

# Ministry of Children, Community and Social Services (MCCSS)

## COVID-19 Vaccination Policy

### Guidelines for Implementation for Children's Treatment Centres

Children's Treatment Centres provide programs and deliver children's rehabilitation services for children with special needs which include individuals with increased vulnerability, who are not eligible for vaccination or cannot be vaccinated due to medical conditions, e.g. children under 12 or children and youth who are medically fragile.

Children's Treatment Centres (CTCs) are funded under the Child, Youth and Family Services Act, 2017 (CYFSA) to deliver services (including "children's rehabilitation services") for children and youth with special needs (herein referred to as "Covered Organizations", also see **Appendix 1**).

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 Instructions 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" must establish, implement and ensure compliance with a COVID-19 vaccination policy that requires its employees, staff, contractors, volunteers and students, and persons who provide services in an Education and Community Partnership program (herein referred to as "Required Individuals") to provide:
  - a. proof of full vaccination<sup>1</sup> against COVID-19; or

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<sup>1</sup> 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

- 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) Despite paragraph 1, Covered Organizations may decide to remove the option set out in paragraph 1(c) and require all Required Individuals to either provide the proof required in paragraph 1 (a) or (b).
- 3) Where a Covered Organization decides to remove the option set out in paragraph 1(c) as contemplated in paragraph 2, the Covered Organization shall make available to the Required Individuals an educational session that satisfies the requirements of paragraph 1(c).
- 4) Every Covered Organization's vaccination policy shall require that where a Required Individual 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

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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.

- 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.
- 5) 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 paragraph 3 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 the Ministry of Children, Community and Social Services (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 Children's Treatment Centres in developing and implementing their COVID-19 immunization policies<sup>2</sup>.

MCCSS recognizes that service providers 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 Letters of Instruction objectives.

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<sup>2</sup> 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.

## 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 resemble the following:

**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: 0.5ml  
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 sans faire 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.

However, there may be some exceptional instances where an individual cannot easily present or upload a digital copy of their vaccine receipt. The MOH encourages Covered Organizations to work with Required Individuals on a case by case basis to collect acceptable proof of vaccination.

For persons vaccinated outside of Ontario, a written attestation from the person confirming the date(s) of vaccination and that the vaccine administered is one of the ones that has been approved by Health Canada is acceptable.

### **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 \(cno.org\)](https://www.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**

For those Children's Treatment Centres that are choosing not to remove the education option as described in paragraph 2 above, proof of completion in educational programs will be required. Children's Treatment Centres are encouraged to plan a way for Required Individuals to provide proof that they have completed the educational program. 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.

Children's Treatment Centres delivering their own educational programs can record the person's participation directly.

## Choosing the content for the educational program

The following will apply to Children's Treatment Centres that continue to require proof for completing an educational program as well as those that are not requiring proof but continue to meet the requirements of paragraph 3 above. Applicable to all Covered Organizations, 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 appropriate/feasible.
- 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.

Children's Treatment Centres should also consider and address any accessibility needs of people who will be taking the educational program.

Resources to help support the creation of an 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 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 testing as required.

Provincial guidance on the use of rapid antigen tests is available at [https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/Antigen\\_Screening\\_Guidance\\_2021-03-5.pdf](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 should communicate the requirements in their policy to everyone who is subject to the policy, including third party service providers, and make it available to Required Individuals, residents/clients/people supported, their substitute-decision makers and family members.

While Covered Organizations should 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, 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 request of MCCSS, Covered Organizations shall disclose the statistical information to the ministry in the manner and the timelines specified in the request. The ministry may seek additional detail within the requested statistical information outlined above which will also be specified in the request. The ministry may further disclose this statistical information and may make it publicly available.

Children's Treatment Centres that have entered into contracts with third parties for the provision or delivery of services are responsible for the collection of information from third parties, and submission to the ministry.

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 the ministry and should communicate to all Required Individuals who are subject to the provider's policy that information will be shared with the ministry in aggregate form only and without any identifying information.

Covered Organizations 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.

## **Questions**

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

## Appendix 1

### Covered Organizations as defined in the Letter of Instructions issued by the Office of the Chief Medical Officer of Health

- Children’s Treatment Centres [CTCs] funded under the *Child, Youth and Family Services Act, 2017* (CYFSA) to deliver services (including “children’s rehabilitation services”) for children and youth with special needs;
  - Third parties that have entered into a contract with CTCs to provide “children’s rehabilitation services” for children and youth with special needs.
- (collectively the “**Covered Organizations**”).

## 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 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 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 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.