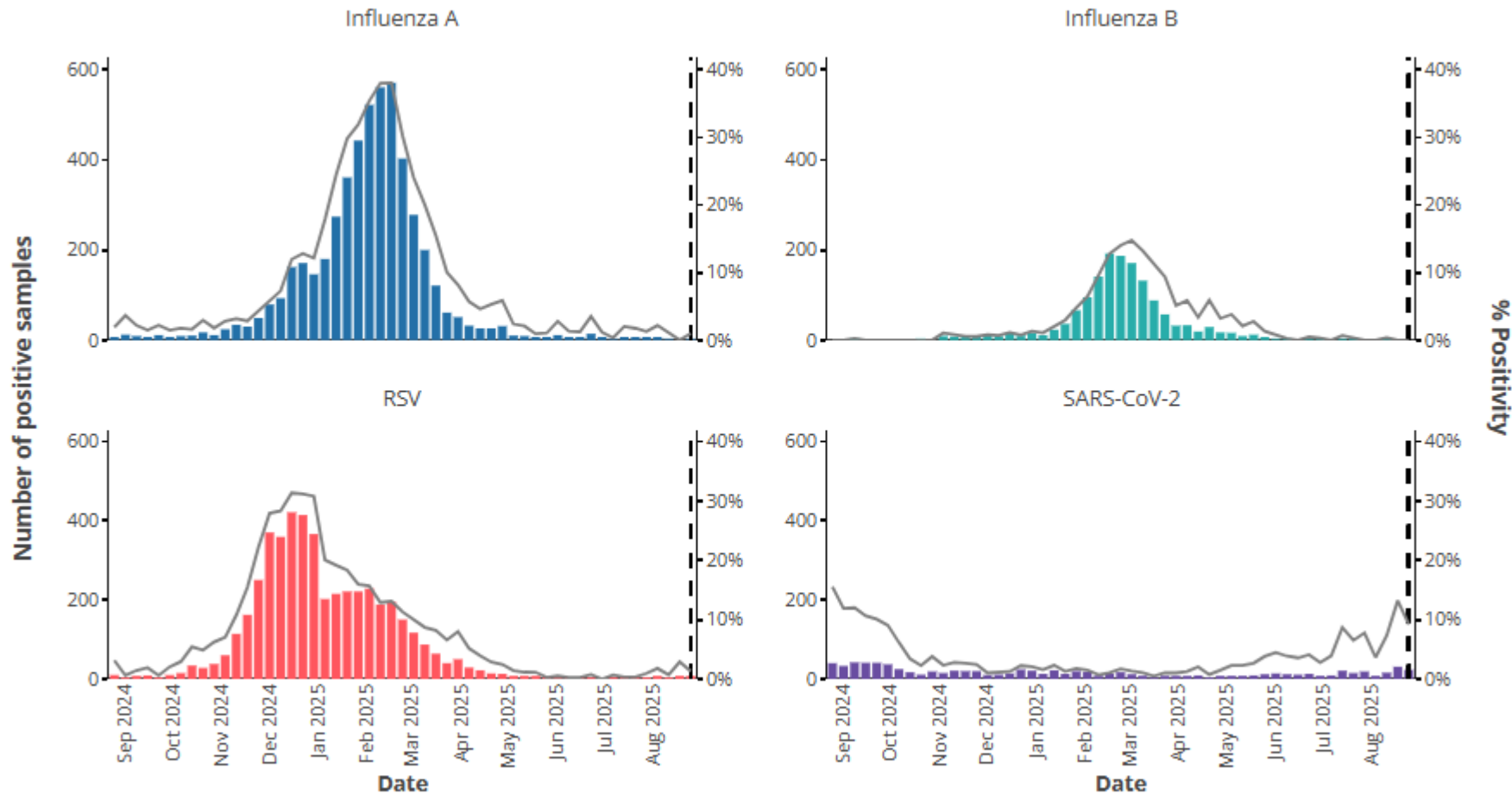


# RESPIRATORY VIRUSES IN BC WITH HISTORICAL TRENDS



# RESPIRATORY ACTIVITY 2024-25 SEASON

Number of positive samples and percent positivity by virus in BC: Pediatric

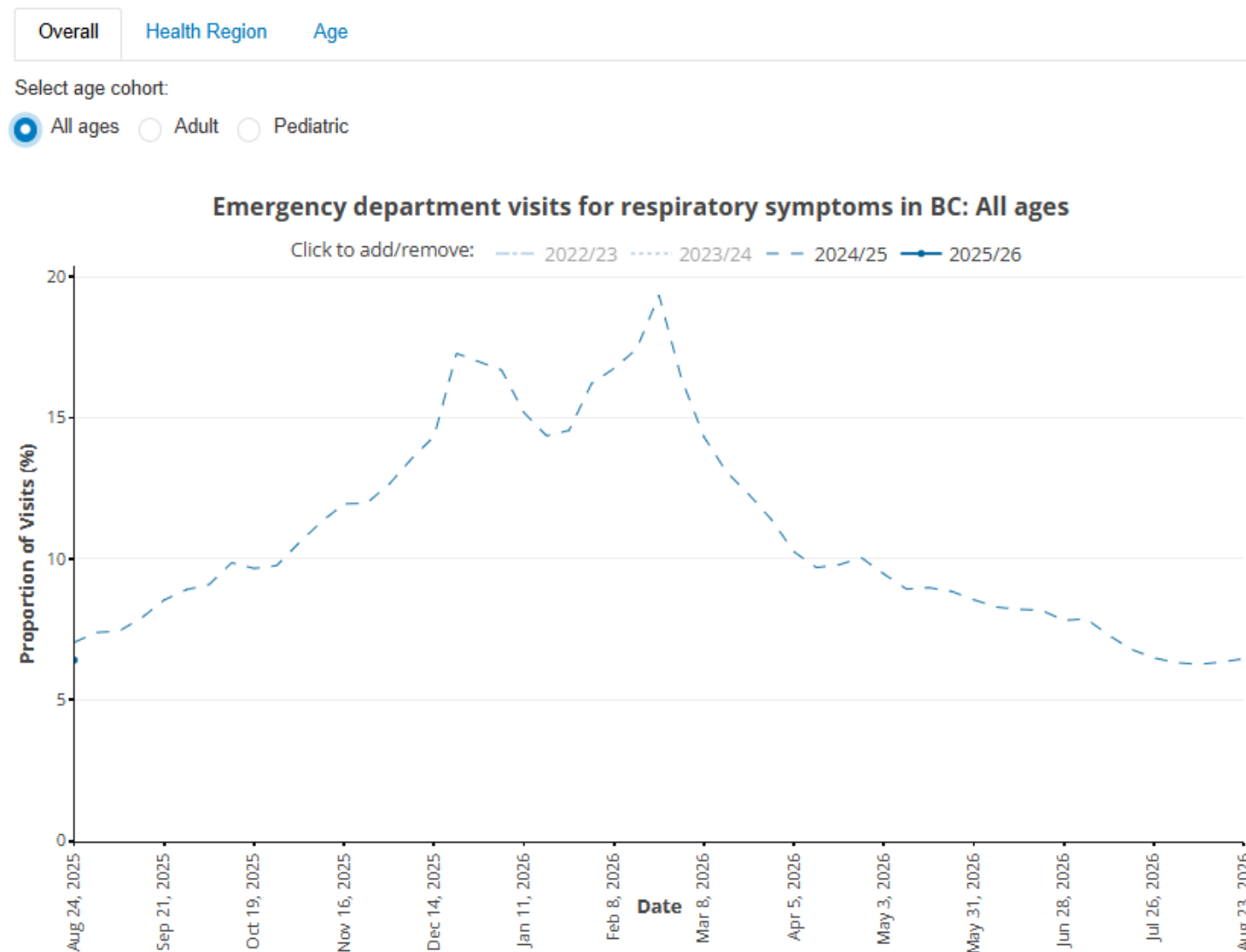


Dashed line indicates the beginning of the 2025-2026 respiratory season

An individual may have more than one sample tested for the same virus within the same infection period for diagnostic and case management requirements. As such, these data do not represent the number of cases.

