



**Healthcare Provider Webinar
Middlesex and London Region
April 16, 2024**

Welcome

Presenter:

Dr. Joanne Kearon

Associate Medical Officer of Health

Middlesex-London Health Unit

April 16, 2024

Outline

- Respiratory Season Updates
- Respiratory Season - IPAC Measures
- Measles Update
- COVID-19 Vaccine Guideline Update
- Ordering and Accessing COVID-19 Vaccine
- RSV Vaccine
- Vaccine Returns
- Vaccine Resources
- Rabies Control Program – Duty to Report
- Avian Influenza Surveillance in Hospitalized Patients
- Updated Resources
- ENewsletter and Webinar Schedule



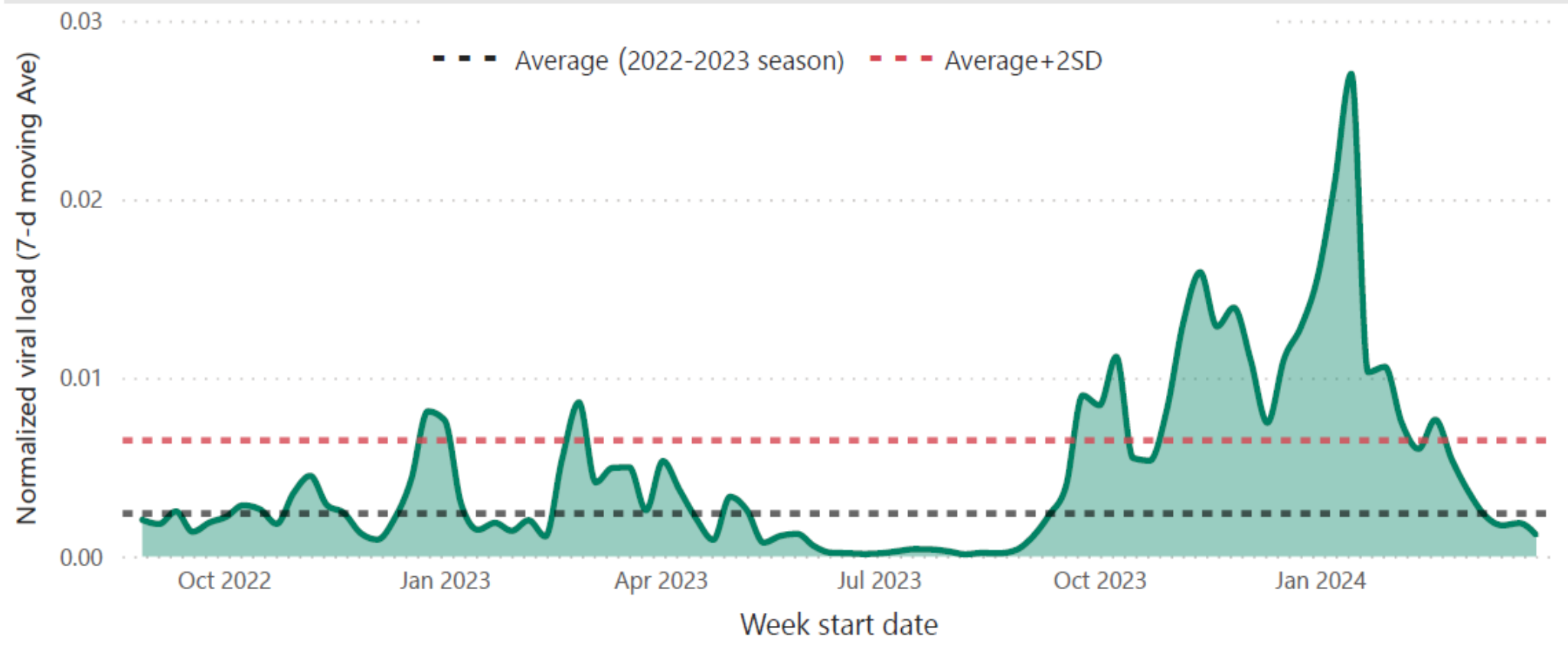
Respiratory Season Updates

Respiratory Transmission Risk Assessment

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

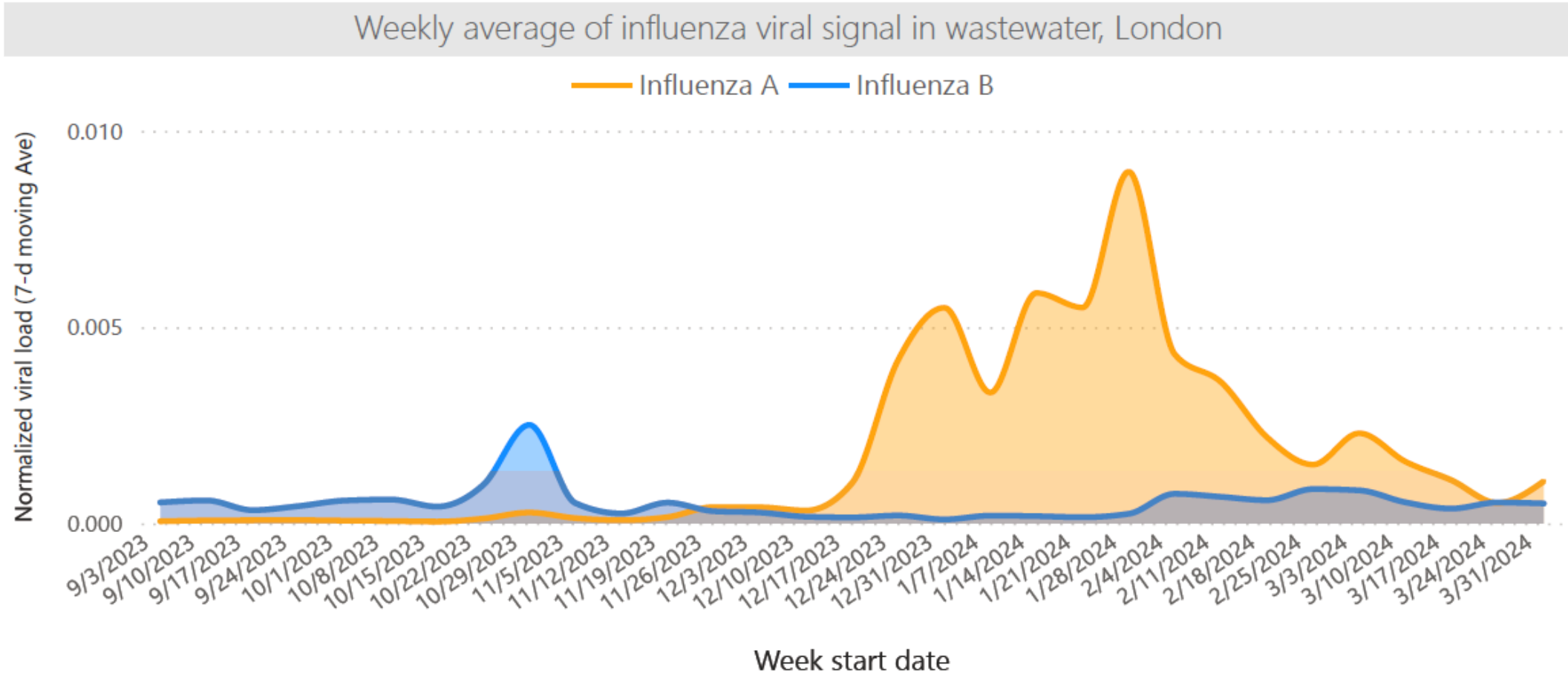
Indicator	Status
▲	
1. New respiratory outbreaks in health care facilities	Low
2. Respiratory hospitalizations	Low
3a. % positivity for COVID-19	Low
3b. % positivity for influenza	Low
4. Wastewater surveillance trend of COVID-19	Low to medium

Weekly average of COVID-19 viral signal in wastewater, London



Source: Ontario Wastewater Surveillance Initiative Data and Visualization Hub.

