

Ministry of Health

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Ministère de la Santé

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September 7, 2022

RE: Ontario's Universal Influenza Immunization Program (UIIP) – 2022/2023

Dear Health Care Provider,

Thank you very much for the tremendous work that you have done to support the COVID-19 response, including vaccination, which has been a great success for Ontario. Your continued efforts and support for COVID-19 vaccination is very important as we approach and move into the fall.

With the Ontario Universal Influenza Immunization Program (UIIP) approaching for the 2022/2023 influenza season, the Ministry of Health ("ministry") is providing you with details regarding the upcoming UIIP. Influenza vaccination will be very important this fall with the co-circulation of COVID-19, to protect the health of individuals, families, and communities as well as mitigate impacts on our healthcare system.

The purpose of this letter and the attached Q & A documents is to provide details on the available influenza vaccine products for the 2022/2023 UIIP, as well as information on vaccine supply and distribution processes.

2022/2023 UIIP Vaccine Products

The publicly funded influenza vaccines available for the 2022/2023 UIIP include:

1. Quadrivalent Inactivated Vaccine (QIV) for those ≥ 6 months of age

2. High-Dose Quadrivalent Inactivated Vaccine (QIV-HD) for those ≥65 years only
3. Adjuvanted Trivalent Inactivated Vaccine (TIV-adj) for those ≥65 years only

See attached Qs & As for more product specific information.

Provincial Vaccine Supply and Distribution Process

Each year the ministry receives its supply of influenza vaccine in multiple shipments from the manufacturers starting in mid to late September and continuing into November. For the 2022/2023 UIIP season, the total vaccine quantity ordered to date by the ministry is over 6.1 million doses, which includes 1.85 million doses of two flu vaccines for seniors.

The Ontario Government Pharmaceutical and Medical Supply Service (OGPMSS) begins shipping influenza vaccine doses across the province in late September to local public health units and pharmaceutical distributors for further distribution to premises within their jurisdictions.

Distribution of the influenza vaccines in Ontario is described below:

When	Distribution Initiated To
End of September	Hospitals and Long-term care homes
Early October	Retirement homes and other settings with vulnerable populations
Early-to mid-October	Physicians, pharmacies, and all other providers/organizations

Premises across the province should start receiving influenza vaccine by approximately mid-October.

As the ministry receives only a portion of the provincial supply from manufacturers starting in mid to late September, the ministry distributes smaller quantities in early-to mid-October to ensure equitable distribution across the province and to allow for the provincial supply of vaccine at OGPMSS to replenish. The initial supply of vaccine is prioritized for distribution to hospitals and long-term care homes (LTCHs).

Timing of Immunization

Influenza vaccine doses received should be prioritized for administration as follows:

When immunizations start	Populations
October	Individuals at high-risk of complications or hospitalization due to influenza (see appendix A) and health care providers
November	General population

Seniors, especially those in congregate settings such as long-term care homes and hospitals and retirement homes, should get immunized as soon as influenza vaccine is available for them. The QIV, QIV-HD and TIV-adj ALL protect against influenza, and the most important thing is for older adults to be vaccinated. Do not delay vaccination to wait for a particular product.

Each influenza season, the government endeavours to allocate and distribute vaccine equitably to locations and providers across the province, prioritizing early doses to hospitals and other congregate care settings. Each season there may be unanticipated restrictions on the availability of publicly funded influenza vaccines and/or delays in vaccine delivery (e.g. production delays by manufacturers). Therefore, vaccine deliveries could be impacted. **As a result, the ministry recommends that providers do not book appointments prior to receiving influenza vaccine.**

Providers wishing to conduct large-scale influenza community vaccination clinics should wait until November to ensure that an adequate supply of vaccine can be ordered based on the available provincial supply.

Co-administration

As we move into the fall and prepare for another respiratory season, we ask that you please consider, as appropriate, co-administration of COVID-19 vaccine and flu vaccine whenever possible.

All available influenza vaccines (i.e., QIV-HD, TIV-adj, and QIV) may be given at the same time with other vaccines, or at any time before or after, other vaccines, including COVID-19 vaccine for individuals 5 years of age and older ONLY*. There are no direct studies on the co-administration of Shingrix® with Fluvad® (TIV-adj) or Fluzone® High-

Dose Quadrivalent (QIV-HD). With Fludax[®], it is unknown how the adjuvants may interact when Shingrix[®] is co-administered.

If given by injection at the same time, separate limbs should be used if possible. Alternatively, the injections may be administered into the same muscle separated by at least 2.5 cm (1"). Different immunization equipment (needle and syringe) must be used for each vaccine.

*Co-administration with COVID-19 vaccine is NOT currently recommended for individuals 6 months to under 5 years of age. It is advised to wait 14 days between vaccine products when administering COVID-19 vaccine and other vaccines to prevent mistakenly connecting an adverse event to one particular vaccine or the other.

Influenza Vaccine Ordering

Primary care providers should not expect to receive all doses that were received in the previous season in their first order as the ministry only receives a proportion of the total provincial supply in October.

Your public health unit will communicate additional information regarding the ordering process for your initial shipment. Please be reminded that the number of doses a primary care provider receives in their first order may be adjusted at the discretion of the public health unit and the ministry in accordance with provincial and local vaccine supply.

First vaccine orders are anticipated to be delivered anytime between early to late October. Influenza vaccine should be offered to eligible high-risk individuals as soon as it becomes available at your office.

Once you have received your first vaccine order, you may begin to place reorders beginning the week of October 17 for delivery/pick-up, depending on your public health unit, the week of October 24. Communication regarding your first shipment / order and reorders will be provided by your local public health unit.

Should you have any questions regarding local distribution and ordering, please contact your local public health unit.

For more information about the UIIP, please visit our website at:
www.health.gov.on.ca/en/pro/programs/publichealth/flu/uiip/default.aspx.

Thank you for efforts and support in the delivery of the 2022-2023 UIIP.

Yours truly,

A handwritten signature in black ink, appearing to read 'Kieran Moore', with a stylized flourish at the end.

Kieran Michael Moore, MD, CCFP(EM), FCFP, MPH, DTM&H, FRCPC FCAHS
Chief Medical Officer of Health

Attachments:

Health Care Provider Qs & As: Influenza Immunization Information for the 2022/2023 Influenza Season

Health Care Provider Qs & As: Influenza Immunization Information for Individuals 6 months to 64 years of age

Health Care Provider Qs & As: Influenza Immunization Information for Individuals ≥65 years of age

Appendix A

Per [NACI](#), individuals at high risk of influenza-related complications or who are more likely to require hospitalization include:

- All pregnant individuals
- People who are residents of nursing homes or other chronic care facilities
- People ≥ 65 years of age
- All children 6 months to 4 years of age
- Indigenous peoples
- Adults or children 6 months of age and over with the following chronic health conditions:
 - Cardiac or pulmonary disorders
 - Diabetes mellitus or other metabolic disease
 - Cancer
 - Conditions or medication which compromise the immune system
 - Renal disease
 - Anemia or hemoglobinopathy
 - Neurologic or neurodevelopment conditions
 - Morbid obesity (body mass index of ≥ 40)
 - Children and adolescents (6 months to 18 years) undergoing treatment with acetylsalicylic acid for long periods