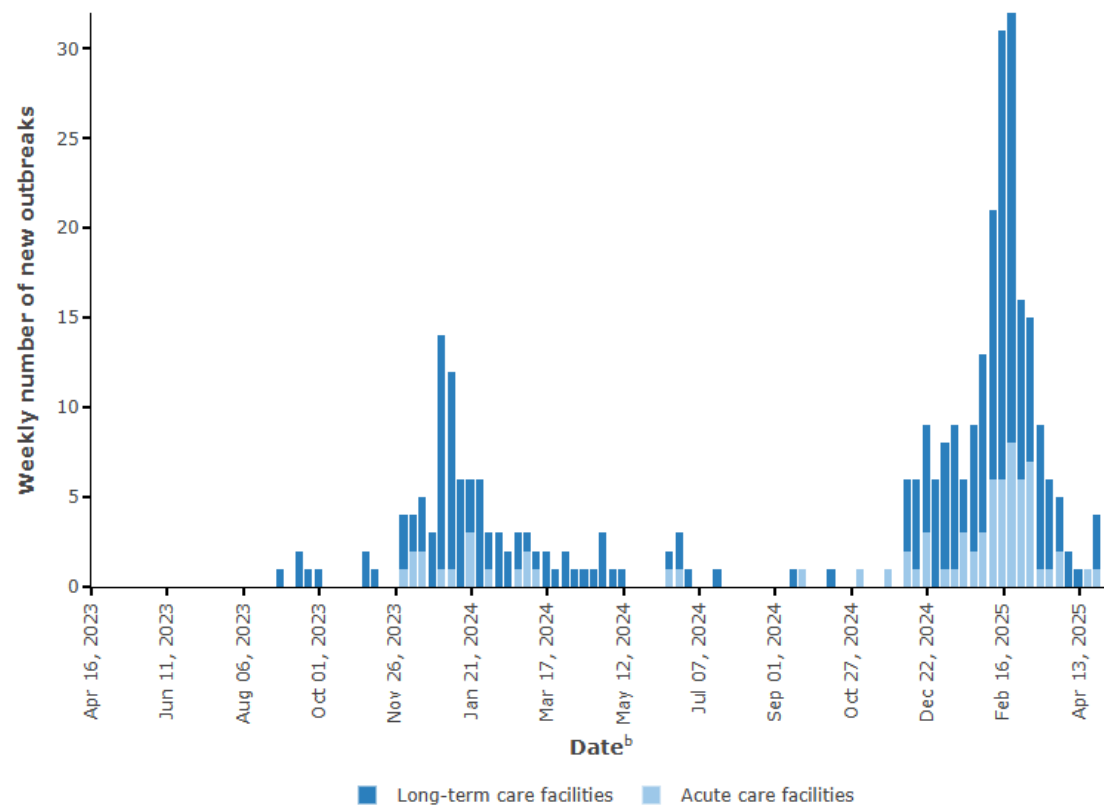
# HEALTH CARE VISITS 2024-25 SEASON

## Emergency Department Visits for Respiratory Illness

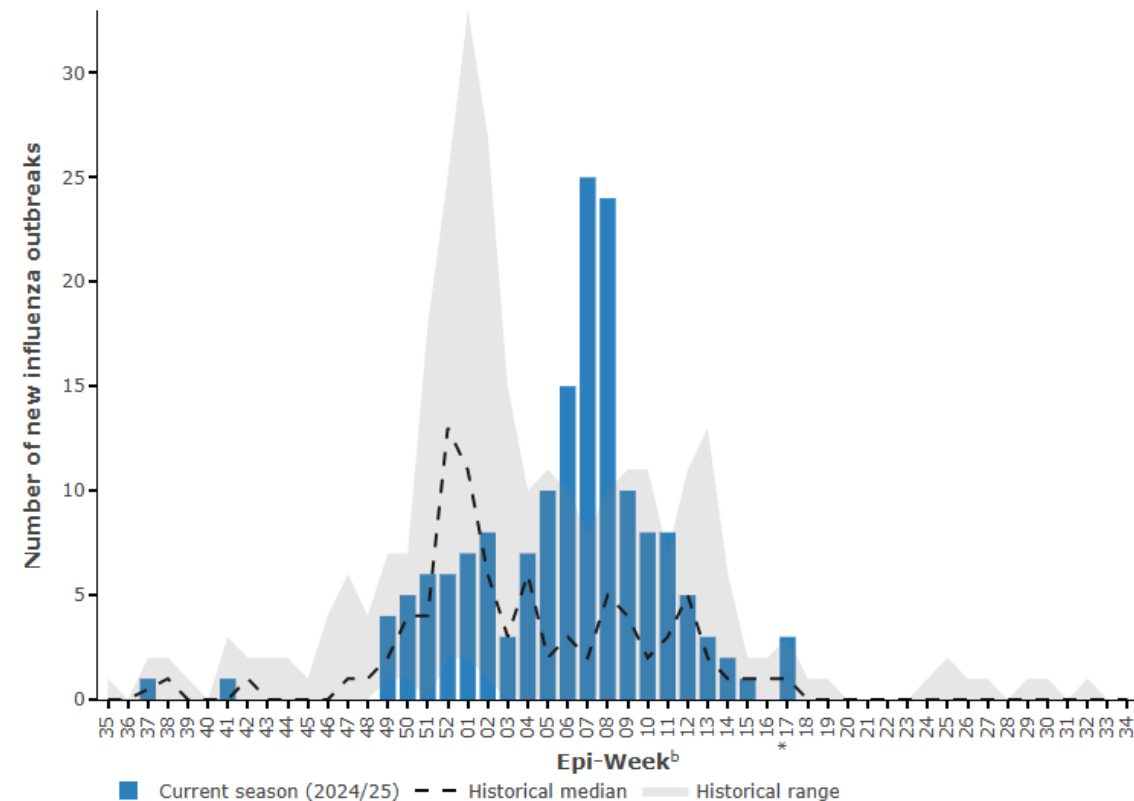


# INFUENZA OUTBREAKS

Weekly number of new influenza outbreaks by facility type<sup>a</sup>



Weekly number of new influenza outbreaks in long-term care facilities<sup>a</sup>



Historical trend lines include data from the 2016/2017 to 2018/2019 and 2022/2023 to 2023/2024 respiratory seasons. Data from 2019/2020 to 2021/2022 were excluded from the historical median calculations due to the COVID-19 pandemic. The current reporting epi-week period is denoted by an asterisk.

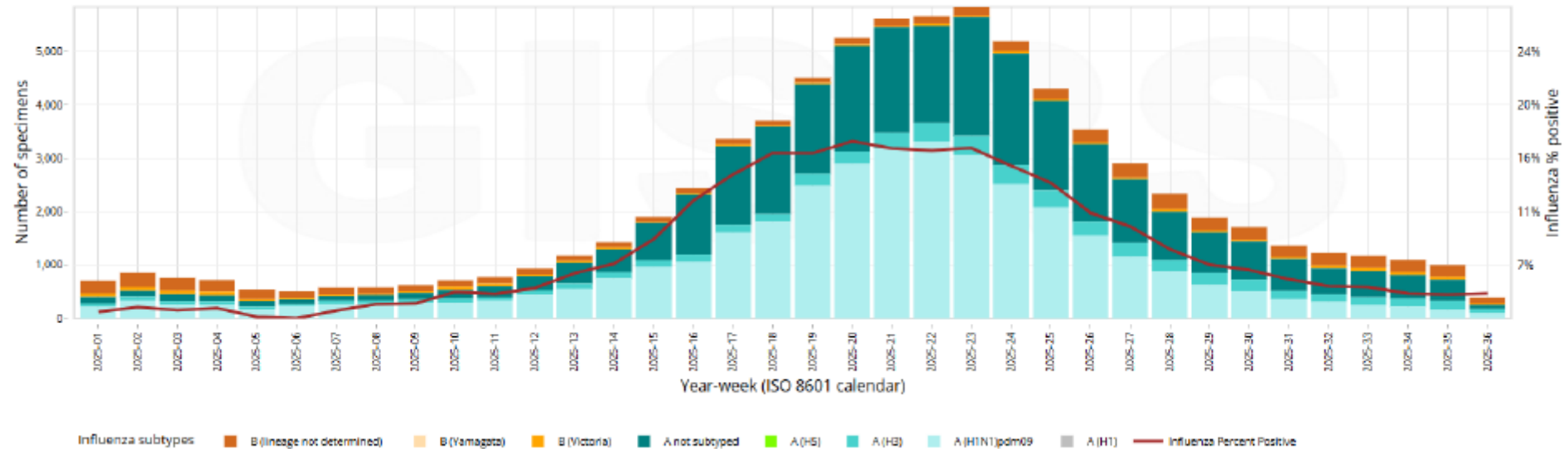
<sup>a</sup> Data might be incomplete or vary from what was reported previously due to data corrections and updates by health authorities.  
<sup>b</sup> Outbreak start dates are determined by earliest onset dates for cases. If unavailable, outbreak declared date is used.