Data source: Middlesex-London Health Unit – *Middlesex-London Respiratory Surveillance Report*, extracted 2024-04-16. Data current as of the end of day 2024-04-16. <https://app.powerbi.com/view?r=eyJrljoiMzE5MzZJOTItOWE2ZS00MDNlLTlkNDEtMTcyYTg5OGFhMTFiliwidCI6ImRjNTYxMjk1LTdjYTktNDZhOS04M2JmLTUwODM0ZDZhOWQwZiJ9>



Source: Ontario Wastewater Surveillance Initiative Data and Visualization Hub.

Data source: Middlesex-London Health Unit – *Middlesex-London Respiratory Surveillance Report*, extracted 2024-04-16. Data current as of the end of day 2024-04-16.
 16. <https://app.powerbi.com/view?r=eyJrljoiMzE5MzZlOTItOWE2ZS00MDNlTlIkNDEtMTcyYTg5OGFhMTFiliwidCI6ImRjNTYxMjk1LTdjYTktNDFhOS04M2JmLTUwODM0ZDZlOWQwZiJ9>

Respiratory Season- IPAC Measures

- COVID-19, influenza, and other common respiratory viruses are **trending downwards**, and we are now in a **non-high-risk period**.
- While common respiratory viruses are trending downwards, there is **still ongoing transmission of respiratory viruses and other pathogens**.
- In a non-high-risk period, while universal masking may not be necessary, a **point-of-care risk assessment is critical**.
- We highly recommend **ongoing screening of residents and patients** to determine the appropriate personal protective equipment (PPE), based on the type of care being provided.

Respiratory Season –IPAC Measures

Both our assessment of risk and recommendations for infection prevention and control (IPAC) measures in health care settings are based on Public Health Ontario's (PHO) [Interim IPAC Measures Technical Brief](#).

The brief provides recommended IPAC Practices by Risk Level (page 5), and scenarios and considerations for targeted masking (page 6).



Measles Update

Measles Update

On March 27, 2024, the Office of the Chief Medical Officer of Health issued a memorandum, [*Increase in Measles.*](#)

- As of April 12, 2024, 12 confirmed cases of measles were reported in Ontario in 2024
- 11 cases were associated with travel (i.e., acquisition of measles outside of Canada) and one case occurred in an individual with an unknown source of exposure (i.e., no history of travel and no epidemiological link with a confirmed case)
- To date, there have been no reports of secondary infection.

Measles Update

- Measles is a [reportable disease](#), and any suspected cases should be reported immediately to public health.
- Do **not** wait for laboratory confirmation.
- To report a confirmed or probable case of measles, please use [MLHU Reportable Disease Notification Form](#) or alternatively call us at 519-663-5317.

Measles Update

Key actions for healthcare providers:

- Ensure school-aged children are up to date with measles vaccinations.
- For primary care clinicians, support patients in receiving all routine vaccinations (including measles) and ensure immunizations are up to date according to the [Publicly Funded Immunization Schedules for Ontario](#):
 - In Ontario, two doses of measles-containing vaccine are routinely given at 1 year of age and 4 to 6 years of age.
 - The second dose is recommended to be given prior to school entry.
 - Adults who have not been vaccinated or do not have a history of measles infection should receive one dose of measles containing vaccine.

Measles Update

In addition to routine immunizations, the following is recommended for those at **higher risk of exposure** to measles:

- Children 6 to 11 months of age who are travelling to areas where disease is of concern, should be immunized with one dose of MMR. Two additional doses are still required on or after the first birthday.
- A second dose of MMR vaccine is recommended based on the healthcare provider's clinical advice and for adults who are at high risk of being exposed or exposing others, including:
 - post-secondary students,
 - health care workers, and/or
 - individuals planning to travel to areas with increased measles activity.

