

Adult Vaccination in Canada

Cross-Country Report Card 2021

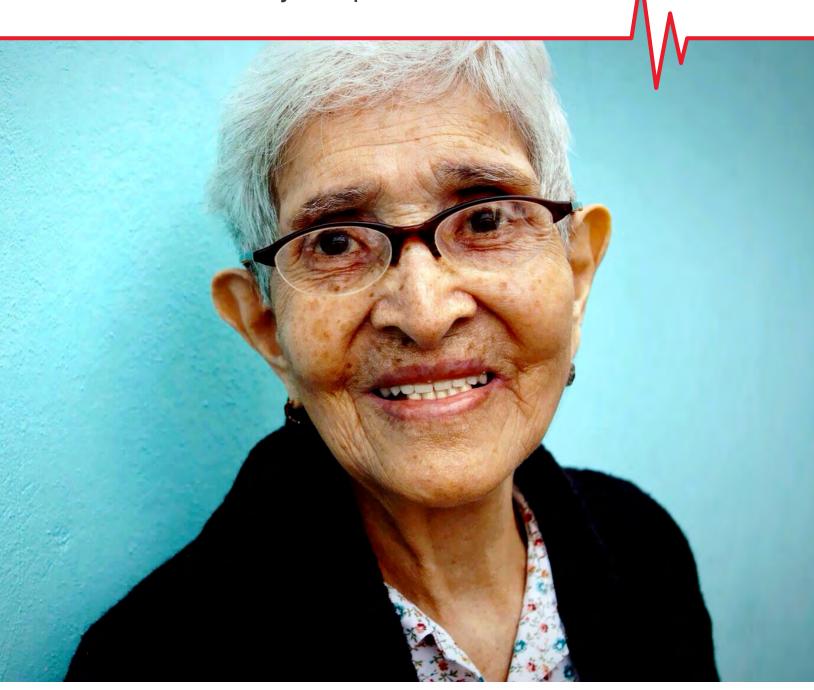




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The truth hurts – Canada's failing grade on vaccine coverage for seniors

Adult vaccinations are a core pillar of any preventive health strategy, drastically relieving the burden on our overburdened acute healthcare system at astonishing cost savings to all levels of government.

Older adults unnecessarily suffer serious health impacts from vaccine preventable diseases such as influenza, pneumonia and shingles. For many seniors, getting the vaccinations they need is quite literally a matter of life and death.

This leads to a stark question: why are only 3% of older Canadians currently protected against vaccine preventable disease?

This report is not about COVID-19, but the impact of the pandemic necessarily shapes our thinking. The pandemic has drawn sharp attention to the importance of our "core vaccines" and how critical it is to stay healthy and well by ensuring vulnerable groups have the best chance of fighting off vaccine preventable disease. This report focuses on the core vaccine preventable diseases: influenza, pneumonia, shingles, tetanus, diphtheria and pertussis. This report lays bare the shockingly poor funding, access and awareness of these core vaccines. Medical experts are sounding an alarm that, while vulnerable seniors await to receive the COVID-19 vaccine, the time to immunize them against influenza, shingles and pneumonia in an effort to stave off a dire "twindemic" situation is now.

With so many lives needlessly lost in long-term care homes since last year, and with these three preventable illnesses finding a strong foothold in congregate care even in the best of times, the truth is clear: when we don't invest in vaccination, older people pay with their lives.

All too often, acquisition of vaccines gets mired in bureaucracy, stuck in a perpetual holding pattern between federal budget approval, provincial purchasing and local distribution. This inefficient use of time and resources makes the rollout of routine vaccination programs clunky, slow and ineffectual. It's no wonder the coverage and accessibility of adult vaccinations across Canada is

inconsistent and effectively invisible to the public eye. CanAge sees this jurisdictional finger-pointing as both a missed opportunity for effective disease prevention and a crucial misstep in effective systems management.

Historically, we have done a great job of promoting the importance of vaccinations in children, with older people left to the wayside. However, history also highlights with painful clarity the consequences of not prioritizing prevention when it comes to the health of our rapidly aging population. According to the most recent available data, 66% of influenza-related deaths are seniors — a number none of us should accept.

CanAge produced this report (the first of its kind in Canada) to arm policymakers with the facts and an unbiased view of the current landscape of adult vaccinations in their jurisdictions — information we hope will be used to make significant investments in the protection of older people across the country.

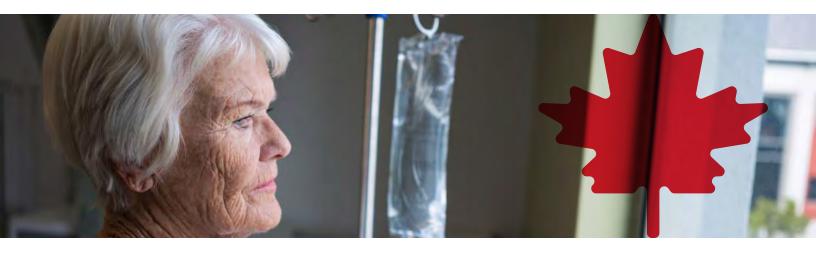
In this time of healthcare crisis brought on by COVID-19, we have a unique opportunity to rethink vaccine approvals, prioritization, budgeting and rollout.

On behalf of Canada's more than 6.8 million seniors we implore you: please take this opportunity to fix this unnecessarily broken system. We know how to make it better.

Our lives depend on it.

Laura Tamblyn Watts

CEO, CanAge



Executive Summary

This report card provides an objective snapshot of how each province and territory in Canada is currently performing in the priority area of adult vaccination. Each jurisdiction was graded using a comprehensive rubric of evaluation criteria, including whether they meet or exceed standards set by NACI (National Advisory Committee on Immunization).

Historically, Canada has done a poor job of collecting information about vaccination rates, and an equally poor job of educating the public about the importance of keeping up to date with adult vaccinations. Vaccination is by far the most effective tool we have in reducing the burden on our healthcare system, keeping vulnerable seniors out of hospitals (where they are at high risk of lasting cognitive and physical decline) and saving countless lives annually in congregate care settings. The COVID-19 pandemic has added a new level of urgency to this already crucial issue.

Unfortunately, this report highlights in indisputable terms the need for every province and territory to make immediate enhancements to the way they procure and deliver vaccines to their older population. There are also glaring gaps in public awareness about the expert-recommended adult vaccine schedule, where to get vaccinated, and the pivotal role vaccines play in the overall health of Canadians.

Highlights

 No province or territory in Canada is effectively vaccinating their older population against influenza, shingles or pneumonia — the "Big 3" vaccine preventable illnesses. As a result, seniors are at risk of severe health outcomes, hospitalization and death.

- Few provinces or territories are effectively educating their population about the importance of staying up to date with the recommended adult vaccine schedule.
- The average grade across provinces and territories is D-.
- The provinces and territories with the highest grade are Ontario and PEI.
- The provinces and territories with the lowest grades are Nunavut, Yukon Territory and Newfoundland and Labrador.
- Information about vaccinations is generally lacking or hard to navigate. Most Seniors' Guides are out of date and/or do not contain useful information about vaccinations.

VOICES of Canada's Seniors: A Roadmap to an Age-Inclusive Canada (CanAge's holistic policy platform) clearly outlines a series of tangible recommendations to address these and other evidence-based priority issues under the category of 'I' for 'Infection Prevention and Disaster Response'.

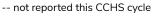
These recommendations can be found on page 15.



