

RESOURCE GUIDE

MINISTER'S DIRECTIVE LONG-TERM CARE HOME COVID-19 IMMUNIZATION POLICY

Introduction

Achieving high immunization rates in Ontario's long-term care (LTC) homes through vaccination is part of a range of measures and actions that can help prevent and limit the spread of COVID-19 in LTC homes. 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 both residents and others who may be present in a long-term care home.

The updated *Minister's Directive: Long-Term Care Home COVID-19 Immunization Policy* (referred to as the "Directive" from herein), requires all LTC home licensees to ensure that all staff, support workers, students, and volunteers provide proof of being vaccinated against COVID-19, or have a valid medical exemption, by November 15, 2021, or before they begin working, undertaking a student placement or volunteering in a long-term care home. If a staff, support worker, student, or volunteer shows proof of a first dose of COVID-19 vaccine by November 15 they have until December 13, 2021 to provide proof of having received a final required dose of the vaccine series. If a support worker is attending the home for emergency or palliative situations, to provide timely medical care, or for the sole purposes of making a delivery, they are not required to provide proof of being fully vaccinated in order to enter the home.

LTC homes may provide an extension of not more than seven (7) days duration on a case by case basis, where it is determined that there are unforeseen or extenuating circumstances outside of the control of the individual that impede the individual from meeting the requirements by the established date.

The objectives of the Directive are to set out a provincially consistent approach to vaccination requirements in long-term care homes, maximize COVID-19 immunization rates in long-term care homes, ensure that individuals have access to information about COVID-19 vaccination, and increase accountability and transparency through public reporting of immunization rates in long-term care homes.

The purpose of this resource guide is to support licensees in implementing COVID-19 vaccination requirements in their long-term care home(s)¹.

¹ The application and use of this document are the responsibility of the user. The Ministry of Long-Term Care assumes no liability resulting from any such application or use. This document is not intended as a substitute for any applicable legislation, directives, or

This guide also includes:

- **Appendix 1**: resources to support the creation of a home's educational program
- Appendix 2: frequently asked questions (FAQs)

Providing proof

Proof of vaccination

Staff, support workers, students and volunteers must provide proof of COVID-19 vaccine administration that satisfies one of the following:

- the full series of a COVID-19 vaccine authorized by Health Canada, or any combination of such vaccines, or
- one or two doses of a COVID-19 vaccine not authorized by Health Canada, followed by one dose of a COVID-19 mRNA vaccine authorized by Health Canada, or
- three doses of a COVID-19 vaccine not authorized by Health Canada.

For people who were vaccinated in Ontario, the physical/hard copy receipt and/or email receipt, provided by the Ministry of Health at the time of vaccination is acceptable proof of vaccination, as is the enhanced vaccine certificate with QR code accessed through the provincial vaccine portal. People who received some or all of their vaccine doses out of province can contact their local public health unit about obtaining proper documentation, per MOH's <u>COVID-19 Guidance for Individuals Vaccinated outside of Ontario/Canada</u>.

Proof of a valid medical exemption

There are very few medical reasons why a person cannot be vaccinated against COVID-19. As noted in the Ministry of Health's guidance on <u>Medical Exemptions to</u> <u>COVID-19 Vaccination</u>, the only valid reasons for medical exemption for mRNA vaccine are:

- a severe allergic reaction or anaphylaxis to a component of a COVID-19 vaccine, or following a COVID-19 vaccine, and that allergy was documented and evaluated by an allergist/immunologist and the allergist/immunologist has determined that the individual is unable to receive any COVID-19 vaccine;
- myocarditis prior to initiating an mRNA COVID-19 vaccine, if between the ages of 12-17;

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. Additionally, this document is not intended to take the place of medical advice, diagnosis, or treatment.

- myocarditis or pericarditis following a mRNA COVID-19 vaccine; or
- serious adverse event following COVID-19 immunization, if relevant specialist has determined the individual is unable to receive any COVID-19 vaccine; or
- actively receiving monoclonal antibody therapy or convalescent plasma therapy for the treatment or prevention of COVID-19 (time-limited exemption).

