

Memorandum to: Medical Officers of Health

From: Dr. Kieran Moore
Chief Medical Officer of Health of Ontario

Dr. Homer Tien
Chair, COVID Vaccine Distribution Task Force

Subject: Last Mile Strategy – School-Based COVID-19 Vaccine Clinics

The Office of the Chief Medical Officer of Ontario would like to thank you for the important role that public health units (PHU) play in keeping students and families safe during the COVID-19 pandemic and for all your hard work and continued efforts in getting youth vaccinated to date. As we move to the last mile of our vaccine rollout, the province's number one priority remains getting as many Ontarians vaccinated as possible. While we are encouraged by the progress made to date, with the rapid spread of the Delta variant and school starting in the Fall, there is a strong need to get youth vaccinated as soon as possible. As of August 16th, 69.8% of youth aged 12-17 have received a first dose of the COVID-19 vaccine and 56.5% have received a second dose.

As announced on August 17, 2021, the Ministry of Education intends to introduce an immunization disclosure policy for all publicly-funded school board employees, and staff in private schools and licensed child care settings for the 2021-22 school year, with rapid antigen testing requirements for staff who are not immunized against COVID-19. This plan aligns with immunization measures already in place in Ontario's long-term care settings, and new requirements announced in health care and congregate care settings.

To support greater uptake for this population and students ages 12 and up, we are encouraging public health units to collaborate with elementary and secondary school boards to make vaccines readily available for all eligible students returning to school in the fall. As such, we are asking PHUs and school boards to jointly plan to host vaccination clinics for first and second doses in schools starting in August and continuing into the fall, engaging with key stakeholders and community organizations while actively and regularly disseminating informational materials to students, families and staff to promote the safety and effectiveness of vaccines.

To assist with community engagement and clinic implementation, school boards and schools are being encouraged to recruit volunteers from their school communities (e.g. parent council members). These efforts will be an important step in instilling vaccine confidence within your local communities.

We recognize that planning for other ISPA vaccinations is also underway but with Delta variant cases surging across Ontario, providing youth access to COVID-19 vaccines remains the top priority. Given that it is still advised that there be a 28-day waiting period before another vaccine, providing COVID-19 vaccines at the earliest opportunity is an important step in providing protection against COVID-19 variants and facilitating vaccination against other diseases.

The following describes a list of operational planning considerations for school-based clinics this Fall:

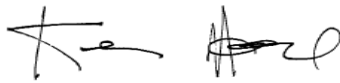
- PHUs and school boards are to work together to ensure school-based clinics are accessible, aligned with what works with their community, and adhere to health and safety guidance in the [COVID-19: Health, Safety and Operational Guidance for Schools \(2021-2022\)](#).
- The clinics should focus on youth, their families, school board employees, and students of local private schools who have not yet received a first or second dose.
- To further support a safe return to school by ensuring more youth can benefit from the protection offered by the vaccine, the province will extend eligibility to the Pfizer vaccine to children born in 2009 or earlier. Starting on August 18th, all children turning 12 years old before the end of 2021 will be eligible for their first dose of COVID-19 vaccine.
- The clinics will focus on COVID-19 vaccinations and not include major school catch up for other ISPA vaccines at this time.
- School-based clinics can operate before, during, or after school hours.
 - Clinics can either be on school property or be off-site in partnership with school boards and operate like any other vaccine clinic – adhering to guidance from the province for proper storage and handling, eligibility, and COVax documentation.
 - School boards and schools are to prioritize use of their facility space for school-based clinics.
- Like all other medical procedures, COVID-19 vaccines are only provided with informed consent. In Ontario, there is no age limit that sets out when people can provide informed consent and make medical decisions on their own. Consent can be provided by anyone who is capable of doing so, including those aged 12 to 17. This means they understand the treatment, why it is being recommended, and the risks and benefits if they accept or refuse to be vaccinated. It is the role of the health provider to determine if their patient can consent to treatment and is a regular and routine process that health providers undertake before performing any medical procedure. If a child or youth is incapable of consenting to receiving the vaccine, they would need consent from their substitute decision-maker, such as their parent or legal guardian. The health care provider, school, and family must respect a young person's decision regarding vaccination. School boards and schools are being asked to disseminate information from PHUs on consent processes to all students, parents, and guardians prior to hosting/participating in a school-based clinic. Parents and guardians should be encouraged to discuss

vaccination with their children prior to attending a clinic. COVID-19 vaccination is voluntary for anyone eligible in Ontario.

- We ask that PHUs use all available communication channels to inform students, their families, and communities of the school-based clinics in their area. Including following the government's news release on August 16 with a local news release outlining your plans for school clinics.

Thank you for your ongoing commitment to the students of Ontario and for your tireless efforts and unwavering commitment to protecting your local communities.

Dr. Kieran Moore



Dr. Homer Tien



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