Get more information at CanAge.ca/VOICES

Cross Canada Comparison

		VACCINE UPTAKE	IN CANADIANS	65+, BY PROVINCE	AND TERRITORY	ſ	
Provinces and Territories	Pneumonia (#)	Pneumonia (%)	Shingles (#)	Shingles (%)	Influenza (#)	Influenza (%)	Life Expectancy
AB	282,100	53%	181,400	33%	335,800	64%	85.9
ВС	437,900	51%	262,500	30%	535,500	65%	86.4
МВ	104,000	54%	58,300	29%	113,600	61%	85.1
NB	61,600	42%	34,100	23%	88,800	63%	84.8
NL	32,400	32%	18,200	17%	53,300	54%	84.2
NT		%	_E S ^E	%		%	82.7
NS	90,700	49%	50,500	26%	127,500	71%	84.5
NU		%		%		%	80.4
ON	1,131,100	50%	1,115,100	47%	1,493,500	67%	86.1
PE	10,500	38%	7,900	27%	17,900	67%	85.1
QC	757,500	50%	316,600	20%	687,400	46%	85.9
SK	81,700	50%	43,600	26%	96,700	60%	85.4
YT	<u></u>	%		%		%	





Consistent Findings

- 1. While tetanus, diphtheria and pertussis were publicly funded in every jurisdiction, this is an area where our systems fall short, as many older adults are not fully up to date on these vaccines. It's everyone's job (government, public health, health care providers, care settings) to ensure that older populations are educated about the vaccines and are fully up to date.
- 2. No jurisdiction fully covers shingles vaccines for all people 50+ as recommended by NACI. Only Ontario and Yukon cover shingles vaccines at all, and in those cases only for people 65-70.
- 3. There is a great deal of confusing information coupled with cumbersome access for PNEU-C-13, which provides additional coverage for people who are immunocompromised. This is an area of significant improvement for provinces as this vaccine provides an additional layer of protection for those susceptible to invasive pneumococcal disease (IPD).
- 4. The lack of information about accessing one's immunization records across Canada was also deeply underscored in our research. While it was not reflected within this report, it should be well noted for improvement by all provinces and territories.



Methodology

The following rubric was used to calculate letter grades for each province/territory.

Scoring of each provincial/territorial government was broken down into 3 primary functional areas: Funding, Access and Awareness. These categories, as well as their weighting in calculating final grades, are explained in detail below.

Note: This report does not take into account Hepatitis A or Hepatitis B vaccines. However, given their importance to the health of older adults, they will likely be taken into account in future reports about this topic.

Funding (Scoring Weight: 50%)

Each government was evaluated based on its investment in the health and wellness of its older adult populations by ensuring that best-in-class vaccines are publicly funded and distributed as broadly as possible. Beyond the act of funding a given vaccine, this category also acts as a dependency for the availability of the vaccines, as evaluated under Access.

For example, if a province funds an influenza vaccine that's specificallyformulated for seniors, but fails to permit and fund pharmacists to administer the vaccine, they would not earn marks for that vaccine under Access at Pharmacies, in spite of scoring points under Funding.

Uniquely in 2020, the Federal government decided to fund specificallyformulated influenza vaccine to be provided to seniors in long-term care. In order to reflect this, we tracked whether this funding was made available as an ongoing program funded by the province in 2019 as well.

Influenza	Standard influenza vaccines are publicly funded for ALL adults aged 18-64
Influenza	Standard influenza vaccines are publicly funded for ALL adults 65+
Influenza	Vaccines specifically-formulated for seniors are publicly funded by the province/ territory for ALL adults 65+
Influenza	Vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020) by this province/territory
Herpes Zoster	Shingles vaccine (Recombinant Zoster Vaccine, RZV) is publicly funded for ANY adults aged 50+ (any identified cohort)
Herpes Zoster	Shingles vaccine (Recombinant Zoster Vaccine, RZV) is publicly funded for ALL adults aged 50+
Pneumococcal	PPV-23/PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for ALL adults 65+
Pneumococcal	PCV-13/PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for ALL adults 65+
Pneumococcal	PCV-13/PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. Points were awarded as follows: 0 if no coverage, 1 point if the province/territory covered only a partial list of NACI's immunocompromised conditions, and 2 points if the province/territory covered the full list of NACI's immunocompromised conditions.
Tetanus	Tdap Vaccine is publicly funded and should be received every 10 years. NOTE: In the past, tetanus was administered as a standalone vaccine but is now included as a part of Td booster.
Diphtheria	Tdap Vaccine is publicly funded and should be received every 10 years NOTE: In the past, diphtheria was administered as a standalone vaccine but is now included as a part of Td booster.
Pertussis	Tdap (Whooping Cough) Vaccine is publicly funded and should be received as an adult booster once in life over the age of 18. NOTE: In the past, pertussis was administered as a standalone vaccine but is now included as a part of Td booster Tdap.

About NACI

The National Advisory Committee on Immunization (NACI) is a national advisory committee of experts in the fields of pediatrics, infectious diseases, immunology, pharmacy, nursing, epidemiology, pharmacoeconomics, social science and public health. NACI makes recommendations for the use of vaccines currently or newly approved for use in humans in Canada, including the identification of groups at risk for vaccine-preventable diseases for whom vaccination should be targeted.

Access (Score Weight: 30%)

Each government was evaluated based on its commitment to the health and wellness of its older adult populations by ensuring that vaccine availability and accessibility was as broad and consumer-friendly as possible. The six points of access used to score this category are:

- Long-term care settings where LTC staff (or an authorized agent) can administer the vaccine to residents on site within this care setting, free of charge to the recipient.
- Congregate care settings (personal care homes, nursing homes, retirement homes, assisted living, etc.) – where on site staff (or an authorized agent) can administer the vaccine to residents within this setting, free of charge to the recipient.
- Directly to seniors aging in place with community/ home care health supports – where home care staff (or an authorized agent) can administer the vaccine to residents in their homes, free of charge to the recipient.
- Public health offices without a prescription free of charge to the recipient.
- Doctors' offices in office without having to visit a public health location or a pharmacy free of charge to the recipient.
- Pharmacies without a prescription from another health care provider, and administered on site, free of charge to the recipient.

For standard dose influenza, only three points of access were evaluated for the adult population (18+) as the coverage provided by standard dose influenza vaccines is insufficient for seniors.

Points were awarded for each access point where the province or territory had a documented policy or evidence that an effort was made to make available a vaccine to seniors via that location. Worth noting: given the well-documented evidence that seniors lose their immunity over time, and may be subject to other factors that can limit their mobility, any practice that required two interactions to obtain a vaccine were not awarded points.

For example, if a doctor can write the prescription for a vaccine, but cannot administer it in office/on site, no points were awarded. If a pharmacist can administer the vaccine in a pharmacy, but not without a doctor's prescription, no points were awarded.

To qualify for a point, there must be 1) a policy/directive/ written guidance by government, 2) a vaccine is actually administered at the setting specified and 3) no additional cost is borne by the recipient.

ACCESS - AVAILABILITY - 27 POINTS TOTAL

INFLUENZA: A policy or directive from the province/territory exists that directs its public health programs to provide and administer **standard dose influenza vaccines**:

At Public health sites – without a prescription

At Doctors' offices - without having to pick up the vaccine in pharmacy

At Pharmacies - without a prescription from a physician or other health care provider $% \left(1\right) =\left(1\right) \left(1\right) \left($

INFLUENZA: A policy or directive from the province/territory exist that directs its public health programs to provide and administer **influenza vaccines that are specifically-formulated for seniors** in any of 6 possible settings.

HERPES ZOSTER: A policy or directive from the province/territory exists that directs its public health programs to provide and administer best-in-class shingles vaccines (Recombinant zoster vaccine, RZV) in any of 6 possible settings.

PNEUMOCOCCAL: A policy or directive from the province/territory exists that directs its public health programs to provide and administer PNEU-P-23 (Pneumococcal polysaccharide 23-valent) in any of 6 possible settings.