Proof must be provided by either a physician or a nurse practitioner (note: A nurse practitioner is a registered nurse who holds an extended certificate of registration under the <u>Nursing Act, 1991</u>). The exemption must clearly indicate the medical reason why the individual cannot be vaccinated against COVID-19 and the effective time period for that reason.

Choosing the content for the educational program

Licensees must continue to make an educational program about COVID-19 vaccines available to staff, support workers, students and volunteers. The educational program must be approved by the licensee and 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, licensees should:

- Consider whether the content meets the requirements specified in the Directive.
- Consult with the home's medical director, Infection Prevention and Control (IPAC) specialists who attend their LTC home, 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.

Licensees should also consider and address any accessibility needs of people who may be taking the educational program. Resources to help support the creation of a licensee's educational program are provided in **Appendix 1**.

Implementing vaccination requirements

The following checklist is intended to help homes consider key planning and implementation elements when introducing the new vaccination requirements in a long-term care home, based on lessons shared by homes that have already implemented mandatory vaccination policies. There may be other considerations for implementation in your home(s), and the list is not intended to be exhaustive or all encompassing.

Immunization Policy Implementation Planning and Preparation	Complete
Quickly update your home's COVID-19 immunization policy to reflect the updated Minister's Directive, including determining what the consequences of non-compliance will be.	
The updated Directive stipulates that staff, support workers, students and volunteers who do not show required proof of vaccination or medical exemption by November 15th cannot enter the home to work, train or volunteer. The employer must determine what other consequences, if any, apply in these situations. As of October 1, 2021, persons being hired, and new student placements and volunteers must show proof of being fully vaccinated before entering the home to work, train or volunteer.	
Meet with your union partner(s) to discuss the vaccination requirements, including the consequences, and see if the union partner(s) are willing to actively promote the importance of being vaccinated with their members.	
Conduct a risk assessment , by home to ensure a clear picture of possible staffing impacts by each department to inform your mitigation plan.	
 Prepare a mitigation plan using the risk assessment to anticipate potential emerging staffing needs or shortages. Possible elements could include: Advance hiring for anticipated staff losses in specific areas of greater risk Earmarking Prevention and Containment funding for urgent staffing needs should they arise Leveraging available staffing and operational flexibilities, per O. Reg. 95/20 (Streamlining Requirements for LTC Homes) and O. Reg 79/10 (e.g., 24-hour nursing care exceptions) 	

 Obtaining advance rosters from staffing agencies in order to quickly fill positions temporarily where needed 	
Communicate with staff, support workers, students and volunteers in a supportive, non-judgemental way , including dispelling myths, and support access to vaccination, preferably onsite.	
 Sample key messages: Given they live in a group setting and may have underlying medical conditions, residents are at increased risk for contracting the COVID-19 virus and experiencing serious outcomes. 	
 We are currently in the fourth wave of the COVID-19 pandemic in Ontario, driven by the Delta variant which is now the predominant strain circulating in Ontario. 	
- The Delta variant is more transmissible and may cause more severe disease than the previous strains, in particular for residents living in long-term care homes, even those who are fully vaccinated.	
- Ensuring all individuals who work, train or volunteer in a long- term care home are vaccinated is critical to protect all residents and staff. High rates of vaccination will help reduce the risk of outbreaks and the need to isolate residents, and will prevent unnecessary hospitalization and death. Isolation means residents lose in-person social interaction and the ability to engage in activities; the effects of isolation may be greater for residents who have dementia and/or a cognitive impairment.	
- Getting vaccinated protects you and your family, and means you do not have to self-isolate if you've been in contact with a confirmed case of COVID-19. You can also begin working in more than one long-term care, retirement home, or other health care setting.	
Ways to support access to vaccination:	
 Continuing to work with local public health units to offer onsite vaccine opportunities wherever possible, including onboarding for independent administration of COVID-19 vaccines. 	

