

Ministry of Children, Community and Social Services (MCCSS)

COVID-19 Vaccination Policy

Guidelines for Implementation

Programs offered by Ministry of Children, Community and Social Services (MCCSS) service providers can serve as a home for residents/clients, a service setting for vulnerable children, youth and/or adults, and a workplace for staff who support them. Public health measures are intended to protect residents, service recipients and staff from COVID-19 transmission, while supporting individuals' dignity, mental health and well-being by enabling them to engage in the community and maintain key relationships.

Vaccination against COVID-19 helps reduce the number of new cases, and, most importantly, severe outcomes including hospitalizations and death due to COVID-19 in residents, service recipients, staff and visitors.

Individuals who are not eligible for vaccination or cannot be vaccinated due to medical conditions need to be protected. Achieving high immunization rates with service providers who regularly provide essential close contact and direct therapies and interventions to vulnerable populations will support achieving this protection.

In accordance with **Letters of Instruction issued by the Office of the Chief Medical Officer of Health** under the authority of subsection 2(2.1) of Schedule 1 of [O. Reg. 364/20: Rules for Areas at Step 3 and at the Roadmap Exit Step](#) under the *Reopening Ontario (A Flexible Response to COVID-19) Act, 2020* (ROA) ("Instructions"):

- 1) All businesses and organizations identified in the Instructions as "Covered Organizations" (see **Appendix 1** for a list) must establish, implement and ensure compliance with a COVID-19 vaccination policy that requires its employees, staff, contractors, volunteers and students, as well as persons who provide services in an Education and Community Partnership program (herein referred to as "Required Individuals") to provide:
 - a. proof of full vaccination¹ against COVID-19; or

¹ For the purposes of this document, "fully vaccinated" means having received the full series of a COVID-19 vaccine or combination of COVID-19 vaccines approved by the World Health Organization (e.g., two doses of a two-dose vaccine series, or one dose of a single-dose vaccine series); and having received the final dose of the COVID-19 vaccine at least 14 days ago.

- b. written proof of a medical reason provided by a physician or registered nurse in the extended class that sets out: (i) a documented medical reason for not being fully vaccinated against COVID-19, and (ii) the effective time period for the medical reason; or
 - c. proof of completing an educational session approved by the Covered Organization about the benefits of COVID-19 vaccination prior to declining vaccination for any reason other than a medical reason. The approved session must, at minimum address:
 - i. how COVID-19 vaccines work.
 - ii. vaccine safety related to the development of the COVID-19 vaccines.
 - iii. the benefits of vaccination against COVID-19.
 - iv. risks of not being vaccinated against COVID-19; and
 - v. possible side effects of COVID-19 vaccination.
- 2) Every Covered Organization's vaccination policy shall require that where a Required Individual, as identified in the Instruction, does not provide proof of being fully vaccinated against COVID-19 in accordance with paragraph 1(a), but instead relies upon the medical reason described at paragraph 1(b) or the educational session at 1(c), the Required Individual shall:
- a. submit to regular antigen point of care testing for COVID-19 and demonstrate a negative result, at intervals to be determined by the Covered Organization, which must be at a minimum once every seven days.
 - b. provide verification of the negative test result in a manner determined by the Covered Organization that enables the Covered Organization to confirm the result at its discretion.
- 3) Every Covered Organization must collect, maintain, and disclose, statistical (non-identifiable) information as follows:
- a. Documentation that includes (collectively, "the statistical information"):
 - i. the number of Required Individuals that provided proof of being fully vaccinated against COVID-19;
 - ii. the number of Required Individuals that provided a documented medical reason for not being fully vaccinated against COVID-19;
 - iii. the number of Required Individuals that completed an educational session about the benefits of COVID-19 vaccination in accordance with 1(c), where applicable; and

- iv. the total number of the Covered Organization's Required Individuals to whom this Instruction applies.

- b. Disclose the statistical information to MCCSS in the manner and within the timelines specified by MCCSS. MCCSS may seek additional detail within the requested Statistical Information outlined above which will also be specified in the request. MCCSS may further disclose this Statistical Information and may make it publicly available.

The purpose of this guidance document is to support Covered Organizations in developing and implementing their COVID-19 immunization policies².

MCCSS recognizes that Covered Organizations include First Nations, Inuit and Métis organizations. The CMOH and MCCSS support the principles of reconciliation and recognize that these organizations may adapt the content of this policy to reflect the experience and perspective of the Indigenous community or communities that they serve, while retaining alignment with the Letter of Instructions' objectives.

Providing proof

Proof of vaccination

After vaccination, individuals with an Ontario photo health card can log in to the [provincial portal](#) to download or print an electronic COVID-19 vaccine receipt (PDF) for each dose received. The physical/hard copy receipt and email version of the receipt will resemble the following:

² The application and use of this document are the responsibility of the user. This document is not intended as a substitute for any applicable legislation, directives, or orders and does not constitute legal advice. In the event of any conflict between this document and any legislation, directive, or order, the legislation, directive, or order prevails.