PNEUMOCOCCAL: A policy or directive from the province/territory exists that directs its public health programs to provide and administer PNEU-C-13 (Pneumococcal conjugate 13-valent) to people who are immunocompromised in any of 6 possible settings.

PNEUMOCOCCAL *BONUS point: A policy or directive from the province/territory exists that directs its public health programs to provide and administer PNEU-C-13 (Pneumococcal conjugate 13-valent) in any of 6 possible settings.

Awareness (Score Weight: 20%)

Each government was evaluated based on efforts made to educate its older populations on vaccinations and provincial/territorial immunization programs.

In each case, the source was recorded for where the information was found. Where a source was not available, other sources to verify the information were utilized including direct phone calls to public health offices and to provincial/territorial health ministries.

Searches were conducted by individuals who had above average internet search ability, and who had at least one university degree.

For all categories under Funding, Access or Awareness, where information online was unclear and was not able to be successfully validated by another means, no points were awarded and the province/territory was recorded as "inconclusive" for that metric.

Letter grades where assigned for each category, as well as for the province/territory as a whole, based on the following percentage brackets:

Letter	Percent	Letter	Percent	Letter	Percent
A+	90%-100%	B-	70%-72%	D	53-57%
Α	85%-89%	C+	68%-69%	D-	50-52%
A-	80%-84%	С	63%-67%	F	0%-49%
B+	78%-79%	C-	60%-62%		
В	73%-77%	D+	58%-59%		A

Alberta

LEADERSHIPUnited Conservative Party (Majority)PREMIERJason Kenney (UCP)MINISTER OF HEALTHTyler Shandro (UCP)Not dedicated
Consolidated with Housing portfolio, Minister of Seniors and Housing: Josephine PonCHIEF PUBLIC HEALTH OFFICERDr. Deena Hinshaw

OVERVIEW SUMMARY

Alberta is lagging behind other provinces in protecting its older population from vaccine preventable illnesses — especially in influenza vaccinations. Flu vaccines specifically-formulated for seniors are only provided to provincially funded long-term care beds, leaving other settings vulnerable. Alberta has simply not kept pace with NACI recommendations and in doing so is failing to protect its seniors from several vaccine-preventable illnesses.

FUNDING

C-

KEY FINDINGS

- 1. No clear ongoing commitment to fund flu vaccines specifically-formulated for seniors for the 2021-2022 flu season.
- 2. Only covers standard flu vaccines. Does not fund flu vaccines that are specifically-formulated for seniors.
- 3. Shingles vaccine is not funded.

ACCESS

F

KEY FINDINGS

- Access for flu shots appears to be targeted and limited as opposed to providing the broadest coverage possible to encourage herd-immunity, especially for vulnerable Albertans in long-term and congregate care settings.
- 2. While access and distribution seem good for other publicly funded vaccines, the lack of funding for critical vaccine programs for seniors resulted in a negative impact on the overall score with points lost in both the Funding and Access categories.
- Access for PNEU-C-13 for people who are immunocompromised is unclear as to how to qualify and where to get the vaccine.

AWARENESS



KEY FINDINGS

- 1. Vaccine information is inconsistent between government health sites.
- 2. Fails to provide a list of all NACI-recommended vaccines, nor does the information provided specifically call out the recommended vaccines for seniors.
- 3. Immunization information is missing from the Seniors' Guide.

OVERALL GRADE



Population of Adults 60+

% of Total Population

875,313

19.80%

AVOIDABLE DEATHS



Alberta is worse than the national average with 210

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



Alberta is **below the national average** with 83.7%

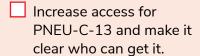
National average is 84.9%

Your Healthcare System – Regular Access to an HCP. CIHI

L	Publicly fund flu vaccines
	that are specifically-
	formulated for seniors,
	and provide for ALL
	seniors

Ш	Publicly fund the best-in-
	class shingles vaccine for
	adults (ideally 50+).

ш	Review and update the
	Seniors' Guide annually
	and ensure online
	information is consisten





INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly for adults aged 18–64	unded for all
Standard influenza vaccines are publicly for adults 65+	unded for all
Influenza vaccines specifically-formulated publicly funded by the province/territory for	
Influenza vaccines specifically-formulated funded in LTC in the previous calendar year	
ACCESS	
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Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/terripublic health programs to provide and adm that are specifically-formulated for senior	inister influenza vaccines
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community h	ealth supports
Public health sites	
Doctors' offices	
Pharmacies	
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	YES	<u> </u>	NCONCLUSIVE	NO
HERPES ZOSTER	(SHINGLES)	• Two do	ses • One-time,	age 50+
FUNDING				
Shingles vaccine (is publicly funded			•	
Shingles vaccine (•
ACCESS				
A policy or directivits public health pr shingles vaccines	ograms to pro	ovide and	administer best-	
Long-term care (L	ΓC)			
Congregate care s	ettings			
Aging in place / at	home with co	mmunity	health supports	
Public health sites				
Doctors' offices				
Pharmacies				
AWARENESS • Ti	· · · · ·	• Patient	Education Initiat	ives
Digital Communic			II NI A CI	
Information is avai recommended adu		irly outlin	es all NACI	•
Information specifically for sen	,	s vaccina	tion information	•
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Information is four vaccination	nd regarding a	innual/se	asonal influenza	
Information is four	nd regarding s	hingles v	accination	•
Information is four				<u> </u>
Information about	vaccine cover	age is fou	und and is clear to	
A telephone numb		is provid	ed to reach local	•
Instructions are prorecords		essing pe	ersonal vaccination	on •
Information is avai	lable in both E	English ar	nd French	
Communication E	fforts to Seni	ors		
A Seniors' Guide is	s available			
The Seniors' Guide	e is up to date	(2020)		
The Seniors' Guide including printed o	is made avai	lable in a	variety of format	
The Seniors' Guide the provision of va	provides up	to date in		•



British Columbia

PREMIER

John Horgan (NDP)

MINISTER OF HEALTH

Adrian Dix (NDP)

None - Other

Parliamentary Secretary for Seniors' Services and Long-Term Care: Mable Elmore

The Office of the Seniors Advocate: Isobel Mackenzie – Monitors and analyzes seniors services and issues in BC, and makes recommendations to government and service providers to address systemic issues.

CHIEF PUBLIC HEALTH OFFICER Dr. Bonnie Henry

OVERVIEW SUMMARY

With the 3rd highest population of seniors in Canada, the province's track record on immunization is egregious — even the baseline of vaccine coverage is lacking. With half of British Columbians living in the Metro Vancouver area, a densely populated environment that promotes community spread of infectious diseases, it's time for the west coast to step up to the plate in protecting its older population.

FUNDING



KEY FINDINGS

- Fails to fund comprehensive standard flu programs and does not fund specificallyformulated vaccines for seniors.
- 2. No clear ongoing commitment to fund flu vaccines specifically-formulated for seniors for the 2021-2022 flu season.
- 3. Shingles vaccine is not funded.

ACCESS



KEY FINDINGS

- 1. While access and distribution seem good for other publicly funded vaccines, the lack of funding for critical vaccine programs for seniors resulted in a negative impact on the overall score with points lost in both the Funding and Access categories.
- 2. Access for PNEU-C-13 for people who are immunocompromised is unclear as to how to qualify and where to get the vaccine.
- 3. Bringing vaccinations to those aging in place and receiving community health supports is a missed opportunity.

AWARENESS



KEY FINDINGS

- 1. Information is both clear and comprehensive.
- 2. Noticeable disconnect between strong information about vaccines, and the severe lack of coverage.
- 3. Seniors' Guide is out of date (not updated in 2020, or beyond).