# INFLUENZA SURVEILLANCE IN SOUTHERN HEMISPHERE Jan–Sep 17, 2025

**Figure 1: Percent positivity and number of detections by week, by influenza type and subtype, Southern Hemisphere**

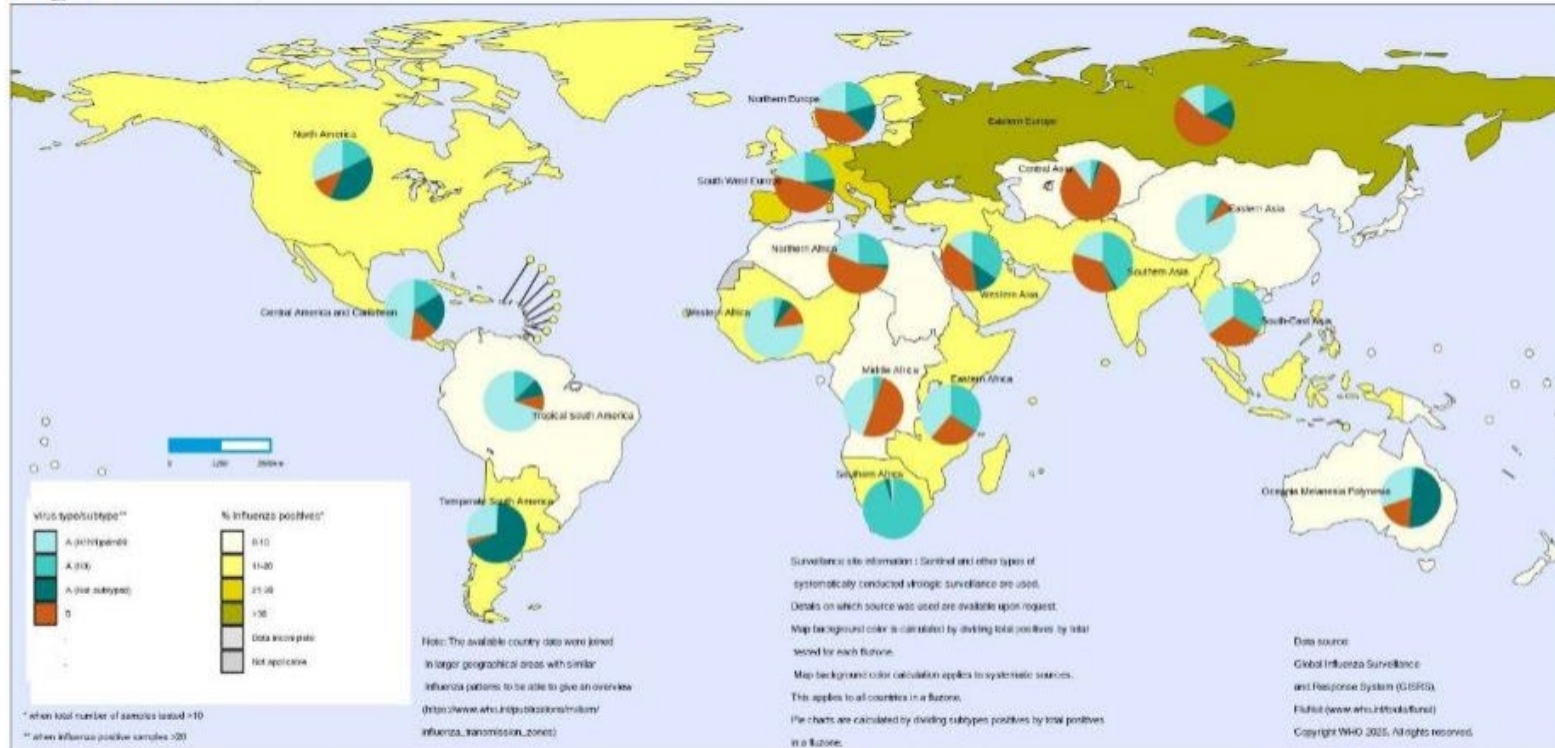
Virus detections by subtype reported to FluNet, 2025-01 to 2025-36



[flunetchart \(shinyapps.io\)](https://flunetchart.shinyapps.io/), accessed 10 Sep 2025

# DISTRIBUTION OF INFLUENZA VIRUS

Distribution of Influenza virus type/subtype by influenza transmission zone, between 01 February and 31 August 2025



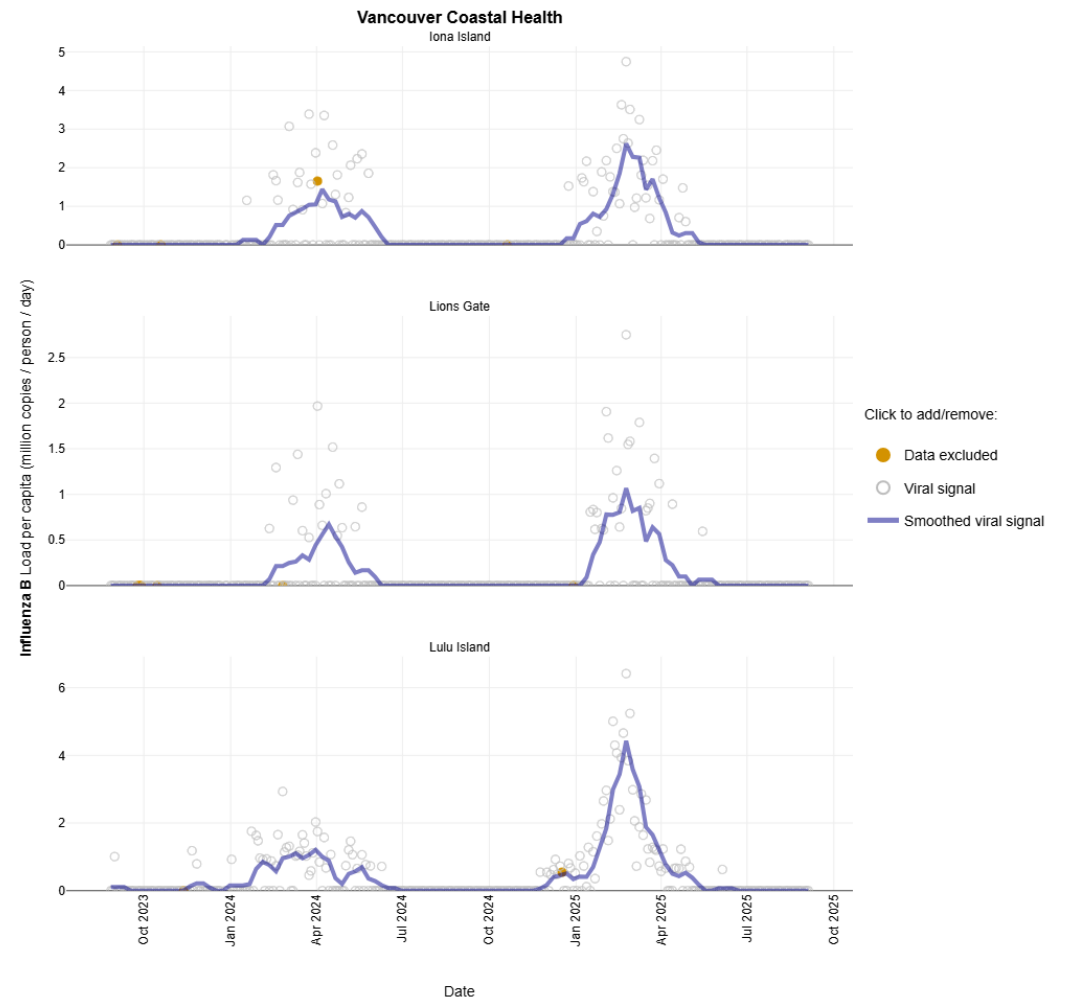
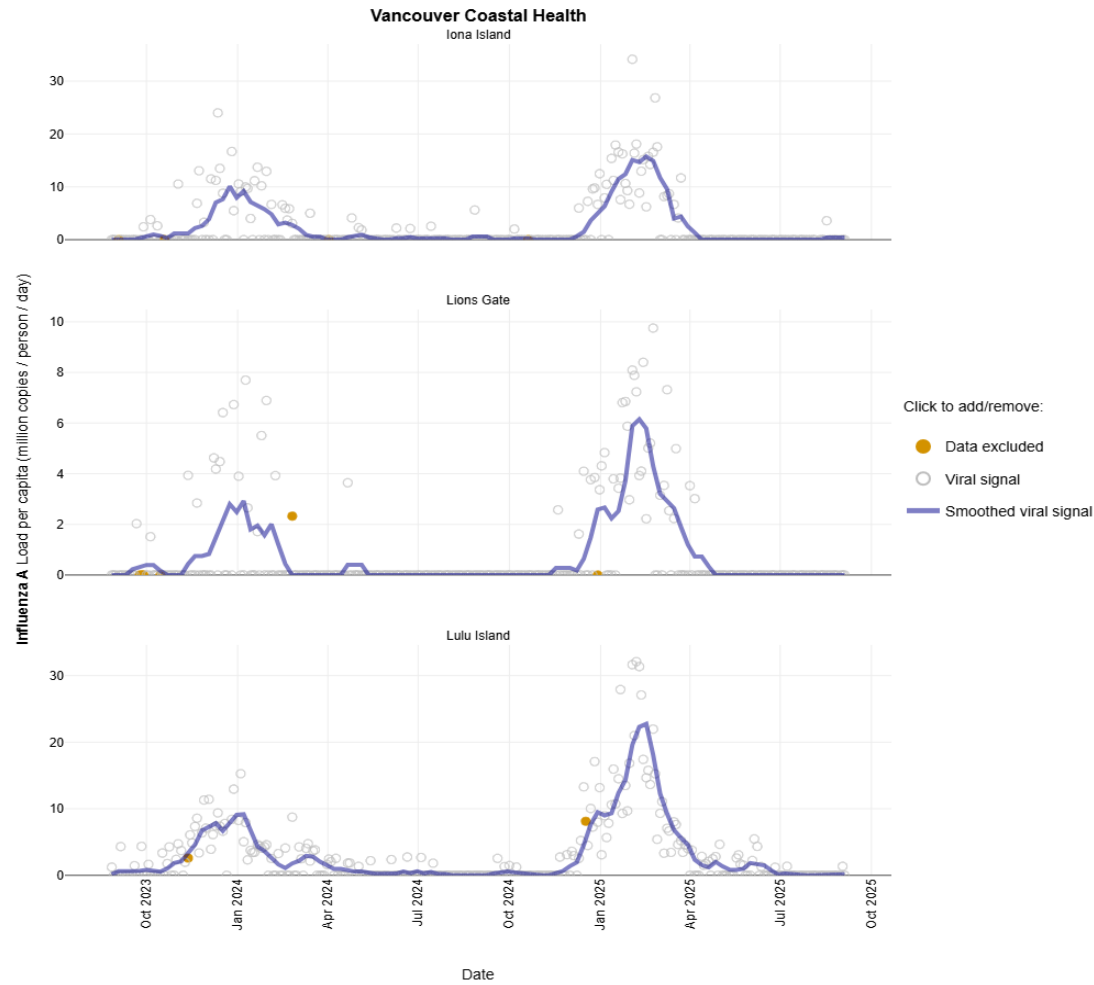
The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.