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.

Statistical Information

Per the Directive, all licensees must collect, maintain, and disclose to the Ministry of Long-Term Care, at a minimum on a monthly basis, key data metrics that underpin this Directive.

Licensees will need to provide, at a minimum, the following information:

- the total number of individuals subject to the Directive for the reporting cycle;
- the total number of individuals who have submitted the proof as per the requirements in section 2 of the Directive broken down by which type of proof was provided;
- for each type of proof, the number of individuals who submitted each type of proof who are staff, student placements, or volunteers; and
- the total number of individuals who have been granted an extension of not more than seven (7) days and the reason why.

Licensees must not provide any identifying information to the ministry and should communicate to all individuals who are subject to the home's policy that information will be shared with the ministry in aggregate form only and without any identifying information. The Ministry of Long-Term Care may share any and all statistical information provided by licensees pursuant to this Directive with the Ministry of Health, local public health units or the public, including by posting on a public-facing website of the Government of Ontario, at any time.

Appendix 1

COVID-19 Vaccination Resources

General Information about COVID-19 and COVID-19 Vaccines:

- <u>About COVID-19 Vaccines</u> (Ontario Ministry of Health)
- **multilingual** <u>Coronavirus disease (COVID-19)</u>: <u>Awareness resources</u> (Government of Canada)
- <u>COVID-19 Info (Immunize Canada)</u>
- **bilingual** <u>COVID-19 vaccines and workplace health and safety: Learn how COVID-19covid 19 vaccines help protect you and make your workplace safer</u> [English] and Les vaccins contre la COVID-19 et la santé et la sécurité au travail: Découvrez comment les vaccins contre la COVID-19covid 19 contribuent à vous protéger et à rendre votre lieu de travail plus sécuritaire [French] (Ontario Ministry of Labour, Training and Skills Development)
- <u>COVID-19: Vaccines | Centre for Effective Practice Digital Tools</u> (Centre for Effective Practice)
- <u>COVID-19 Vaccines Explained</u> (World Health Organization)
- COVID-19 Vaccine Information Sheet (Ontario Ministry of Health)
- **multilingual** <u>COVID-19</u>: Vaccine Resources and in <u>American Sign Language</u> (City of Toronto)
- **multilingual** <u>Documents multilingues sur la vaccination contre la COVID-19</u> (Alliance des communautés culturelles pour l'égalité dans la santé et les services sociaux)
- <u>Gashkiwidoon toolkit: covid-19 vaccine implementation</u> (Indigenous Primary Health Care Council)
- ****multilingual**** <u>LTC COVID-19 Vaccine Promotion Toolkit</u> (Ministry of Long-Term Care)
- <u>Medical Exemptions to COVID-19 Vaccination</u> (Ministry of Health)
- <u>Ontario's doctors answer COVID-19 vaccine questions (Ontario Medical Association)</u>

Resources to Combat Vaccine Hesitancy:

- ****bilingual****<u>Building Confidence in Vaccines</u> [English] and <u>Accroître la confiance à</u> <u>l'égard des vaccins</u> [French] (Public Health Ontario)
- <u>Communicating effectively about immunization: Canadian Immunization Guide</u> (Government of Canada)
- <u>Tools to Boost Vaccine Confidence in LTC Teams</u> (Ontario Centres for Learning, Research and Innovation in Long-Term Care)
- <u>Updates on COVID-19</u> (National Collaborating Centre for Indigenous Health)

Education Videos and Modules to Inform Staff, Support Workers, Student Placements and Volunteers Prior to Vaccination:

- <u>COVID-19 Vaccination Education Video</u> (Dr. Nathan Stall for AdvantAge Ontario) **new*
- <u>COVID-19 Vaccination: Making an Informed Decision Learning Module</u> (Lakeridge Health)
- <u>COVID-19 Vaccination: Making an Informed Decision Learning Module</u> [working file for download and editing] (Lakeridge Health)