OVERALL GRADE



Population of Adults 60+

% of Total Population

1,347,086

26.17%

AVOIDABLE DEATHS



British Columbia is **better than the national average** with 179

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



British Columbia is **below the national average** with 82.0%

National average is 84.9%

Your Healthcare System – Regular Access to an HCP. CIHI

L	┙	Publicly fund flu vaccines
		that are specifically-
		formulated for seniors,
		and provide for ALL
		seniors.

Publicly fund the best-in-
class shingles vaccine for
adults (ideally 50±)

Review and update the
Seniors' Guide annually

L	Increase access for
	PNEU-C-13 and make it
	clear who can get it.



ocorecard	
INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	
Standard influenza vaccines are publicly funded for all adults 65+	•
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	
ACCESS	
A policy or directive from the province/territory exists that directits public health programs to provide and administer standard cinfluenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that direct public health programs to provide and administer influenza vac that are specifically-formulated for seniors:	
Long-term care (LTC)	
Congregate care settings	0
Aging in place / at home with community health supports	
Public health sites	
Doctors' offices	
Pharmacies	
PNEUMOCOCCAL • Doses vary • One-time, age 65+	
FUNDING	
	•
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent)	Partial list
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent)	
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised.	list ts
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•	YES	INCONCLUSIVE	NO
HERPES ZOSTER (SHI	INGLES) • To	wo doses • One-time, age	e 50+
Shingles vaccine (Reco	ombinant Zo	ster Vaccine, RZV)	
is publicly funded for A			
Shingles vaccine (Reco			
ACCESS			
	ms to provid	ce/territory exists that dir e and administer best-in- oster vaccine, RZV):	
Long-term care (LTC)			
Congregate care setting	gs		
Aging in place / at hom	e with comm	nunity health supports	
Public health sites			
Doctors' offices			
Pharmacies			
AWARENESS • Transp	parency • Pa	tient Education Initiative	s
Digital Communication	efforts		
Information is available recommended adult va	•	outlines all NACI	•
Information specifically specifically for seniors	identifies va	ccination information	•
Government provided in easily found using the significant prices of the significant provided information is found information is found information is found information was not 10 minutes = 0 pts"	in under 3 m in 3-5 mins in 5-7 mins in 7 minutes	: "Vaccines for Seniors nins = 4 pts = 3 pts = 2 pts	4 pts
Information is found requality	garding annı	ıal/seasonal influenza	
Information is found reg	garding shin	gles vaccination	
Information is found reg	garding pne u	ımococcal vaccination	
Information about vacci the reader which vaccir	_	is found and is clear to ed and which are not	•
A telephone number or public health authorities	•	rovided to reach local	
Instructions are provide records	ed for access	ing personal vaccination	
Information is available	in both Engl	ish and French	
Communication Efforts	s to Seniors		
A Seniors' Guide is ava	ilable		
The Seniors' Guide is u	p to date (20	20)	
The Seniors' Guide is mincluding printed copies		e in a variety of formats, est	•
The Seniors' Guide provision of vaccina			

Manitoba

LEADERSHIPProgressive Conservative (Majority)PREMIERBrian Pallister (PC)MINISTER OF HEALTHHeather Stefanson (PC), Minister of Health and Seniors CareMINISTER OF SENIORSNot dedicated
Consolidated with Health portfolio: Heather StefansonCHIEF PUBLIC HEALTH OFFICERDr. Brent Roussin

OVERVIEW SUMMARY

Manitoba was the first province to fund specifically-formulated vaccines for seniors in long-term care, but has not made the move to expand coverage for all Manitobans 65+ as yet. However, this year, the province expanded coverage to vulnerable populations, including people who are incarcerated or living in remote areas, showing a commitment to health care inclusion. Unfortunately, this forward-thinking doesn't translate across all scoring criteria — critical gaps persist in funding and access, dragging down the overall score.

FUNDING



KEY FINDINGS

- 1. Has funded specifically-formulated influenza vaccines for residents of long-term care in previous flu season (prior to 2020-2021).
- 2. Only covers standard flu vaccines. Does not fund flu vaccines that are specifically-formulated for seniors.
- 3. Shingles vaccine is not funded.

ACCESS



KEY FINDINGS

- 1. Good expansion of access for the 2020-2021 flu season.
- 2. Bringing vaccinations to those aging in place and receiving community health supports is a missed opportunity.
- 3. Access for PNEU-C-13 for people who are immunocompromised is extremely limited.

AWARENESS



KEY FINDINGS

- 1. Fails to provide a list of all NACI-recommended vaccines, nor does the information provided specifically call out the recommended vaccines for seniors.
- 2. It is unclear which vaccines are publicly funded for seniors.
- 3. Information about vaccines is clear, but how and where to get vaccines is missing or confusing.

OVERALL GRADE



Population of Adults 60+

% of Total Population

304,829

22.10%

AVOIDABLE DEATHS



Manitoba is worse than the national average with 230

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR

Manitoba is about the same as the national average with 83.9%

National average is 84.9%

Your Healthcare System – Regular Access to an HCP, CIHI

- Publicly fund flu vaccines that are specifically-formulated for seniors, and provide for ALL seniors.
- Publicly fund the best-inclass shingles vaccine for adults (ideally 50+).
- Review and update the Seniors' Guide annually.
- Increase access for PNEU-C-13 and make it clear who can get it.

INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	
Standard influenza vaccines are publicly funded for all adults 65+	
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	
ACCESS	
A policy or directive from the province/territory exists that directive public health programs to provide and administer standard influenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that dire public health programs to provide and administer influenza vethat are specifically-formulated for seniors:	
Long-term care (LTC)	
Congregate care settings	_
Congregate care settings Aging in place / at home with community health supports	
	•
Aging in place / at home with community health supports	•
Aging in place / at home with community health supports Public health sites	•
Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+	•
Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING	•
Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+	
Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent)	Partial
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Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-C-(Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC)	list ects -23
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	YES	INCONCLUSIVE	NO
HERPES ZOSTER	R (SHINGLES)	• Two doses • One-time, age	50+
Shingles vaccine	•	t Zoster Vaccine, RZV)	
	(Recombinant	t Zoster Vaccine, RZV)	
is publicly funded	for ALL adults	s aged 50+.	
its public health p	rograms to pro	ovince/territory exists that dire ovide and administer best-in-c nt zoster vaccine, RZV):	
Long-term care (L	.TC)		
Congregate care s	settings		•
Aging in place / at	t home with co	ommunity health supports	
Public health sites	5		
Doctors' offices			
Pharmacies			
AWARENESS • T	ransparency •	Patient Education Initiatives	;
Digital Communic			
Information is ava recommended add		arly outlines all NACI	
Information specifically for ser		s vaccination information	
easily found using Manitoba" Information is fo Information is fo Information is fo Information is fo	ound in under ound in 3-5 m ound in 5-7 m ound in 7 minu s not found or	ins = 3 pts	4 pts
Information is four vaccination	nd regarding a	nnual/seasonal influenza	•
Information is four	nd regarding s	hingles vaccination	
Information is four	nd regarding p	oneumococcal vaccination	
		age is found and is clear to	
		unded and which are not	
public health auth	orities	is provided to reach local	
Instructions are pr records	rovided for acc	cessing personal vaccination	•
Information is ava	ilable in both E	English and French	
Communication E	fforts to Seni	ors	
A Seniors' Guide i	s available		
The Seniors' Guid	e is up to date	(2020)	
The Seniors' Guide including printed of		lable in a variety of formats, equest	
		to date information about	

the provision of vaccinations in the province/territory

New Brunswick

LEADERSHIPProgressive Conservative (Minority)PREMIERBlaine Higgs (PC)MINISTER OF HEALTHDorothy Shephard (PC)

MINISTER OF SENIORS None

CHIEF PUBLIC HEALTH OFFICER Dr. Jennifer Russell

OVERVIEW SUMMARY

New Brunswick is one of the "oldest" provinces in Canada, with nearly 30% of residents over age 60. Unfortunately, that makes its failing grade on vaccinations all the more alarming. Thousands of seniors go unprotected every year due to lack of best-in-class vaccine funding and access, adding up to a serious health care problem (especially during a pandemic). It also fails in its efforts to communicate critical vaccination information to its older adult populations. Until New Brunswick prioritizes immunization, older New Brunswickers will continue to unfairly pay the price.