Detailed information by country of the extent of seasonal influenza activity and type/subtype of viruses worldwide is available on the WHO website: <https://www.who.int/tools/flunet>.

[a.-26-september-2025-recommended-composition-of-influenza-virus-vaccines-for-use-in-the-2026-southern-hemisphere-influenza-season---full-report.pdf](#) Accessed 26 Sep 2025

# OVERVIEW: WASTEWATER SURVEILLANCE VCH



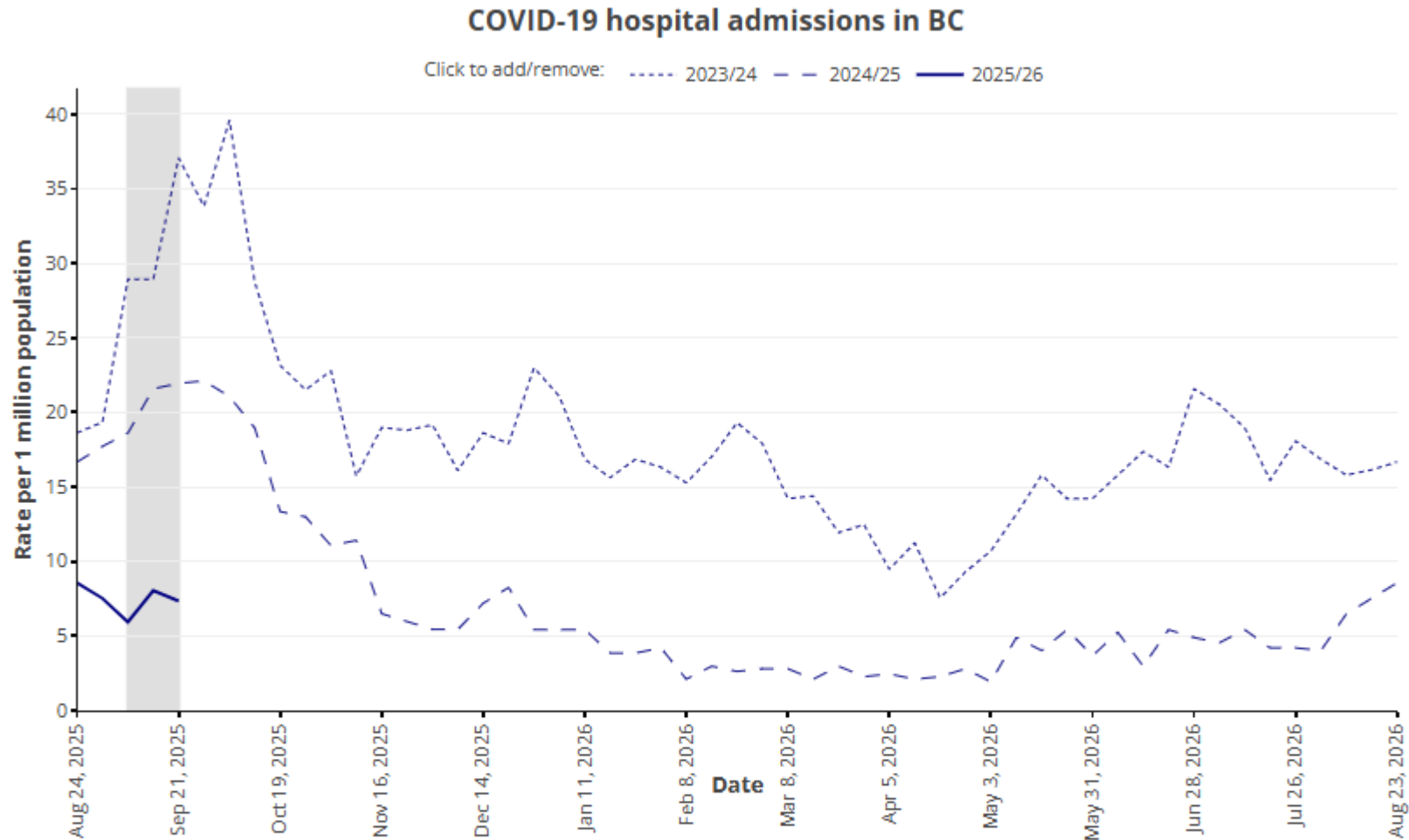
# INFLUENZA – VACCINE EFFECTIVENESS ESTIMATES

Information from the Canadian Sentinel Practitioner Surveillance Network (SPSN):

- For the 2024/2025 season, overall influenza vaccine effectiveness was estimated to be 43% against medically-attended outpatient lab-confirmed infection
  - Illness activity was driven by influenza A (87% detections)
  - Protection varies by strain

Season (number of participants)	Influenza Type/Subtype				
	Any Influenza Type/Subtype	Type A	A/H1N1	A/H3N2	Type B
2014-15 <sup>11</sup> (1930)	9 (-14, 27)	-13 (-45, 12)	-	-17 (-50, 9)	45 (18, 64)
2015-16 <sup>12</sup> (2007)	46 (32, 57)	44 (27, 57)	43 (25, 57)	-	50 (31, 63)
2016-17 <sup>13</sup> (2074)	44 (30, 55)	36 (19, 50)	-	36 (18, 50)	72 (52, 84)
2017-18 <sup>14</sup> (3483)	37 (26, 47)	23 (5, 37)	58 (29, 75)	14 (-8, 31)	46 (34, 56)
2018-19 <sup>15</sup> (2863)	61 (53, 69)	55 (45, 63)	67 (58, 75)	17 (-13, 39)	-
2019-20 <sup>16</sup> (4633)	53 (45, 60)	44 (32, 54)	43 (30, 54)	50 (26, 66)	65 (56, 73)
2020-21 <sup>17</sup>	Due to absence of influenza circulation in BC during the COVID-19 pandemic, vaccine effectiveness evaluation could not be performed				
2021-22 <sup>18</sup> (327)	36 (-38, 71)	-	-	36 <sup>a</sup> (-38, 71)	-
2022-23 <sup>19</sup> (1451)	54 (38, 66)	-	-	54 (38, 66)	-
2023-24 <sup>20</sup> (6634)	51 (43, 58)	46 (37, 54)	50 (39, 59)	32 (10, 49)	63 (48, 74)
2024-25 <sup>21</sup> (10418)	43 (36, 49)	38 (30, 45)	37 (27, 45)	40 (27, 51)	66 (54, 75)