Measles Update

- Health care workers should have **documented immunity** to measles.
 - This consists of two doses of measles containing vaccine or history of laboratory confirmed infection or serological evidence of immunity, regardless of year of birth.
- Have a defined process to rapidly identify and isolate patients who may have measles to protect staff and patients.
- Manage patients with suspected or confirmed measles under [Routine Practices and Airborne Precautions](#).
 - All health care workers, regardless of presumptive immunity to measles, should wear a fit-tested, seal-checked N95 respirator when providing care to a patient with suspect or confirmed measles.
 - N95 respirators and other PPE can be ordered through the [Ontario PPE Supply Portal](#).

Measles Update:

- Include diagnostic laboratory testing for measles virus by both [polymerase chain reaction \(PCR\)](#) in nasopharyngeal/throat swab AND urine, as well as diagnostic [serology](#).
- Prior to collecting specimens, contact the Public Health Ontario's Laboratory Customer Service Centre (416-235-6556 or 1-877-604-4567) and the health unit at 519-663-5317.
 - Specimens submitted in an [expired collection kit will be rejected for testing](#), as PHO's laboratory has not validated expired media for measles PCR testing. The collection kit media extension communicated by Ontario Health only applies to collection of specimens for COVID-19.



COVID-19 Vaccine Guidance Update

COVID-19 Vaccine Guidance Update

- On April 8, 2024, the Ministry of Health released updated [COVID-19 Vaccine Guidance](#).
- The COVID-19 vaccine program will be transitioning from “Fall 2023” dosing eligibility for XBB 1.5 vaccines to the “Spring 2024” recommendations.
- In alignment with the National Advisory Committee on Immunization (NACI), doses will be available for those at increased risk of severe outcomes from COVID-19 disease.

COVID-19 Vaccine Guidance Update

The Spring 2024 COVID-19 vaccine campaign will run from **April to the end of June**.

Individuals deemed to be at increased risk are eligible to receive one additional dose of XBB vaccine. This includes:

- Adults 65 years of age and older
- Adult residents of long-term care homes (LTCH) or other congregate living settings for seniors
- Individuals 6 months of age and older who are moderately to severely immunocompromised (due to underlying condition or treatment)
- Individuals 55 years of age and older who identify as First Nations, Inuit, or Metis and their non-Indigenous household members who are 55 years and older

This is based on discretionary recommendations from NACI.

COVID-19 Vaccine Guidance Update

More than one dose may be provided to the following individuals:

- Children 6 months to 4 years of age who are completing an initial series (including an extra dose for those who are immunocompromised)
- Individuals who are 5 years and older who are currently unimmunized and are immunocompromised

See **full schedules and recommendations** on the [Ministry COVID-19 Vaccine Guidance Document](#).

COVID-19 Vaccine Guidance Update

All other individuals who are not currently recommended to receive a COVID-19 vaccine dose in Spring 2024 should wait until further MOH recommendations.

This includes individuals who are not at higher risk of severe illness from COVID-19 who did not receive an XBB COVID-19 vaccine in Fall 2023, unless they are specifically recommended to receive a dose by their healthcare provider.



Ordering and Accessing COVID-19 Vaccine

Ordering and Accessing COVID-19 Vaccine

- Eligible individuals will be directed to their healthcare provider or pharmacy to receive their dose.
- MLHU will not be holding community clinics.
- For children under the age of 2 years who require a COVID-19 vaccine can book an appointment at the Health Unit, **if they do not have a healthcare provider who provides COVID-19 vaccine**, by calling 519-663-5317.

Ordering and Accessing COVID-19 Vaccine

Healthcare Providers (HCPs) can order COVID-19 vaccine (mRNA: Infant Pfizer, Pediatric Pfizer, Adult Pfizer, and Moderna) from MLHU.