FUNDING

D

KEY FINDINGS

- No clear ongoing commitment to fund flu vaccines specifically-formulated for seniors for the 2021-2022 flu season.
- Only covers standard flu vaccines. Does not fund flu vaccines that are specificallyformulated for seniors.
- 3. Shingles vaccine is not funded.

ACCESS

F

KEY FINDINGS

- While access and distribution seem good for other publicly funded vaccines, the lack
 of funding for critical vaccine programs for seniors resulted in a negative impact on
 the overall score with points lost in both the Funding and Access categories.
- 2. Access for PNEU-C-13 for people who are immunocompromised is unclear as to how to qualify and where to get the vaccine.
- 3. Bringing vaccinations to those aging in place and receiving community health supports is a missed opportunity.

AWARENESS

F

KEY FINDINGS

- 1. Information about vaccines is difficult to find and incomplete.
- 2. Adult and/or senior vaccination schedule(s) noticeably missing.
- 3. There is no information about the shingles vaccine.

OVERALL GRADE



Population of Adults 60+

% of Total Population

232,776

29.79%

AVOIDABLE DEATHS



New Brunswick is worse than the national average with 213

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



New Brunswick is **above the national average** with 91.9%

National average is 84.9%

Your Healthcare System – Regular Access to an HCP, CIHI

L	Publicly fund flu vaccines
	that are specifically-
	formulated for seniors,
	and provide for ALL
	seniors

	Publicly fund the best-in-
	class shingles vaccine for
	adults (ideally 50+).

	Increase access for
	PNEU-C-13 and make it
	clear who can get it

L	Make the website easier
	to navigate and include a
	dedicated seniors section

3corccara	
INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	
Standard influenza vaccines are publicly funded for all adults 65+	
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	•
ACCESS	
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Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that directive health programs to provide and administer influenza valuated to the specifically-formulated for seniors:	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	
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Public health sites Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive provide and administer PNEU-P (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directits public health programs to provide and administer PNEU-C-: (Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC) Congregate care settings	list
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	YES		INCONCLUSIVE	N
HERPES ZOSTER (S	SHINGLES)	• Two	doses • One-time,	age 50+
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is publicly funded fo Shingles vaccine (R				
is publicly funded fo				
ACCESS				
A policy or directive its public health prog shingles vaccines (F	grams to pro	vide aı	nd administer best	
Long-term care (LTC	:)			
Congregate care set	tings			
Aging in place / at h	ome with co	mmun	ty health supports	
Public health sites				
Doctors' offices				
Pharmacies				
AWARENESS • Trai	· · ·	Patier	nt Education Initia	tives
Digital Communicat				
Information is availa recommended adult		rly outl	ines all NACI	•
Information specifical specifically for senio	•	vaccir	nation information	•
Government provide easily found using the New Brunswick" Information is fou Information is fou Information is fou Information is fou Information was reasonable 10 minutes = 0 pt	ne search ter nd in under 3 nd in 3-5 mi nd in 5-7 mi nd in 7 minu not found on	rms: "V 3 mins ins = 3 ins = 2 ites or	accines for Seniors = 4 pts pts pts more = 1 pt	
Information is found	regarding a ı	nnual/s	seasonal influenza	1
vaccination	rogardina -L	hingle	vaccination	
Information is found				
Information is found Information about va	<u> </u>			
the reader which vac	ccines are fu	nded a	nd which are not	
A telephone number public health authori		is prov	ided to reach local	•
Instructions are prov records	ided for acce	essing	personal vaccinati	on
Information is availa	ble in both E	nglish	and French	
Communication Effe	orts to Senio	ors		
A Seniors' Guide is a	vailable			
The Seniors' Guide is	s up to date	(2020)		
The Seniors' Guide is including printed cop			a variety of forma	ts,
The Seniors' Guide per the provision of vacc				

Newfoundland and Labrador

Liberal (Minority)
*An election is in process

PREMIER Andrew Furey (L)

MINISTER OF HEALTH Dr. John Haggie (L), Minister of Health and Community Services

Not dedicated
Consolidated with Children, Social Development, Housing and Persons with Disabilities portfolios: Brian Warr

Population of Adults 60+ % of Total Population

158,567

30.37%

OVERVIEW SUMMARY

Newfoundland and Labrador is the largest geographically of the Atlantic provinces and has a larger-than-average senior population. With health resources sparsely available in rural and remote areas, ensuring its seniors' population is appropriately vaccinated should be a key health priority for this province. However, funding for the necessary vaccines remains woefully inadequate and life expectancy in this province is the lowest among the provinces. Like New Brunswick, Newfoundland and Labrador also scored an F on its efforts to inform seniors about how to access publicly funded vaccines.

FUNDING



CHIEF PUBLIC HEALTH OFFICER Dr. Janice Fitzgerald

KEY FINDINGS

- 1. Has funded specifically-formulated influenza vaccines for residents of long-term care in previous flu season (prior to 2020-2021).
- 2. Only funds PNEU-C-13 for a partial list of immunocompromised conditions as provided by NACI.
- 3. Shingles vaccine is not funded.

ACCESS



KEY FINDINGS

- While access and distribution seem good for other publicly funded vaccines, the lack
 of funding for critical vaccine programs for seniors resulted in a negative impact on
 the overall score with points lost in both the Funding and Access categories.
- 2. Bringing vaccinations to those aging in place and receiving community health supports is a missed opportunity.
- 3. Access for PNEU-C-13 for people who are immunocompromised is unclear as to how to qualify and where to get the vaccine.

AWARENESS



KEY FINDINGS

- 1. Information about vaccines is difficult to find and incomplete.
- 2. Adult and/or senior vaccination schedule(s) noticeably missing
- 3. There is no information about the shingles vaccine.

AVOIDABLE DEATHS

OVERALL GRADE



Newfoundland and Labrador is worse than the national average with 230

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



Newfoundland and Labrador is **above the national average** with 87.0%

National average is 84.9%

Your Healthcare System – Regular Access to an HCP, CIHI

- Publicly fund flu vaccines that are specifically-formulated for seniors, and provide for ALL seniors.
- Empower pharmacies to administer all publicly funded vaccines.
- Make the website easier to navigate and include a dedicated seniors section.