# COVID-19 HOSPITAL ADMISSIONS IN BC

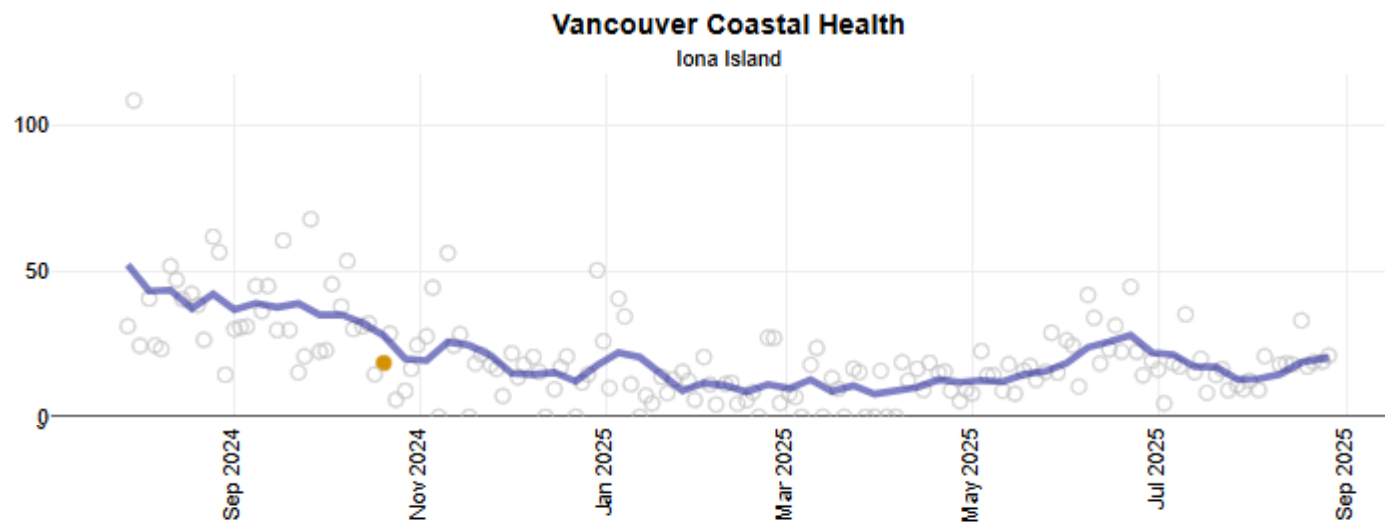
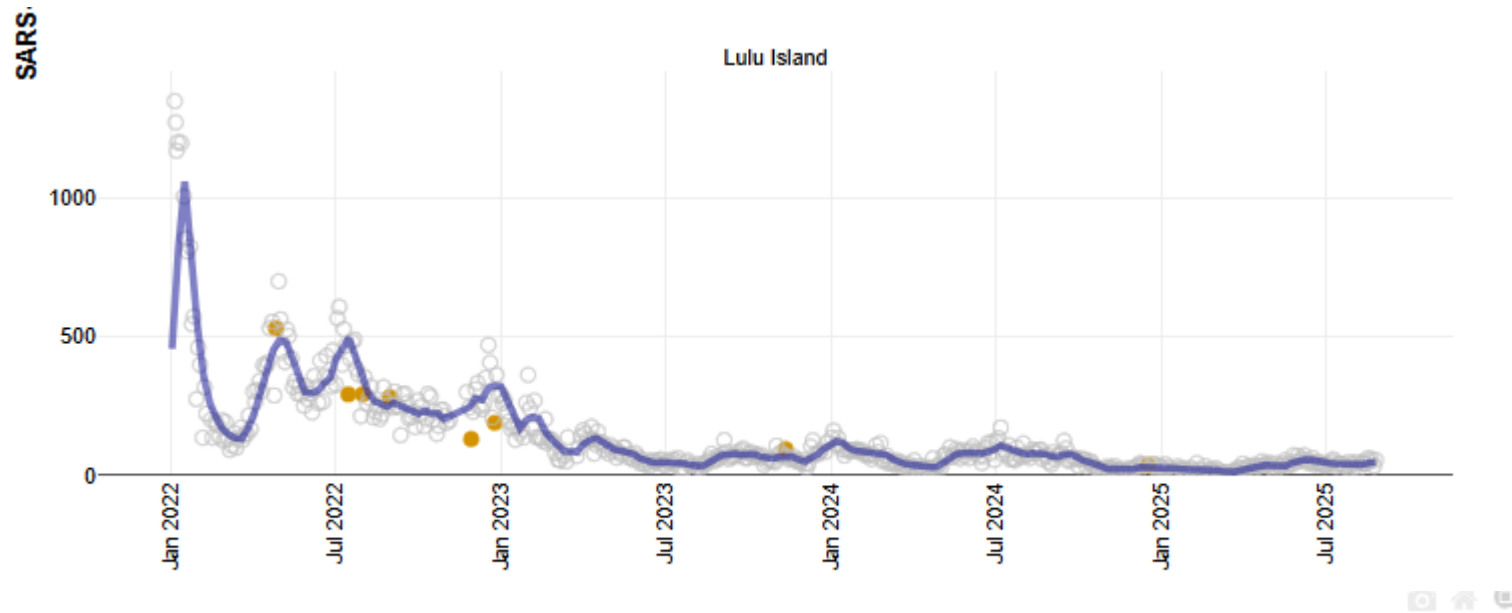


Data in the grey area should be interpreted with caution for the most recent respiratory season as they are updated and become more complete over time.

The 2025/26 respiratory season has 53 epi-weeks, compared to prior respiratory seasons which have 52 weeks. Hover over the plot to see the exact alignment across seasons.

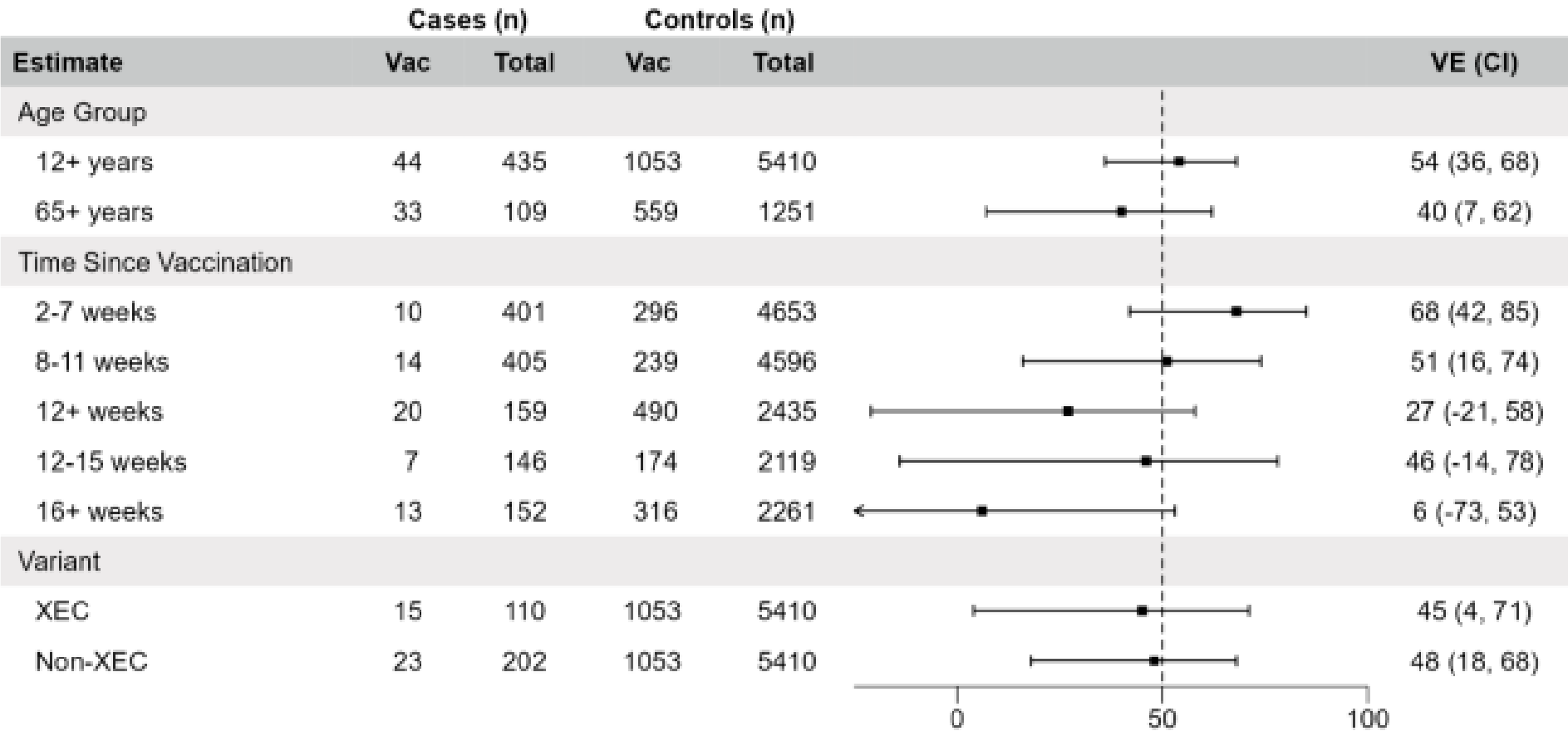


# OVERVIEW: COVID-19 WASTEWATER SURVEILLANCE VCH



# COVID-19 - VACCINE EFFICACY OF KP.2 VACCINE AGAINST MEDICALLY ATTENDED ACUTE RESPIRATORY ILLNESS

- Surveillance period: 27 Oct 2024 to 03 May 2025 (n=5845)
- VE against COVID-19 illness in individuals 12 years and older was 54%; slightly lower for seniors