Ontario 

Ministry of Health
Ministère de la Santé

Name/Nom: [REDACTED]
 Health Card Number/Numéro de la carte Santé: [REDACTED]
 Date of Birth/Date de naissance: [REDACTED]
 Date/Date: 2021-05-16, 3:43 p.m.
 Agent/Agent: COVID-19_mRNA
 Product Name/Nom du produit: PFIZER-BIONTECH COVID-19 VACCINE mRNA
 Diluent Product: PFIZER Diluent 0.9% Sodium Chloride
 Lot/Lot: [REDACTED]
 Dosage/Dosage: 0.3ml
 Route/Voie: Intramuscular / intramusculaire
 Site/Site: Left deltoid / deltoïde gauche
 You have received 1 valid dose(s) / Vous avez reçu 1 dose(s) valide(s)
 Vaccine Administered By/Vaccin Administré par: [REDACTED]
 Registered Practical Nurse
 Authorized Organization/Organisme agréé: [REDACTED]

Note: Only valid doses are counted / Remarque: Seules les doses valides sont comptées

Please remain on the premises for the next 15 minutes for observation. You are free to leave the vaccination clinic at 3:58 PM / Veuillez rester sur place pendant les 15 prochaines minutes aux fins d'observation. Vous pouvez quitter la séance de vaccination à 3:58 PM.

Individuals who have a red and white health card can call the *Provincial Vaccine Booking Line* at 1-833-943-3900. The call centre agent can email a copy of their receipt.

Individuals in the following circumstances should contact their [local public health unit](#) for further information:

- Individuals without an Ontario health card (or who did not provide their Ontario health card at the time of vaccination) should contact public health for a copy of their receipt.
- Individuals who did not receive a Canadian approved vaccine.
- Individuals who have received an out-of-province vaccination and have not yet contacted their local public health unit should do so to ensure their records are validated and recorded.
- Individuals who have questions or concerns about the information supporting their COVID vaccine receipt.

Proof of a medical reason for not being vaccinated

Written proof of a documented medical reason for not being fully vaccinated against COVID-19 must be provided by either a physician or a registered nurse in the extended class (see [Extended Class \(cno.org\)](#)). Referral and consultation support for physicians and registered nurses in the extended class is available through Ontario's eConsult Service and [OTN Hub](#).

In some instances, the medical reason for the person not being vaccinated may be time-limited. The Instructions require that the note from the physician/nurse practitioner specifies the effective time-period for the medical reason. If time-limited, the note should indicate how long it is expected to last.

Covered Organizations should communicate this requirement to anyone who is planning on submitting proof of a medical reason.

Proof of completion of an educational program

Covered Organizations are encouraged to plan a way for Required Individuals who do not provide proof of vaccination to provide proof that they have completed an educational program approved by the Covered Organization. Options could include having the person sign a form saying they completed the educational program (i.e. an attestation) or having them answer questions that confirm they have understood the program's content.

Covered Organizations delivering their own educational programs can record the person's participation directly.

Choosing the content for the educational program

The educational program must address, at a minimum, all of the following:

- How COVID-19 vaccines work;
- Vaccine safety related to the development of the COVID-19 vaccines;
- Benefits of vaccination against COVID-19;
- Risks of not being vaccinated against COVID-19; and
- Possible side effects of COVID-19 vaccination.

When choosing the content for the educational program that they will be offering, Covered Organizations should:

- Consider whether the content meets the requirements specified in the Instructions.

- Consult with the local public health unit, Infection Prevention and Control (IPAC) specialists who attend their setting(s), and/or their local IPAC Hub where if needed.
- Consider the source of the information. Questions to ask include:
 - Is the content from a reputable source?
 - Is the content current?
 - Is the content clear and easy to understand?
 - Does the content represent the risks and benefits of vaccination fairly and in a transparent manner?
 - Does the content respect that it is an individual's personal choice as to whether to get vaccinated?
- Consider whether the content is appropriate for the linguistic and cultural characteristics of the people who will be taking the educational program.

Covered Organizations should also consider and address any accessibility needs of people who will be taking the educational program.

Sample resources to help support the creation of a Covered Organization's educational program are provided in **Appendix 2**.

Implementing regular antigen point of care testing

Covered Organizations are required to ensure that Required Individuals who are not fully vaccinated, are partly vaccinated (have received one dose of a two-dose vaccine series, or a final dose of a two-dose vaccine series within the last 14 days), or do not provide proof of vaccination undertake regular antigen point of care testing and verify the negative test results.

A rapid antigen point of care test can be performed anywhere (i.e., on-site, at the place of employment) by a health professional or trained individual and does not require shipping a specimen to a lab for processing.