- <u>COVID-19 Vaccination Declaration Sample</u> (Lakeridge Health)
- Sunnybrook COVID-19 e-learning module (Sunnybrook Health Sciences Centre)

To book a COVID-19 vaccine appointment or download an enhanced vaccine certificate

• <u>COVID-19 vaccination system (Ontario Health)</u>

To report your COVID-19 immunization policy data

• <u>Health Data Collection Services (HDCS)</u> platform (Ministry of Long-Term Care)

Disclaimer: The Ministry of Long-Term Care 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. Long-term care home licensees should seek legal advice on the use of any resources/materials that hold a patent, copyright, trademark, or other proprietary rights. If a long-term care home licensee wishes to use any or all of the resources in the list above, the licensee should clearly and expressly attribute sources appropriately.

Appendix 2

FAQs

Minister of Long-Term Care's Directive -Long-Term Care Home COVID-19 Immunization Policy

1. What has changed in the Minister's Directive?

The latest recommendation from the National Advisory Committee on Immunizations (NACI) states that the optimal interval between first and second dose of a COVID-19 vaccine is eight (8) weeks to maximize the immune response. As such, the Minister's Directive has been updated to provide individuals who received a first dose of COVID-19 vaccine the option of receiving their second dose at the NACI recommended interval of 8 weeks.

Staff, support workers, students, and volunteers who received a first dose of COVID-19 vaccine by November 15 must provide proof of having received a final required dose of COVID-19 vaccine by December 13, 2021. This change reflects 8 weeks (rather than 4 weeks) from the date individuals would have needed to receive their first dose in order to meet the November 15 deadline under the policy announced on October 1, 2021.

Homes that voluntarily introduced mandatory vaccination policies with deadlines earlier than November 15, 2021 can decide whether any adjustments are needed to their policies, without going beyond December 13, 2021.

2. What are the vaccination requirements under the Minister's Directive?

The Minister's Directive requires all staff, support workers, students and volunteers to be vaccinated against COVID-19 by November 15, 2021, or in the case of new staff, support workers, students and volunteers, before they begin working, undertaking their placement or volunteering in the home, unless they have a valid medical exemption. If a staff, support worker, student, and/or volunteer shows proof of a first dose by November 15 they have until December 13, 2021 to provide proof of a final required dose of the vaccine series as set out below.

All staff, support workers, student placements and volunteers who do not have a valid medical exemption must provide proof of COVID-19 vaccination that satisfies one of the following:

- the full series of a COVID-19 vaccine authorized by Health Canada, or any combination of such vaccines, or
- one or two doses of a COVID-19 vaccine not authorized by Health Canada, followed by one dose of a COVID-19 mRNA vaccine authorized by Health Canada, or
- three doses of a COVID-19 vaccine not authorized by Health Canada.

An individual is considered to have met the vaccination requirements set out in the directive once they have received all required doses (e.g., 2 doses in a 2-dose series); the 14 days post-final dose to be considered fully immunized does not apply for the purposes of this directive.

Staff, student placements, volunteers, and support workers who have not provided proof of a first dose or documentation of a valid medical contraindication by November 15, 2021 will not be permitted to enter a long-term care home to work, train, or volunteer (with limited exceptions, e.g., emergency responders).

3. Who is responsible for ensuring that staff, support workers, student placements, and volunteers are notified of a home's immunization policy?

Every licensee shall ensure that the updated policy on COVID-19 immunization is communicated to all staff, support workers, student placements, and volunteers, and to residents, their substitute-decision makers and family members attending to the home.

4. To whom do the requirements apply?

The Directive applies to all staff, support workers, student placements, and volunteers. The definition of "staff" in the Directive is the same as that under the *Long-Term Care Homes Act, 2007*; it means persons who work at the home

- as employees of the licensee,
- pursuant to a contract or agreement with the licensee, or
- pursuant to a contract or agreement between the licensee and an employment agency or other third party.