# INFLUENZA & COVID-19 VACCINES

NEW FOR 2025-2026 SEASON

# INFLUENZA STRAINS | 2025 – 2026

## 2024-2025

- A/Victoria/4897/2022 (H1N1)pdm09-like virus
- A/Thailand/8/2022 (H3N2)-like virus **(NEW)**
- B/Austria/1359417/2021-like virus
- B/Phuket/3073/2013-like virus

## 2025-2026

- A/Victoria/4897/2022 (H1N1)pdm09-like virus
- A/Croatia/10136RV/2023 (H3N2)-like virus **(NEW)**
- B/Austria/1359417/2021-like virus

<https://www.bccdc.ca/health-professionals/clinical-resources/communicable-disease-control-manual/immunization/biological-products>

# VACCINES FOR SENIORS

## FLUAD ADJUVANTED TRIVALENT

### ELIGIBILITY

#### Fluad® Adjuvanted TIV

- 65+ BC residents
- Dosage: 0.5ml IM Pre-filled syringes

Fluad® is an adjuvanted vaccine, associated with increased vaccine efficacy, and preferentially recommended by the National Advisory Committee on Immunization (NACI) for individuals 65 years of age and older.



# VACCINES FOR STAFF

Two products: FLUZONE<sup>®</sup>, FLUVIRAL<sup>®</sup>

- Influenza immunization of staff remains important to protecting both staff and residents against influenza.
- We are expecting a near normal influenza season, possibly with greater H1N1/B activity.
- Staff influenza immunization coverage has decreased during the pandemic.
- Encourage staff to be immunized and to report vaccination to employer as per local procedures.

# UPDATE FALL COVID-19 VACCINES CONTAINING OMICRON LP.8.1 ANTIGEN

## *Moderna Spikevax® – approved by Health Canada*

- Single vaccine formulation for ages 6 months and older
- Vaccine dosage varies by age: 0.25mL (6 months-11 years), 0.5 mL (12 years +)
- Reminder, dosage for seniors: **0.5mL** (50mcg), only one dose needed

## *Pfizer Comirnaty®*

- Pfizer Adult/Adolescent (12+)
- Reminder, dosage for seniors: **0.3mL** (30mcg), only one dose needed

Seniors with moderate to severe immunocompromised and have no history of COVID-19 vaccine should get 2 doses, spaced 8 weeks apart.

- **\*NEW\*** Recommended Interval from previous vaccine is 3 months.
- **\* NEW\*** Interval from COVID-19 infection:
  - Previously vaccinated seniors: 3 months
  - Moderately to severely immunocompromised seniors who have not yet completed their primary series: 4-8 weeks



# PNEUMOCOCCAL VACCINE: 65+ eligible for one dose

**\*NEW\*** Prevnar 20™ (PCV20) – As of June, **Prevnar 20™ (PCV20)** has replaced **Pneumovax® 23 (PPV23)** in British Columbia's publicly funded immunization program.

- Publicly funded in BC for the following groups:
  - Adults 65+
  - Residents of LTC Facilities
  - Individuals 2 years and older with underlying chronic health conditions\*
  - There are no booster recommendations at the moment.

Notes re PCV 20 eligibility in the context of prior pneumococcal vaccination:

- Adults 65+, residents of LTC Facilities eligible for PCV 20 only if they have not previously received PPV23, PCV20, or PCV21.
- Adults with active malignant neoplasms, anatomic or functional asplenia, solid organ or islet cell transplant are eligible regardless of previous PPV23 history.
- Adults with chronic kidney disease, chronic liver disease, congenital or acquired immune deficiencies eligible for PCV20 if have not previously received 2 doses of PPV23.
- Adults with HIV are eligible if have not previously received PCV13/PPV23\*2.
- For further details re eligibility per chronic condition, please refer to the BCCDC [PCV20](#) guidance.



# VIRAL RESPIRATORY ILLNESS (VRI) TOOLKIT

## FOR LONG TERM CARE

# FALL READINESS REMINDERS



## Prep for fall vaccination campaigns:

- Order Vaccines
- Supplies



## Obtain serum creatinine levels for all residents



## Antivirals

- Linkage with pharmacies for Tamiflu™ prophylaxis & Rx;
- Review COVID-19 therapeutics

## Surveillance:

- Documentation of symptom check NOT required
- Clinical assessment
  - \* New case definition
- Line list
  - \* Electronic



## Strengthen IPAC practices:

- Hand hygiene
- Donning/Doffing
- Case management

- <http://ipac.vch.ca/outbreaks>
- <https://www.vch.ca/en/viral-respiratory-illness-toolkit-long-term-care-facility-guide>



# INFLUENZA ANTIVIRALS: PROPHYLAXIS & TREATMENT

## Do not delay the PREPARATION

- The sooner antivirals are given, the more effective they are in controlling an outbreak
- Tamiflu™ (Oseltavmivir) recommended antiviral medication for the control of influenza outbreaks
- Residents on treatment dose will not need prophylaxis dose after completion





## CONTACT INFORMATION

ICP Team Email:

[ICP-LTC@vch.ca](mailto:ICP-LTC@vch.ca)

ICP Team Individual Phone Numbers:

<http://ipac.vch.ca/contact-us>

# PRE-SEASON PLANNING

## Review Documents with ICP

- Preseason Planning
    - Review of VRI & VGI toolkits (leadership and frontline staff)
    - Update unit binders with frontline staff toolkits
  - New Sample Container Order form
    - Order single units
  - Update Outbreak Management team list
  - Identify residents eligible for Paxlovid treatment
- 
- ✓ Have Swabs (VRI)\* and specimen containers (GI) PPE carts, wipes, PPE, ABHR
  - ✓ Follow TDG guidance for packaging swabs for transport to lab in a vehicle
  - ✓ Staff and Fit testing for N95's for AGMP (CPAP/BIPAP/Nebulizer)

# VRI CASE DEFINITION

Fever or new or worse cough and one of the following symptoms:

- Shortness of breath
- Runny or stuffy nose,
- Sore throat, hoarseness, difficulty swallowing
- Myalgia, arthralgia muscle or body aches, lymphadenopathy
- Headache

➤ Test for respiratory illness when VRI case definition is met



# VIRAL RESPIRATORY ILLNESS REPORTING

## When there are any cases of VRI (case definition met)

- Initiate line list include only residents (Monday to Friday excluding weekends and stats) send by 1400 to:
  - [ICP-LTC@vch.ca](mailto:ICP-LTC@vch.ca)

## VRI (influenza) Outbreak Declaration (2 or more lab confirmed influenza on a unit in 7 days)

- ICP to connect with MHO after hours for evenings and after hours on weekends
- Send daily line list of residents and staff until outbreak declared over by 1400 to:
  - [MHOandCDNurseOnCall@vch.ca](mailto:MHOandCDNurseOnCall@vch.ca)
  - [ICP-LTC@vch.ca](mailto:ICP-LTC@vch.ca)
  - [VCHMedMicroIPAC@vch.ca](mailto:VCHMedMicroIPAC@vch.ca)
  - [Outbreak Management team](#)

# GASTROINTESTINAL ILLNESS CASE DEFINITION

2 or more episodes of diarrhea\* within a 24-hour period

OR

2 or more episodes of vomiting\* within a 24-hour period

OR

1 episode diarrhea AND 1 episode of vomiting within a 24-hour period

*\*Above what is considered normal for that person or otherwise explained by underlying conditions or medications.*

# VIRAL GASTROINTESTINAL REPORTING

## One or Two GI Cases

- Leadership/site to notify Infection Control Practitioner of new resident cases (include symptoms and unit) via email: [ICP-LTC@vch.ca](mailto:ICP-LTC@vch.ca)
- Frontline staff to record newly symptomatic residents on paper line list.