Rapid antigen point of care tests are available to Covered Organizations free of charge and can be obtained through the [Provincial Antigen Screening Program \(PASP\)](#).

The PASP also provides comprehensive [onboarding and training resources](#) to support implementation of regular antigen point of care testing as required and in accordance with provincial testing guidance.

Provincial guidance on the use of antigen point of care tests is available at: https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/Antigen_Screening_Guidance_2021-03-5.pdf

Communicating about the policy

Covered Organizations must communicate the requirements of their policy to all persons who are subject to the policy, including any unlicensed outside paid resources (OPR) and/or third parties, and make it available to Required Individuals, residents/clients/people supported, their substitute-decision makers and family members.

While Covered Organizations continue to encourage everyone who attends a service setting to get vaccinated, communication about the policy should be provided in a way that respects and supports education and informed choice about COVID-19 vaccination.

Sample key messages:

- Public health measures in place protect residents, those individuals receiving services and supports and staff from COVID-19 transmission, while supporting individuals' dignity, mental health and well-being by enabling them to engage in the community and maintain key relationships.
- Vaccination against COVID-19 helps reduce the number of new cases, and, most importantly, severe outcomes including hospitalizations and death due to COVID-19 for residents, service recipients and staff.
- Individuals who are not eligible for vaccines or cannot be vaccinated due to medical conditions need to be protected. Achieving high immunization rates with service providers who regularly provide essential close contact and direct therapies and interventions to these populations will support achieving this protection.
- Although it is an individual's right to make the decision about whether to be vaccinated or not, it is strongly encouraged that everyone get vaccinated and everyone will be supported in accessing a vaccine.

Ways to support staff with their decisions regarding vaccination include:

- Facilitating one-to-one conversations with a trusted peer, community leader, or health care professional.
- Tailoring messages to the unique staff characteristics and needs within your settings.
- Continuing to work with local public health units to offer onsite vaccine opportunities wherever possible.
- Identifying vaccine champions in your communities, including primary care physicians, seasoned staff, and faith/cultural leaders, who can talk to your staff directly (such as, through a virtual event) and share their personal stories.
- Providing the opportunity to go to an offsite vaccination clinic during paid work time and covering the transportation costs (where onsite options are not feasible), as well as providing paid leave should a staff person experience side effects from the vaccine.
 - Note: On April 29, 2021, the government amended the [*Employment Standards Act, 2000 \(ESA\)*](#) to require employers to provide employees who are covered by the ESA with up to three days of paid leave, at their regular wage, up to \$200 per day, for reasons related to COVID-19. Paid leave is available for certain reasons related to COVID-19, including going to get vaccinated and experiencing a side effect from a COVID-vaccination.

Reporting requirements

All Covered Organizations must collect, maintain, and disclose data, at a minimum on a monthly basis, key data metrics that underpin the Letters of Instruction.

MCCSS will issue instructions for the collection of this data in the near future.

Upon the request of MCCSS, Covered Organizations must disclose the statistical information to MCCSS in the manner and the timelines specified in the request. MCCSS may seek additional detail within the requested statistical information outlined above which will also be specified in the request. MCCSS may further disclose this statistical information and may make it publicly available in aggregate form.

Covered Organizations that have entered into contracts with unlicensed OPRs and/or third parties for the provision or delivery of services are responsible for the collection of information from third parties, and submission to the MCCSS.

Covered Organizations will need to provide the following information:

- i. the number of Required Individuals that provided proof of being fully vaccinated against COVID-19;
- ii. the number of Required Individuals that provided a documented medical reason for not being fully vaccinated against COVID-19;
- iii. the number of Required Individuals that completed an educational session about the benefits of COVID-19 vaccination in accordance with paragraph 1(c), where applicable; and
- iv. the total number of the Covered Organization's Required Individuals to whom these Instructions apply.

Covered Organizations must not provide any identifying information to MCCSS and should communicate to all Required Individuals who are subject to the provider's policy that only aggregate information will be shared with MCCSS and no identifying information will be disclosed.

Multi-service providers that are mandated to report similar metrics through another directive (e.g., hospitals impacted by Directive #6 of the HPPA) must adhere to the reporting requirements for all applicable directives and instructions.

Questions

Covered Organizations may contact their MCCSS program supervisor, MCCSS contact, and/or their contracting service agency with questions or concerns about this guidance or the Instructions.