- Novavax (Nuvaxovid) protein subunit vaccine is **now available** for health care providers to order (5 doses per vial) from MLHU.
- This vaccine is now considered to be interchangeable with mRNA vaccines for individuals who are 12 years of age and older, for both initial and additional doses.
- COVAXon inventory and vaccine administration entries are required for this vaccine, like mRNA vaccines.

Ordering and Accessing COVID-19 Vaccine

If you require **reactivation** into the COVAXon system, please email:
COVIDVaccine.Informatics@mlhu.on.ca

If you require staff to complete the **orientation process** for COVAXon access and vaccine administration, please see the MLHU website for further information: <https://www.healthunit.com/covid-19-vaccine-distribution-program>



RSV Vaccine

RSV Vaccine

Thank you for your participation in the RSV vaccine program for **high-risk individuals**.

- Many Ontarians were able to receive this vaccine as protection against the respiratory syncytial virus (RSV).
- The RSV percent positivity in Ontario is low and has been decreasing since December 2023 (Ministry of Health, 2024).
- At this point, the Ministry is winding down the RSV 2023 High-Risk Vaccine program.
- Details for the 2024-2025 RSV season will be provided in the Fall.

RSV Vaccine

- Vaccine is still available by order, however it may be prudent to wait until next season, unless there are extenuating circumstances to administer the vaccine now.
- If you have any doses on hand, you can continue to administer until the vaccine lot number expiry date.



Vaccine Returns

Vaccine Returns

When returning **expired** or **unusable** vaccine to the Middlesex-London Health Unit(MLHU) please consider the following:

- A completed [vaccine return form](#) is required for all returns and must be included in the bag, otherwise vaccine returns will not be accepted.
- Punctured vials should not be returned to MLHU but discarded in biohazard containers.
- Influenza vaccine should not be returned to MLHU until the “end of season” has been declared.

Vaccine Returns

COVID-19 vaccine is the only vaccine that follows a **different** process.

- COVID-19 vaccine needs to be discarded at your premise in biohazard containers.
- The vaccine must also be “wasted” in the COVAXon system.
- Do not return COVID-19 vaccine to MLHU.

Please order two to four weeks of vaccine supply at a time to help reduce overall wastage.

For more information, visit MLHU [Vaccine Ordering and Returns](#)



Vaccine Resources

Vaccine Resources

“Protect your future. Get immunized!” is Immunize Canada’s theme for National Immunization Awareness Week April 22 – 30, 2024.

- The goal is to assist Canadians to make confident vaccine decisions by creating and providing evidence-based, up-to-date, and accessible resources about immunization.
- [Immunize Canada](#) has developed resources to support healthcare providers with their clients.
- As healthcare providers, you are the cornerstone of vaccine delivery in Ontario.
- As vaccine recommendations are updated over time with new research evidence, the healthcare provider role is essential in informing individuals about what vaccines are required, and when they are eligible to receive them.

Vaccine Resources

The Vaccine Preventable Disease (VPD) Team at the Middlesex-London Health Unit would like to thank all Healthcare Providers for their support and continued work educating and administering vaccines to clients.

Please continue to reach out to the VPD team with your vaccine related questions:

- Telephone: (519) 663-5317
- Fax: (519) 663-0416
- Email: shots@mlhu.on.ca for general information only (not for specific client details)

For more information, visit [Immunization Information for Healthcare Providers](#)



Rabies Program – Duty to Report

Rabies Program – Duty to Report

- A “Notice” was sent out on Tuesday, April 9th in accordance with the requirements of the Ministry of Health and Long-Term Care, Rabies Prevention and Control Protocol.
- This is a **reminder** to report animal bites and/or other animal contact incidents to the Middlesex-London Health Unit (MLHU) Rabies Prevention and Control Program.
- Reporting incidents is **mandated** under regulation 557 of the Health Protection and Promotion Act.