**GI Outbreak** when three or more residents meet the case definition for Viral GI cases on the same unit or ward within a 4-day period

- ICP will contact MHO after hours for evenings and after hours on weekends
- Send an electronic line list of residents and staff daily until outbreak declared over to:
  - [CDEHO@vch.ca](mailto:CDEHO@vch.ca)
  - [ICP-LTC@vch.ca](mailto:ICP-LTC@vch.ca)
  - [VCHMedMicroIPAC@vch.ca](mailto:VCHMedMicroIPAC@vch.ca)
  - Outbreak Management team

# TRANSPORT OF SPECIMENS

## Viral Respiratory Illness

- All sites to send specimens to BCCDC lab
  - Owned & operated, contracted and private sites

*\*Novex courier aware of site change for all sites\**

## Viral Gastrointestinal Illness

- Send to BCCDC Lab when outbreak definition is met

*\*Ensure you have contract with your courier for BCCDC Lab*

# STAFF RETURN TO WORK

## Viral Respiratory Illness

Staff return to work when:

- Resolution of fever for 24 hours without the use of fever reducing medication; and
- Symptoms improve and feel well enough to work

## Viral Gastrointestinal Illness

- Staff not to work in any health care facility until they are symptom free for 48 hours
- Food-handler\* staff not to work in any health care facility until they are symptom free for 72 hours

# VRI VGI TOOLKIT HIGHLIGHTS

## Toolkits

- Preseason planning document
- LTC Leadership VRI Toolkit
- LTC Frontline Staff VRI Toolkit
- Stand Alone Assisted Living VRI Toolkit
- LTC Leadership VGI Toolkit
- LTC Frontline Staff VGI Toolkit
- Stand Alone Assisted Living VGI Toolkit

## Specimen Collection

VRI when case definition met

- Send Specimens

VGI when outbreak definition met

- Specimens to BCCDC lab

Follow TDG guidance for packaging Specimens for transport to lab

Have a process to reorder swabs/sterile containers

- [New Sample Container Order form](#)
- Check expiry dates

## Other

### Influenza outbreaks

- Have PPO ready
- Have Outbreak Management Team list updated
- Include staff in line list
- [Staff influenza prophylaxis letter](#) for staff with underlying chronic health conditions

### COVID 19

- [\(PaxlovidTM\) 5-DayTreatmentPackPrescription](#)



# CAMPAIGN LOGISTICS

# LTC FALL SEASONAL CAMPAIGN 2026

## COVID-19 & Influenza Vaccines

Sites to procure their vaccination supplies (e.g. syringes/needles)

### *Vaccine Availability Update*

- Influenza Vaccines: Arrived in the week of Sept 22
- COVID-19 Vaccines: Arrived in the week of Sept 15
- Co-administering possible
- PPO are available from last season; PCV20 being updated
  - [Pre-Printed Orders - Coastal](#)
  - [Pre-Printed Orders - Richmond](#)
  - [Pre-Printed Orders - Vancouver](#)
- Clinics can start as soon as inventory is available

### *Staff Clinics*

- Flu Vaccines
- Can be arranged on-site **or** staff can attend pharmacy/health authority-run clinics in the community



### *Resident Clinics*

- Flu and COVID-19 Vaccines
- Sites can request Pharmacy partners to assist with immunization



# VACCINE ORDERING

## Updates on COVID-19 Vaccine Clinic Guide:

Contact your region's Public Health Unit staff to order vaccines based on the following table:

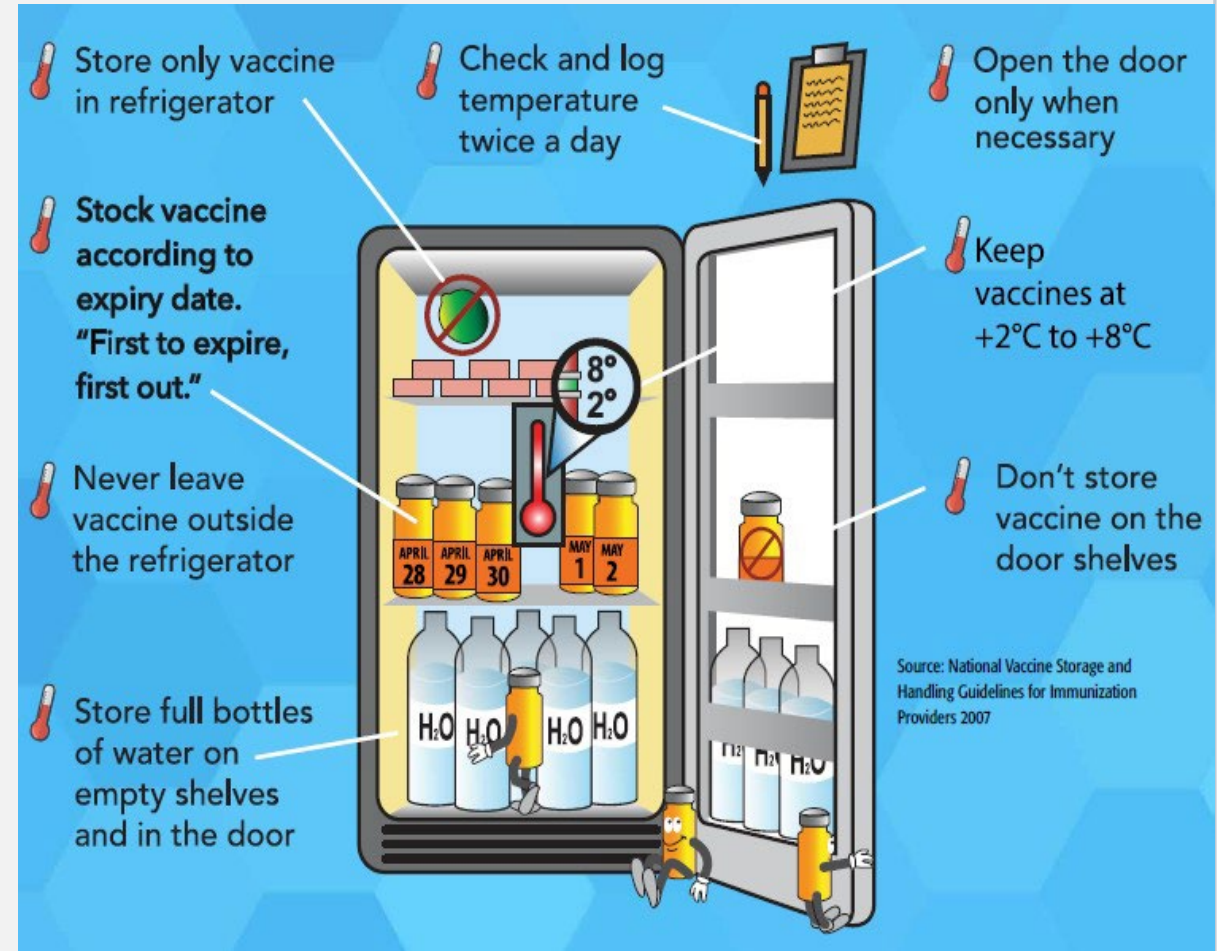
- For additional support contact [CDCVaccines@vch.ca](mailto:CDCVaccines@vch.ca)

Region	Influenza & COVID vaccines	
	Team	Contacts
Vancouver	Regional Immunizations Team	Influenza: <a href="mailto:wendy.dipalma@vch.ca">wendy.dipalma@vch.ca</a> <a href="mailto:andrew.reyes@vch.ca">andrew.reyes@vch.ca</a>  COVID: <a href="mailto:cdcvaccines@vch.ca">cdcvaccines@vch.ca</a>
Richmond	Richmond Public Health	<a href="mailto:rhsbiologicals@vch.ca">rhsbiologicals@vch.ca</a>
North Shore	North Shore Public Health	<a href="mailto:nsbiologicals@vch.ca">nsbiologicals@vch.ca</a>
Squamish	Squamish Public Health	<a href="mailto:lauri.arneson@vch.ca">lauri.arneson@vch.ca</a> <a href="mailto:jasleen.kingra@vch.ca">jasleen.kingra@vch.ca</a>
Sunshine Coast	Sechelt and Gibsons Public Health	<a href="mailto:karen.travis@vch.ca">karen.travis@vch.ca</a> <a href="mailto:nadine.olsen@vch.ca">nadine.olsen@vch.ca</a>
Qathet (Powell River)	Qathet (Powell River) Public Health	<a href="mailto:denise.trevisan@vch.ca">denise.trevisan@vch.ca</a> <a href="mailto:hang.mathieu@vch.ca">hang.mathieu@vch.ca</a>
Central Coast	Bella Coola Public Health	<a href="mailto:rose.dahl@vch.ca">rose.dahl@vch.ca</a>

# VACCINE COLD CHAIN MANAGEMENT

## Vaccine Cold Chain

- Cold chain must always be maintained to ensure the vaccines remain effective and safe for use.
- If cold chain break occurs, contact your region's Public Health Unit staff.
- Resources
  - [Community Vaccine Provider Resources](#)
  - [BCCDC Quick Reference Guide](#)
  - [Refrigerator Temperature Log](#)
  - [Temperature Log Instructions](#)



# REPORTING & DOCUMENTATION

## Client-Level Documentation

### 1. ImmsBC – recommended

- Enter all vaccine doses that occur at the time of administration (**staff** and **residents**)
- Users can view previous vaccine doses

### 2. e-form

### 3. OneWrites (used for consent documentation and back entry into ImmsBC or eform)

- VCH sites using OneWrites can [order](#) the updated [OneWrites](#) (Form # VCH.0823) for their own documentation.