Appendix 1

“Covered Organizations” as defined in Letter of Instruction issued by the Office of the Chief Medical Officer of Health

- service agencies, as defined in the *Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008* (SIPDDA).
- third parties that have entered into a contract with a service agency, as defined in SIPDDA, to provide services and supports to adults with developmental disabilities.^[1]
- a transfer payment recipient funded by the Ministry of Children, Community and Social Services (MCCSS) that provides intervenor services for persons who are deafblind.
- a transfer payment recipient funded by MCCSS that provides residential or emergency residential services under the Violence Against Women Support Services program or the Anti-Human Trafficking Community Supports program.
- licensees operating a children’s residence as defined in the *Child, Youth and Family Services Act, 2017* (CYFSA) and licensees to which section 117 of Ontario Regulation 156/18 made under the CYFSA applies.
- businesses or organizations providing residential care within the meaning of the CYFSA where:
 - No licence is required pursuant to Part IX; and,
 - The child is placed with the business or organization by a service provider as defined in the CYFSA.
- transfer payment recipients funded under the CYFSA that provide programs and deliver services with respect to children and youth with special needs programs including Early Intervention; Autism; Respite; Complex Special Needs funded services; Coordinated Service Planning; and FASD worker services.^[2]
- third parties that have entered into a contract with a transfer payment recipient to provide services to children and youth with special needs.^[3]
- a transfer payment recipient funded by MCCSS that provides and delivers Healthy Child Development (HCD) and Early Intervention programs.

(collectively the “**Covered Organizations**”).

^[1] Does not apply to host family residences under SIPDDA.

^[2] Does not apply to direct funding programs such as Special Services at Home, through which families receive funding to purchase their own services.

^[3] Does not apply to foster care as defined under CYFSA.

Appendix 2

Sample resources to support Covered Organizations with the creation of an educational program to support the COVID-19 Vaccination Policy (in alphabetical order)

[About COVID-19 Vaccines](#) (Ontario Ministry of Health)

****bilingual**** [Building Confidence in Vaccines](#) [English] and [Accroître la confiance à l'égard des vaccins](#) [French] (Public Health Ontario)
[Communicating effectively about immunization: Canadian Immunization Guide](#) (Government of Canada)

****multilingual**** [Coronavirus disease \(COVID-19\): Awareness resources](#) (Government of Canada)

[COVID-19 Info](#) (Immunize Canada)

[COVID-19 Vaccine Education Session \(communitylivingsex.org\)](#) (SE IPAC Hub and Kingston Health Sciences Centre)

[COVID-19 Vaccination Education Video](#) (Dr. Nathan Stall for AdvantAge Ontario) **new*

[COVID-19 Vaccination: Making an Informed Decision Learning Module](#) (Lakeridge Health)

[COVID-19 Vaccination: Making an Informed Decision Learning Module](#) [**working file for download and editing**] (Lakeridge Health) **Note: In order to access the workable Lakeridge Health module your computer will require an Articulate licence.**

[COVID-19 Vaccination Declaration Sample](#) (Lakeridge Health)

****bilingual**** [COVID-19 vaccines and workplace health and safety: Learn how COVID-19 covid 19 vaccines help protect you and make your workplace safer](#) [English] and [Les vaccins contre la COVID-19 et la santé et la sécurité au travail: Découvrez comment les vaccins contre la COVID-19 covid 19 contribuent à vous protéger et à rendre votre lieu de travail plus sécuritaire](#) [French] (Ontario Ministry of Labour, Training and Skills Development)

[COVID-19: Vaccines | Centre for Effective Practice - Digital Tools](#) (Centre for Effective Practice)

[COVID-19 Vaccines Explained](#) (World Health Organization)

[COVID-19 Vaccine Information Sheet](#) (Ontario Ministry of Health)

****multilingual**** [COVID-19: Vaccine Resources](#) and in [American Sign Language](#) (City of Toronto)

****multilingual**** [Documents multilingues sur la vaccination contre la COVID-19](#) (Alliance des communautés culturelles pour l'égalité dans la santé et les services sociaux)

[Gashkiwidoon toolkit: covid-19 vaccine implementation](#) (Indigenous Primary Health Care Council)

****multilingual**** [LTC COVID-19 Vaccine Promotion Toolkit](#) (Ministry of Long-Term Care)

[Ontario's doctors answer COVID-19 vaccine questions](#) (Ontario Medical Association)

[Sunnybrook COVID-19 e-learning module](#) (Sunnybrook Health Sciences Centre)

[Tools to Boost Vaccine Confidence in LTC Teams](#) (Ontario Centres for Learning, Research and Innovation in Long-Term Care)

[Updates on COVID-19](#) (National Collaborating Centre for Indigenous Health)

Disclaimer: The Ministry of Children, Community and Social Services and the Province of Ontario do not assume any responsibility for the content of any of the resources listed above. The inclusion of the resources in the list above does not constitute an endorsement of the resource or the organization/entity that developed the resource. Covered Organizations should seek legal advice on the use of any resources/materials that hold a patent, copyright, trademark, or other proprietary rights. If a Covered Organization wishes to use any or all of the resources in the list above, the Covered Organization should clearly and expressly attribute sources appropriately.