Support workers attending the home in emergency or palliative situations, to provide timely medical care, or for the sole purposes of making a delivery are not required to provide proof of vaccination in order to enter the home.

5. My home has volunteers that only come into the home for 2 hours once a week; would they be subject to the vaccination requirements?

Yes. The Directive requires all staff, support workers, student placements, and volunteers to be vaccinated, unless they have a medical exemption, regardless of the frequency or duration they attend the home.

6. My home has a staff person on a leave of absence who does not current attend the home; would they be subject to the vaccination requirements?

The policy intent of the Minister's Directive which requires staff, student placements, volunteers, and support workers attending the long-term care home to be fully vaccinated, is to protect the health and safety of residents and staff living and working in the home.

While the Minister's Directive applies to all staff, as defined under the Act, if a staff member who is on a leave of absence does not provide proof of vaccination by the deadlines set out in the directive, a licensee is compliant with the directive provided they ensure that staff member does not attend the long-term care home to work, train or volunteer. The minimum

consequence required in the Minister's Directive for individuals who are not fully vaccinated is that they are not permitted to enter a long-term care home to work, train or volunteer. Licensees, as employers, may have additional employment consequences, which must be communicated to all individuals. Individuals on a leave of absence must be fully vaccinated prior to returning to work, unless they have a valid medical exemption.

7. Who is considered a support worker? Do support workers need to be vaccinated to enter a home even if they only attend to one resident in the home?

Yes. The Directive requires all staff, support workers, student placements, and volunteers to be vaccinated, unless they have a medical exemption, regardless of the frequency or duration they attend the home, with the exception of support workers attending the home in emergency or palliative situations, to provide timely medical care, or for the sole purposes of making a delivery.

Support workers are persons who visit a home to provide support to the critical operations of the home or to provide essential services to residents. They are not employees of the home or working at the home through an arrangement with a staffing agency.

Essential services provided by support workers include but are not limited to:

- assessment, diagnostic, intervention or rehabilitation and counselling services for residents by regulated health professionals such as physicians and nurse practitioners
- moving a resident in or out of a home
- social work services
- legal services
- post-mortem services
- emergency services (for example, such as those provided by first responders)
- maintenance services such as those required to ensure the structural integrity of the home and the functionality of the home's HVAC mechanical, electrical, plumbing systems and services related to exterior grounds and winter property maintenance
- o food delivery
- Canada Post mail services and other courier services.

8. Are caregivers and visitors who are entering the home subject to vaccination requirements?

Caregivers and visitors (as defined in MLTC's COVID-19 Guidance document), are not subject to these vaccination requirements. Any caregivers and visitors who are not fully immunized will continue to be tested on a regular basis, as required in the *Minister's Directive on LTC Home Surveillance Testing and Access to Homes.* As of October 15, 2021, all fully immunized people, including caregivers and visitors, will be subject to random antigen testing at a frequency determined by the licensee.

9. Could licensees implement a policy to restrict unvaccinated general visitors and caregivers from entering the home?

While homes may choose to impose their own vaccination requirements for general visitors and caregivers, they must do so with careful consideration of all legal obligations, including the Residents' Bill of Rights and the obligations to ensure a safe and secure home. Any vaccine requirement must appropriately balance a resident's right to receive visitors of their choice and the right to live in a safe environment. This balancing must consider available alternative such as reasonable ways to limit the movement of unvaccinated general visitors and caregivers within the home and developing a general visitor and caregivers policy that takes into account the overall context of the home (e.g., layout of the home, availability of outdoor space, etc.) and the broader community (e.g., local transmission of COVID-19), as well as direction from local public health units.

The ministry strongly encourages licensees to consult with their local public health unit, legal counsel, Residents' Council and Family Council prior to developing and implementing their visitor policies, given the importance of these connections to resident mental and emotional wellbeing and quality of life.

10. How much time do newly hired / retained staff, support workers, student placements, and volunteers have to come into compliance with a LTCH's COVID-19 immunization policy?