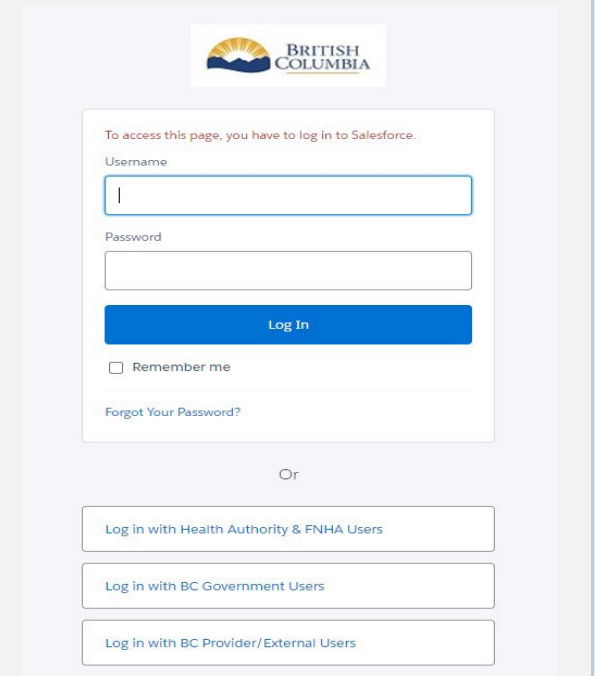
## Site-Level Reporting

- Track influenza & COVID-19 immunizations using an excel document provided by public health
- Report resident Influenza & COVID-19 immunizations to the [VCH Vaccine Reporting Survey](#) (formerly called Checkbox Survey) on the following dates: Oct 31, Nov 30, and **Dec 31, 2025** (final deadline)
- Contracted and Private LTC Sites must also report total **staff influenza** immunizations by **Dec 31<sup>st</sup>, 2025**
- These instructions can also be found on [2025 - 2026 Pre-Season Planning for Viral Gastrointestinal and Respiratory Illness \(VGI/VRI\)](#)

## ImmsBC: Provincial system for COVID-19, Influenza, and Pneumococcal Vaccine Records

- Review instructions to request access for staff who will be entering immunizations
- All immunizations given will use the reason for immunization, i.e. “LTC Resident, LTC Staff”
- Pharmacy immunizers will also document using the LTC facility as the service delivery location (SDL)
  - Sites with pharmacy partnership are still recommended to obtain ImmsBC access for occasional one-offs and view residents' previous vaccine doses

For any issues, please reach out to the Command Center at [BCVAX-Support@gov.bc.ca](mailto:BCVAX-Support@gov.bc.ca)



The screenshot shows the login interface for the ImmsBC system. At the top is the British Columbia logo. Below it, a message states: "To access this page, you have to log in to Salesforce." The login form includes fields for "Username" and "Password", a blue "Log In" button, a "Remember me" checkbox, and a "Forgot Your Password?" link. Below the main form, there is an "Or" separator and three alternative login buttons: "Log in with Health Authority & FNHA Users", "Log in with BC Government Users", and "Log in with BC Provider/External Users".

# ImmsBC RESOURCES

- **Login:** [ImmsBC for all Health Authority Users](#)
- **Provisioning:** Site leads should confirm that their nurses have been provisioned for ImmsBC for the 1st time or reactivation of their accounts.
  - Navigate to: <http://communitysystems.vch.ca/user-requests?src=/>
  - Under **User Requests**, expand *ImmsBC Requests, Training and Support Documents*
  - Click and email [this template](#)
  - Fill out the template for the user(s) and click Send.
- **Resources:** [ImmsBC User Help](#)
- **Education:**
  - [PHSA - PPHIS - Getting Started in ImmsBC](#)
  - [PHSA - PPHIS - Documenting Immunizations in ImmsBC: Create Immunization Record](#)
  - [PHSA - PPHIS - Documenting Immunizations in ImmsBC: Vaccine Administration](#)
- **Support:**
  - Email: [BCVax-Support@gov.bc.ca](mailto:BCVax-Support@gov.bc.ca) or
  - Join MS Teams Meeting  
[https://teams.microsoft.com/l/meetup-join/19%3Ameeting\\_NmRkYWFjMjUtMGZlYi00ODVmLThiNTUtYzlwMTEwZjQ2Njcw%40thread.v2/0?context={"Tid"%3A"31f660a5-192a-4db3-92ba-ca424f1b259e"%2C"Oid"%3A"97f4fcac-1c83-43dc-8430-df2be4fcbed2"}](https://teams.microsoft.com/l/meetup-join/19%3Ameeting_NmRkYWFjMjUtMGZlYi00ODVmLThiNTUtYzlwMTEwZjQ2Njcw%40thread.v2/0?context={)
    - Passcode: LB9Zo3P7
    - Meeting ID: 253 771 415 278 0
    - Passcode: LB9Zo3P7
    - Dial: +1 604-900-0985
    - Phone Conference ID: 684 905 613#
  - Operate from 9am-7pm PST Monday to Friday

# eForm Resources

**Login:** [eForm](#)

**Access:** To access the Immunization Entry Form, email [eFormsEnrolment@phsa.ca](mailto:eFormsEnrolment@phsa.ca). Include your manager/supervisor on the email.

**Resources:** [Immunization eForm Guide](#)

**Education:** Learning Hub: [PHSA-PPHIS- Immunization eForm Training](#) or YouTube at [Training Video](#)  
[Immunization eForm](#) for the single entry original eEntry form  
[eForm Tipsheet](#)

SUPPORT TEAM	HELPS WITH	CONTACT	HOURS
Enrolment	access, log-in	<a href="mailto:eFormsEnrolment@phsa.ca">eFormsEnrolment@phsa.ca</a>	Mon-Fri, 8 AM–4 PM
General Support	all other issues	<a href="mailto:eformsSolution@phsa.ca">eformsSolution@phsa.ca</a>	Mon-Fri, 8 AM–4 PM
Off Business Hour Support	all issues	604-877-2159 x 222159	Mon-Fri, 5-7 PM weekends/stat holidays 8 AM-7 PM



# Immunization Consent

# IMMUNIZATION CONSENT

## When?

- Obtain consent prior to vaccine administration.
  - Person or SDM needs to demonstrate understanding of what they are consenting to.
- Verify consent prior to vaccine administration at point-of-care.
  - Confirmation that person still consents.

## Who?

- Clinical judgement is necessary to obtain informed consent.
- Nursing Unit Assistants cannot obtain consent for vaccines. They can support with administrative work of obtaining consent.



# IMMUNIZATION CONSENT

## How?

- Site-specific practices to obtain and verify consent.
- Two methods to obtain and verify consent:
  - Nurse-Independent Activity (NIA)
    - Dependent on training and not all vaccines are approved for NIA process.
    - Nurse obtains and verifies consent.
  - Provider prescription – Provider obtains consent and nurse verifies consent at point-of-care.

# IMMUNIZATION EDUCATION

- Seasonal Update & Education Session for Long-Term Care & Assisted Living
  - Link posted on [Viral Respiratory Illness Toolkit: Long-Term Care Guide](#)
- Immunizing Clients in Homes (with an order)
  - Optional learning:
    - [BCCDC Influenza Immunization Competency Course: Foundations of Influenza Disease & Vaccines](#)
    - [BCCDC COVID-19 Immunization Competency Course for Nurses](#)
    - [Anaphylaxis: Initial Emergency Treatment by Nurses \(Adult and Pediatric\)](#)
- Peer Immunizing
  - [Understanding Autonomous Practice and NIA-NIP Course](#)
  - [Anaphylaxis: Initial Emergency Treatment by Nurses \(Adult and Pediatric\)](#)
  - [Peer Immunizer Online Education](#)
    - Required renewal: Annually
  - [Peer Immunizer Annual Flu Update](#)
    - Required renewal: Annually
  - The [Peer Nurse Immunizer Program](#)

# RESOURCES

## Resources

- VCH Infection Prevention and Control (IPAC)
  - VCH Infection Prevention & Control Outbreaks
- Viral Respiratory Illness Toolkit: Long-Term Care Guide (Public Health)

## Who to Contact

- **IPAC**
  - ICP LTC Team Email: [ICP-LTC@vch.ca](mailto:ICP-LTC@vch.ca)
  - ICP Team Individual Phone Numbers: <http://ipac.vch.ca/contact-us>
- **Regional Communicable Disease Team**
  - **CD Intake Nurse**
    - Email: [mhoandcdnurseoncall@vch.ca](mailto:mhoandcdnurseoncall@vch.ca)
    - Call main line: 604-675-3900
  - **CD Environmental Health Officer**
    - Email: [cdeho@vch.ca](mailto:cdeho@vch.ca)

# THANK YOU