Rabies Program – Duty to Report

Process to Report:

- All animal exposure incidents and administration of Rabies Post Exposure Prophylaxis (RPEP) (forms attached) must be reported to the Middlesex-London Health Unit by fax at 519-663-0107 or by email at zzFax.RabiesLine@mlhu.on.ca.
- The Middlesex-London Health Unit will contact the individual to ensure follow-up RPEP scheduling is completed. MLHU will administer Day 3, 7 & 14 (and 28 if required) 7 days a week by appointment ONLY.

Rabies Program – Duty to Report

The Health Unit is available to receive all communications **24 hours a day, 7 days a week.**

Business Hours:

- Monday to Friday - 8:30 am to 4:30 pm.
- **Fax reports** to 519-663-0107 **or email to** zzFax.RabiesLine@mlhu.on.ca.
- If you need to speak with the **Rabies Coordinator**, please call 519-663-5317 **extension 8010.**

After Hours/Weekends/Holidays:

Please call the Health Unit at 519-663-5317 and the answering service will direct your call to the appropriate individual.



Avian Influenza Surveillance in Hospitalized Patients

Avian Influenza Surveillance in Hospitalized Patients

- On April 5, 2024, Dr. Kieran Moore, Chief Medical Officer of Health (CMOH) issued a memorandum regarding [Avian Influenza Surveillance in Hospitalized Patients](#)
- The Ministry of Health reports that the highly pathogenic avian influenza (HPAI) H5N1 continues to circulate in Canada and internationally among domestic and wild birds, as well as detections in [wild and domestic mammals](#) that have had exposure to infected birds, including domestic cats and dogs

Avian Influenza Surveillance in Hospitalized Patients

Recently, HPAI has also been detected for the first time among livestock, including goats and cattle.

- In [dairy cattle herds](#), infection has resulted in illness and decreased milk production.
- HPAI has also been detected in unpasteurized milk from infected cows, creating a potential risk of exposure to people who consume raw milk.
- The same virus has been detected in an occupationally exposed individual resulting in mild illness and conjunctivitis.

At this point, the risk to the general population is low, and the greatest risk is for **occupational exposures to infected poultry, livestock, and other animals.**

Avian Influenza Surveillance in Hospitalized Patients

Due to this evolving risk, surveillance for avian influenza amongst hospitalized patients is being enhanced for the period from **April 15 to September 15, 2024.**

The CMOH is asking for your cooperation in maintaining a heightened index of suspicion for patients with severe influenza (i.e., being admitted to hospital) as part of enhanced surveillance for avian influenza.

Avian Influenza Surveillance in Hospitalized Patients

This includes:

- **Screening of hospitalized patients:** Obtain a history from individuals with severe influenza/influenza-like symptoms regarding **potential exposures to infected birds or mammals, or to contaminated environmental surfaces, in the past 14 days prior to illness onset.**
- **Laboratory surveillance:** For patients in hospital with influenza A (non-H3/non-H1, if known) samples should be **forwarded to Public Health Ontario Laboratory (PHOL) for sub-typing**

If there is a relevant exposure history, notify your hospital infection prevention and control AND the **Middlesex-London Health Unit at 519-663-5317.**



Updated Resources

Updated Resources

Public Health Ontario:

- [Measles webpage](#)
- [Measles in Ontario Enhanced Epidemiological Summary](#)
For epidemiological information on confirmed measles cases, including case locations and vaccination status
- [Avian Influenza – Real-time PCR](#)



ENewsletter and Webinar Schedule

ENewsletter and Webinar Schedule

- eNewsletters will continue twice a month
- New start time of 12:15 p.m. for webinars
- Upcoming webinars:
 - [May 22, 2024](#)
 - [June 18, 2024](#)



Thank you for joining us!

Questions?

- Ask using chat function now, or after the webinar at:
healthcareproviders@mlhu.on.ca
- For urgent matters please call the Health Unit's
main line at **519-663-5317**
- For more information
www.healthunit.com/healthcare-providers