All newly hired staff, student placements and volunteers, as well as support workers newly attending to a home, must receive all required doses of COVID-19 vaccine, unless they have a valid medical exemption, before attending the home for the purposes of working, undertaking a student placement, or volunteering.

11. Are homes able to set a date earlier than November 15, 2021 for staff, support workers, student placements and volunteers to comply with the mandatory vaccination policy?

Yes, homes may choose to set a date earlier than November 15 for staff, support workers, student placements and volunteers to provide proof vaccination or a valid medical exemption.

12. What are the consequences for staff, support workers, student placements, and volunteers should they not comply with the vaccination requirements?

Licensees must ensure that no staff, support worker, student or volunteer who has not received at least one dose of COVID-19 vaccine is permitted to enter the home for the purposes of working, undertaking a student placement or volunteering, unless they have a valid medical exemption, as of November 15. Similarly they must ensure that these persons cannot enter the home for these reasons unless they have received all required doses, or received a valid medical exemption, as of December 13. Licensees are responsible for determining what additional consequences may be for their staff, students and volunteers who choose not to meet the requirements (e.g., unpaid leave of absence, reassignment to work outside the home, etc.). In the case of support workers, the employer of the support worker may determine whether there are any other consequences for their staff.

13. What happens if someone has had their first dose of a two dose vaccine series but will not provide proof of a second dose even though it's been several months since he/she got their first dose?

If a person subject to the Directive provides proof of having received the first dose of a twodose vaccine series and fails to provide proof of having received the second dose in accordance with the timeframe set out in the Directive, and the person does not have a valid medical exemption, the person is not permitted to enter the home for the purpose of working, undertaking a student placement or volunteering as of December 13.

14. Are there any circumstances where a licensee may grant a person subject to the home's policy a grace period to comply with the vaccination requirements?

Licensees may grant an extension of not more than seven (7) days duration to the vaccination requirements on a case by case basis, if they determine there are unforeseen or extenuating circumstances outside of the control of the person that makes it difficult for the person to meet the vaccination requirements. It is expected that any such circumstances would be very rare and that any grace period granted is as short as is reasonably possible.

For those who are having difficulty accessing vaccine appointments to meet the timelines set out in the Directive for receiving all required doses, the person and home are encouraged to contact their local public health unit, a nearby healthcare centre, pharmacies in the area, and other homes in the area as these settings should have access to the vaccine including other homes as they may have independent vaccine administration onsite.

15. What if a staff member, support worker, student placement, and/or volunteer objects to being vaccinated against COVID-19 on religious/ conscientious grounds?

The Directive requires all staff, support workers, student placements and volunteers to get vaccinated, unless they have a valid medical exemption, by November 15, 2021, in order to enter the home for the purposes of working, undertaking a placement or volunteering. The Directive does not provide for exemptions on religious or conscientious grounds.

16. What is a valid medical exemption for COVID-19 vaccination?

There are very few medical reasons why a person cannot be vaccinated against COVID-19. As noted in the Ministry of Health's guidance on <u>Medical Exemptions to COVID-19</u> <u>Vaccination</u>, the only valid reasons for medical exemption for mRNA vaccine are:

- a severe allergic reaction or anaphylaxis to a component of a COVID-19 vaccine, or following a COVID-19 vaccine, and that allergy was documented and evaluated by an allergist/immunologist and the allergist/immunologist has determined that the individual is unable to receive any COVID-19 vaccine;
- myocarditis prior to initiating an mRNA COVID-19 vaccine, if between the ages of 12-17 (not likely to apply in a long-term care home setting);
- myocarditis or pericarditis following a mRNA COVID-19 vaccine; or
- serious adverse event following COVID-19 immunization, if relevant specialist has determined the individual is unable to receive any COVID-19 vaccine; or

 actively receiving monoclonal antibody therapy or convalescent plasma therapy for the treatment or prevention of COVID-19 (time-limited exemption).