Scorecard	
INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	
Standard influenza vaccines are publicly funded for all adults 65+	
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	
ACCESS	
A policy or directive from the province/territory exists that directs its public health programs to provide and administer standard dose influenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that directs its public health programs to provide and administer influenza vaccines that are specifically-formulated for seniors :	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	
Public health sites	
Doctors' offices	
Pharmacies	
DNEIMOCOCCAL - Danas varia - Octability and CE	
PNEUMOCOCCAL • Doses vary • One-time, age 65+	
FUNDING PNEUMOCOCCAL • Doses vary • One-time, age 65+	
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FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) Part	
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	YES	INCONCLUSIVE	NO
HERPES ZOSTEI	R (SHINGLES)	• Two doses • One-time, ag	e 50+
	•	: Zoster Vaccine, RZV) s aged 50+.	•
Shingles vaccine is publicly funded	•	Zoster Vaccine, RZV) aged 50+.	•
ACCESS			
its public health p	orograms to pro	ovince/territory exists that di ovide and administer best-in- t zoster vaccine, RZV):	
Long-term care (LTC)		
Congregate care	settings		
Aging in place / a		mmunity health supports	
Doctors' offices			
Pharmacies			
AWARENESS •	Transparency •	Patient Education Initiative	es
Digital Communi	ication Efforts		
Information is ava		rly outlines all NACI	
Information speci specifically for se		s vaccination information	
easily found using Newfoundland at Information is Information is Information is Information is	g the search teind Labrador" found in under found in 3-5 mi found in 5-7 mi found in 7 minuas not found on	ins = 3 pts	0 pts
	•	nnual/seasonal influenza	•
	und regarding s	hingles vaccination	
		neumococcal vaccination	
Information abou	ıt vaccine cover	age is found and is clear to	•
	ber or website	is provided to reach local	•
		essing personal vaccination	•
Information is ava	ailable in both E	English and French	
Communication	Efforts to Seni	ors	
A Seniors' Guide	is available		
The Seniors' Guid	de is up to date	(2020)	
The Seniors' Guid including printed		lable in a variety of formats, quest	•
TI C : 1C :	da a sa sa sa dala a da	ta alaka indama stisis stess (

The Seniors' Guide provides up to date information about the provision of vaccinations in the province/territory

Northwest Territories

LEADERSHIP Independent (Consensus Government)

PREMIER Caroline Cochrane

MINISTER OF HEALTH Julie Green, Minister of Health and Social Services

Not dedicated

Consolidated with Health and Social Services and Persons with Disabilities portfolios: Julie Green

CHIEF PURI IC HEALTH OFFICER Dr. Kami Kandala

CHIEF PUBLIC HEALTH OFFICER Dr. Kami Kandola

OVERVIEW SUMMARY

Disease outbreaks in the Northwest Territories have had horrific effects. In 1928, an influenza outbreak killed an estimated 15% of the Indigenous population, marking an epic tragedy. Yet, nearly 100 years later, the Territories still are very vulnerable to vaccine preventable diseases and at risk for a repeat of this disaster. Given the remote nature of the region, and the fact that only an estimated 37% of the population has a family doctor, more work must be done to bring vaccines to those who need them most.

FUNDING



KEY FINDINGS

- 1. Has funded specifically-formulated influenza vaccines for residents of long-term care in previous flu season (prior to 2020-2021).
- 2. Only covers standard flu vaccines. Does not fund flu vaccines that are specifically-formulated for seniors.
- 3. Funds PNEU-C-13 for the full list of immunocompromised conditions as provided by NACI..

ACCESS



KEY FINDINGS

- 1. Access for PNEU-C-13 for people who are immunocompromised is unclear as to how to qualify and where to get the vaccine.
- 2. Pharmacies are not permitted to administer vaccines.
- NWT's Medical Travel Program helps people to get financial supports to access medical services.

AWARENESS



KEY FINDINGS

- 1. Information about vaccines is clear, but how and where to get vaccines is missing or confusing.
- 2. Adult and/or senior vaccination schedule(s) noticeably missing.
- 3. Seniors' Guide is available in 11 languages.

OVERALL GRADE



Population of Adults 60+

% of Total Population

6,594

14.60%

AVOIDABLE DEATHS



Northwest Territories is worse than the national average with 270

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



Northwest Territories is **below the national average** with 37.3%

National average is 84.9%

Your Healthcare System – Regular Access to an HCP. CIHI

- Publicly fund flu vaccines that are specifically-formulated for seniors, and provide for ALL seniors.
- Publicly fund the best-inclass shingles vaccine for adults (ideally 50+).
- Expand access points and improve transparency of information overall.

Scorecard	
INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	
Standard influenza vaccines are publicly funded for all adults 65+	•
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	
ACCESS	
A policy or directive from the province/territory exists that directive public health programs to provide and administer standard influenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that dire public health programs to provide and administer influenza vathat are specifically-formulated for seniors :	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	
Public health sites	
Doctors' offices	
Pharmacies	•
Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+	
PNEUMOCOCCAL • Doses vary • One-time, age 65+	
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent)	Full list
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent)	Full list
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised.	ects
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PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dire its public health programs to provide and administer PNEU-P- (Pneumococcal polysaccharide 23-valent):	ects
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YES INCONCLUSIVE • N	10
HERPES ZOSTER (SHINGLES) ● Two doses ● One-time, age 50+ FUNDING	
Shingles vaccine (Recombinant Zoster Vaccine, RZV)	
is publicly funded for ANY adults aged 50+.	
Shingles vaccine (Recombinant Zoster Vaccine, RZV) is publicly funded for ALL adults aged 50+.	
ACCESS	
A policy or directive from the province/territory exists that directs its public health programs to provide and administer best-in-class shingles vaccines (Recombinant zoster vaccine, RZV):	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	
Public health sites	
Doctors' offices	
Pharmacies	
AWARENESS • Transparency • Patient Education Initiatives	
Digital Communication Efforts	
Information is available that clearly outlines all NACI recommended adult vaccines	
Information specifically identifies vaccination information specifically for seniors	
Government provided information about immunizations is easily found using the search terms: "Vaccines for Seniors Northwest Territories" Information is found in under 3 mins = 4 pts Information is found in 3-5 mins = 3 pts Information is found in 5-7 mins = 2 pts Information is found in 7 minutes or more = 1 pt Information was not found on the website in less than 10 minutes = 0 pts"	
Information is found regarding annual/seasonal influenza vaccination	
Information is found regarding shingles vaccination	
Information is found regarding pneumococcal vaccination	
Information about vaccine coverage is found and is clear to the reader which vaccines are funded and which are not	
A telephone number or website is provided to reach local public health authorities	
Instructions are provided for accessing personal vaccination records	
Information is available in both English and French	
Communication Efforts to Seniors	
A Seniors' Guide is available	
The Seniors' Guide is up to date (2020)	
The Seniors' Guide is made available in a variety of formats, including printed copies upon request	
The Seniors' Guide provides up to date information about the provision of vaccinations in the province/territory	

Nova Scotia

LEADERSHIP

Liberal (Majority)

PREMIER

lain Rankin (L), Premier-Elect

MINISTER OF HEALTH

Leo Glavine (L), Minister of Health and Wellness

Not dedicated

Consolidated with Health and Wellness: Leo Glavine

CHIEF PUBLIC HEALTH OFFICER

Dr. Robert Strang

OVERVIEW SUMMARY

One in three Nova Scotians are seniors, yet vaccine coverage and access are extremely limited. The province also has a track record of serious staffing shortages in its hospitals, forcing closures that put lives at risk. How can it continue to put off prioritizing immunization, if it truly wants to protect its older population?

FUNDING

C-

KEY FINDINGS

- 1. Only covers standard flu vaccines. Does not fund flu vaccines that are specifically-formulated for seniors.
- 2. Shingles vaccine is not funded.
- 3. Has funded specifically-formulated influenza vaccines for residents of long-term care in previous flu season (prior to 2020-2021).

ACCESS

F

KEY FINDINGS

- 1. While access and distribution seem good for other publicly funded vaccines, the lack of funding for critical vaccine programs for seniors resulted in a negative impact on the overall score with points lost in both the Funding and Access categories.
- 2. Pharmacies currently cannot administer publicly funded PNEU-P-23 without charge.
- 3. Bringing vaccinations to those aging in place and receiving community health supports is a missed opportunity.

AWARENESS



KEY FINDINGS

- 1. Information about vaccines is difficult to find and incomplete.
- 2. Shingles vaccine information is missing from the vaccine schedule and information found on shingles in other parts of the website states that the recommended age is 60+ (should be 50+).
- 3. Does not provide a list of all NACI-recommended vaccines, nor does it specifically call out recommended vaccines for seniors.

OVERALL GRADE



Population of Adults 60+

% of Total Population

284,766

29.08%

AVOIDABLE DEATHS



Nova Scotia is worse than the national average with 225

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR

Nova Scotia is same as the national average with 86.2%

National average is 84.99

Your Healthcare System - Regular Access to an HCP, CIHI

Next Steps

Ш	Publicly fund flu vaccines
	that are specifically-
	formulated for seniors,
	and provide for ALL
	seniors

Publicly fund the best-inclass shingles vaccine for adults (ideally 50+).

Make the website easier to navigate and include a dedicated seniors section.

Review and update the Seniors' Guide annually.

INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	•
Standard influenza vaccines are publicly funded for all adults 65+	•
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	•
ACCESS	
A policy or directive from the province/territory exists that directits public health programs to provide and administer standard cinfluenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that direct public health programs to provide and administer influenza vac that are specifically-formulated for seniors:	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	
Public health sites	•
Doctors' offices	
Pharmacies	
PNEUMOCOCCAL • Doses vary • One-time, age 65+	
FUNDING	
PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+.	•
PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised.	Partial list
is publicly furface for people with the initial occumpation seed.	
ACCESS	
ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P-2	
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	YES	INCONCLUS	IVE NO
HERPES ZOSTER (SHINGLES)	• Two doses • One-tii	me, age 50+
		Zoster Vaccine, RZV aged 50+.)
Shingles vaccine (Find is publicly funded for		Zoster Vaccine, RZV aged 50+.)
ACCESS			
its public health pro	grams to pro	ovince/territory exists to vide and administer b t zoster vaccine, RZV	est-in-class
Long-term care (LTC	C)		
Congregate care se	ttings		
Aging in place / at h	nome with co	mmunity health suppo	orts
Public health sites			
Doctors' offices			orts
Pharmacies			
AWARENESS • Tra	nsparency •	Patient Education In	itiatives
Digital Communica	tion Efforts		
Information is availarecommended adul		rly outlines all NACI	
Information specific specifically for senio	•	vaccination informati	on
easily found using t Nova Scotia" Information is fou Information is fou Information is fou Information is fou	he search ter und in under und in 3-5 mi und in 5-7 mi und in 7 minu not found on	ns = 3 pts	iors O pts
Information is found vaccination	d regarding a	nnual/seasonal influe	nza
Information is found	d regarding s	hingles vaccination	
Information is found	d regarding p	neumococcal vaccina	tion
		age is found and is cle nded and which are n	
A telephone numbe		is provided to reach lo	ical
Instructions are pro	vided for acc	essing personal vaccir	nation
Information is availa	able in both E	nglish and French	•
Communication Eff	orts to Seni	ors	
A Seniors' Guide is	available		
The Seniors' Guide	is up to date	(2020)	
The Seniors' Guide including printed co		able in a variety of for quest	mats,
		o date information ab	out

the provision of vaccinations in the province/territory

Nunavut

LEADERSHIPIndependent (Consensus Government)PREMIERJoe SavikataaqMINISTER OF HEALTHLorne KusugakMINISTER OF SENIORSNot dedicated
Consolidated with Health portfolio: Lorne KusugakCHIEF PUBLIC HEALTH OFFICERDr. Michael Patterson

OVERVIEW SUMMARY

Nunavut faces some serious logistical challenges in providing easy access to adult vaccines — for its small population, only 14% of residents have regular access to medical care, which is generally only available at co-located public health / community health centres. Nunavut also has an avoidable death rate that's more than double the national average.

FUNDING

F

KEY FINDINGS

- 1. No clear ongoing commitment to fund flu vaccines specifically-formulated for seniors for the 2021-2022 flu season.
- 2. Nunavut does not provide ANY coverage for adults for PNEU-C-13, even those who may be immunocompromised and at greater risk of invasive pnemococcal disease (IPV).
- 3. Funds PNEU-P-23 for all adults 50+.

ACCESS

F

KEY FINDINGS

- While access and distribution seem good for other publicly funded vaccines, the lack
 of funding for critical vaccine programs for seniors resulted in a negative impact on
 the overall score with points lost in both the Funding and Access categories.
- 2. Access for PNEU-C-13 for people who are immunocompromised is unclear as to how to qualify and where to get the vaccine.
- 3. Bringing vaccinations to those aging in place and receiving community health supports is a missed opportunity.

AWARENESS

F

KEY FINDINGS

- 1. Information about vaccines is difficult to find and incomplete.
- 2. Adult and/or senior vaccination schedule(s) noticeably missing.
- 3. Seniors' Guide is out of date (not updated in 2020, or beyond).

OVERALL GRADE



Population of Adults 60+

% of Total Population

2,690

6.84%

AVOIDABLE DEATHS



Nunavut is worse than the national average with 455

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



Nunavut is **below the national average** with 13.9%

National average is 84.9%

Your Healthcare System - Regular Access to an HCP, CIHI

Publicly fund flu vaccines
that are specifically-
formulated for seniors,
and provide for ALL
seniors

ш	Publicly fund the best-in-
	class shingles vaccine for
	adults (ideally 50+).

	Make the website easier
	to navigate and include a
	dedicated seniors section.

Review and update the
Seniors' Guide annually.



INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	
Standard influenza vaccines are publicly funded for all adults 65+	
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	•
ACCESS	
A policy or directive from the province/territory exists that directive public health programs to provide and administer standard influenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that directive health programs to provide and administer influenza verthat are specifically-formulated for seniors:	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	
Public health sites	
Public health sites Doctors' offices	
Doctors' offices	
Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+	
Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent)	No
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PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-C-C (Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC)	ects -23
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	YES	INCONCLUSIVE	NO
HERPES ZOSTER	R (SHINGLES)	• Two doses • One-time, age	e 50+
FUNDING			
Shingles vaccine is publicly funded	•	Zoster Vaccine, RZV) s aged 50+.	•
Shingles vaccine is publicly funded	•	Zoster Vaccine, RZV) aged 50+.	
ACCESS			
its public health p	orograms to pro	ovince/territory exists that dir ovide and administer best-in- t zoster vaccine, RZV):	
Long-term care (l	LTC)		
Congregate care	settings		
Aging in place / a	t home with co	mmunity health supports	
Public health site	S		
Doctors' offices			
Pharmacies			
AWARENESS • 1	Transparency •	Patient Education Initiative	s
Digital Communi	cation Efforts		
Information is ava		rly outlines all NACI	
Information speci specifically for se	•	s vaccination information	
easily found using Nunavut" Information is t Information is t Information is t	g the search ter found in under found in 3-5 mi found in 5-7 mi found in 7 minu as not found on	ns = 3 pts	0 pts
Information is fou vaccination	ınd regarding a	nnual/seasonal influenza	•
Information is fou	ınd regarding s	hingles vaccination	
Information is fou	ınd regarding p	neumococcal vaccination	
		age is found and is clear to inded and which are not	•
A telephone num public health auth		is provided to reach local	
Instructions are p records	rovided for acc	essing personal vaccination	
Information is ava	ailable in both E	English and French	
Communication I	Efforts to Seni	ors	
A Seniors' Guide	is available		
The Seniors' Guid	le is up to date	(2020)	
The Seniors' Guid including printed		able in a variety of formats, quest	
		to date information about he province/territory	•

Ontario

LEADERSHIPProgressive Conservative (Majority)PREMIERDoug Ford (PC)MINISTER OF HEALTHChristine Elliot (PC)MINISTER OF SENIORSRaymond Cho (PC) and AccessibiltyMINISTER OF LONG-TERM CAREMerrilee Fullerton (PC)

CHIEF PUBLIC HEALTH OFFICER Dr. David Williams

OVERVIEW SUMMARY

Credit where credit is due: Ontario tied with PEI to earn this report's highest overall score for older adult immunization in Canada. It's fortunate that this is the case, as the province is home to the largest senior population in the country (an estimated 3,555,601). Having recently launched its shingles vaccine coverage for seniors 65-70 years old, there is much to celebrate. It's important to remember, that even the best immunization program is useless if supply runs out. While pharmacists were granted the ability to administer flu vaccines specifically-formulated for older adults this year, the lack of supply oversight of flu shots in Ontario has been well-documented, resulting in a massive shortage of vaccines, and leaving many without protection this year. It is imperative that Ontario orders sufficient supply to cover the full population, and better coordinate vaccine rollouts to ensure those who are most vulnerable receive priority access.