17. What happens if a staff member, support worker, student placement, and/or volunteer provides a time-limited medical reason for not being vaccinated?

If the staff, support worker, student placement, and/or volunteer is unable to receive their vaccine for a medical reason but that reason is valid for a limited time, the licensee must follow-up with the staff, support worker, student placement, and/or volunteer once that time period has expired and must ensure that, within 30 days of the time-limited medical reason expiring, the individual provides proof of vaccination.

18. How long following a positive COVID-19 test are individuals able to receive a COVID-19 vaccine? Am I exempt from being vaccinated if I have COVID-19?

There is no formal time interval required between a positive COVID-19 test and receiving the COVID-19 vaccine. The Ministry of Health recommends isolating following a positive COVID-19 test and only receiving a COVID-19 vaccine after symptoms have disappeared. As such, a positive COVID-19 test is not considered a valid medical exemption.

19. How are the requirements in the Minister's Directive being enforced?

Requirements set out under the Minister's Directive are subject to monitoring and inspection by the ministry's inspectors, pursuant to the *Long-Term Care Homes Act, 2007*.

20. What type of data are licensees required to report to the ministry regarding their immunization policies?

Every licensee must collect, maintain, and disclose to the Ministry of Long-Term Care, at a minimum, on a monthly basis and in a manner set out by the ministry, the following statistical information:

- the total number of people subject to the long-term care home's policy for the reporting cycle;
- the total number of people who have submitted the proof of vaccination, proof of a medical reason, or proof they completed the educational program;
- for each type of proof above, the number of people who submitted each type of proof who are staff, student placements, or volunteers; and
- the total number of individuals who have been granted an extension of not more than seven (7) days and the reason why.

21. How do homes report the statistical information?

Homes report their data through the Health Data Collection Services (HDCS) platform.

The reporting period for COVID-19 immunization policy data will be on a monthly basis with the first day of the month and the last day of month serving as the first and last date

of the reporting period, respectively. Homes will typically have seven (7) calendar days at the beginning of the month to input their data into HDCS for the previous month. Due to weekends and statutory holidays at the beginning of some months, the form will go live in those months on the first working day.

22. What is an acceptable proof of vaccination?

The enhanced vaccine certificate with a QR code as well as the existing vaccine receipts issued to people at the time of vaccination are considered valid proof of vaccination. The enhanced vaccine certificate is now available for download on the provincial vaccine portal or by calling 1-833-943-3900 to have the enhanced vaccine certificate emailed or mailed. People who received their first or second dose out of province can contact their local public health unit about obtaining proper documentation.

23. How can licensees alert the ministry of staffing pressures they are expected to experience as a result of the mandatory vaccination policy?

Homes should send an email to <u>MLTCpandemicresponse@ontario.ca</u> to communicate to the ministry that a significant staffing shortage is expected to occur within the home as a result of the mandatory vaccination policy.

24. How long will the vaccination requirements remain in effect?

While Ontario has announced plans to gradually remove pandemic public health restrictions, including vaccination requirements for discretionary settings such as restaurants and gyms, the vaccination requirements for individuals working, training or volunteering in long-term care homes will continue for the foreseeable future.

25. Are booster doses of COVID-19 vaccine mandatory under the Minister's Directive?

On November 3, 2021, the government expanded eligibility for a booster dose of COVID-19 vaccine to additional groups, including health care workers, to provide them with additional protection against the Delta variant, as recommended by the National Advisory Committee on Immunization (NACI).

Staff and designated caregivers within long-term care homes have been identified as priority groups and are eligible for a booster dose if at least six months have passed since their last dose. The booster dose is being offered based on evidence of gradual waning immunity six months after receiving the second dose in order to bolster protection against severe illness, hospitalization, and death from COVID-19.

Anyone eligible for a booster dose is strongly encouraged to receive it. However, booster doses of COVID-19 vaccine are not required to be considered "fully vaccinated" and are not required under the Minister's Directive at this time.