FUNDING



KEY FINDINGS

- 1. Fully funds influenza vaccines specifically-formulated for all adults 65+.
- 2. Funds best-in-class vaccine for shingles (65-70).
- 3. Funds PNEU-C-13 for the full list of immunocompromised conditions as provided by NACI..

ACCESS



KEY FINDINGS

- 1. Pharmacies participated in publicly funded vaccination programs including those specifically-formulated for seniors for the first time this year.
- 2. Bringing vaccinations to those aging in place and receiving community health supports is a missed opportunity.
- Access for PNEU-C-13 for people who are immunocompromised is unnecessarily cumbersome, is counterintuitive, as it requires visits to multiple HCPs to get the vaccine.

AWARENESS



KEY FINDINGS

- 1. Information is generally clear and comprehensive.
- 2. It is unclear which vaccines are publicly funded for seniors.
- 3. Seniors' Guide is out of date (not updated in 2020, or beyond).

OVERALL GRADE



Population of Adults 60+

% of Total Population

3,555,601

24.13%

AVOIDABLE DEATHS



Ontario is **better than the national average** with 187

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



Ontario is **above the national average** with 90.1%

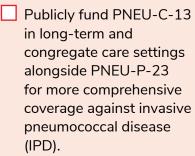
National average is 84.9%

Your Healthcare System – Regular Access to an HCP. CIHI

Empower pharmacies
to administer all publicly
funded vaccines.

Review and update the
Seniors' Guide annually

Provide information about
how and where to access
immunization records.





Scorecard	
INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	
Standard influenza vaccines are publicly funded for all adults 65+	•
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	
ACCESS	
A policy or directive from the province/territory exists that direct its public health programs to provide and administer standard c influenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that direct public health programs to provide and administer influenza vac that are specifically-formulated for seniors :	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	
Public health sites	
Doctors' offices	
Pharmacies	
PNEUMOCOCCAL • Doses vary • One-time, age 65+	
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING	
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FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent)	• Full list
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent)	Full list
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	YES	INCONCLUSIVE	NO
HERPES ZOSTER	(SHINGLES) •	• Two doses • One-time, age	: 50+
		Zoster Vaccine, RZV)	•
	Recombinant	Zoster Vaccine, RZV)	•
ACCESS	IOI ALL addits	ageu 50∓.	
A policy or directivits public health pr	ograms to prov	vince/territory exists that dire vide and administer best-in- : zoster vaccine, RZV):	
Long-term care (L	ΓC)		
Congregate care s	ettings		•
Aging in place / at	home with cor	nmunity health supports	
Public health sites			
Doctors' offices			
Pharmacies			
AWARENESS • TI	ransparency •	Patient Education Initiative	S
Digital Communic	ation Efforts		
Information is avai		ly outlines all NACI	
Information specifically for sen	•	vaccination information	
easily found using Ontario" Information is fo Information is fo Information is fo Information is fo	the search term ound in under 3 ound in 3-5 min ound in 5-7 min ound in 7 minutes onot found on	ns = 3 pts	4 pts
Information is four vaccination	nd regarding ar	nnual/seasonal influenza	
Information is four	nd regarding sh	ningles vaccination	
Information is four	nd regarding pr	neumococcal vaccination	
		ge is found and is clear to	
		nded and which are not	
A telephone numb		s provided to reach local	
Instructions are precords	ovided for acce	essing personal vaccination	•
Information is avai	lable in both E	nglish and French	
Communication E	fforts to Senio	ors	
A Seniors' Guide is	available		
The Seniors' Guide	e is up to date ((2020)	
The Seniors' Guide including printed o		able in a variety of formats, quest	
		o date information about	

the provision of vaccinations in the province/territory

Prince Edward Island

LEADERSHIP	Progressive Conservative (Majority)
PREMIER	Dennis King (PC)
MINISTER OF HEALTH	James Aylward (PC), Minister of Health and Wellness
MINISTER OF SENIORS	None - Other The PEI Seniors' Secretariat is a body created to provide policy and program advice to government and other organizations to improve the quality of life for seniors under the Office of Seniors, which is located in the Ministry of Social Development and Housing. Several individuals make up the PEI Seniors Secretariat.
CHIEF PUBLIC HEALTH OFFICER	Dr. Heather Morrison

OVERVIEW SUMMARY

Despite having the smallest population of any province, Prince Edward Island (PEI) punches well above its weight class for adult vaccinations. PEI is clearly taking strides in leadership for the preventive health of older Islanders, and that is reflected by improvements in funding coverage for influenza and pneumonia vaccines, as well as being tied with Ontario for this report's highest overall score. A pivotal campaign promise to publicly fund the shingles vaccine was made pre-election (April, 2019) by the current sitting government, but has yet to be implemented nearly two years later.

FUNDING



KEY FINDINGS

- 1. Fully funds influenza vaccines specifically-formulated for all adults 65+.
- Funds PNEU-C-13 for the full list of immunocompromised conditions as provided by NACI.
- 3. Shingles vaccine is not funded.

ACCESS



KEY FINDINGS

- Bringing vaccinations to those aging in place and receiving community health supports is a missed opportunity
- 2. It is unclear whether pharmacies can administer publicly funded pneumococcal vaccines at no cost to patients.
- 3. Access for PNEU-C-13 for people who are immunocompromised is unclear as to how to qualify and where to get the vaccine.

AWARENESS



KEY FINDINGS

- 1. Information is both clear and comprehensive.
- 2. Impressive efforts to support immunization of seniors and other populations.
- 3. Immunization information is missing from the Seniors' Guide.

OVERALL GRADE



Population of Adults 60+

% of Total Population

43,307

27.13%

AVOIDABLE DEATHS

Prince Edward Island about the same as the national average with 184

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



Prince Edward Island is **below the national average** with 82.4%

National average is 84.9%

Your Healthcare System – Regular Access to an HCP, CIHI

- Publicly fund the best-inclass shingles vaccine for adults (ideally 50+).
- Clarify access points for publicly funded vaccines

 who can get what vaccines and from where.
- Review and update the Seniors' Guide annually and include immunizations.



scorecara	
INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	•
Standard influenza vaccines are publicly funded for all adults 65+	
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	•
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	•
ACCESS	
A policy or directive from the province/territory exists that directive public health programs to provide and administer standard influenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that directive health programs to provide and administer influenza verthat are specifically-formulated for seniors:	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	•
Public health sites	
Doctors' offices	
Pharmacies	
PNEUMOCOCCAL • Doses vary • One-time, age 65+	
PNEUMOCOCCAL • Doses vary • One-time, age 65+	
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent)	•
FUNDING	Full list
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised.	Full list
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•	YES	•	INCONCLUSIV	E NO
HERPES ZOSTER (SH	IINGLES)	• Two	doses • One-time	e, age 50+
FUNDING		. 7		
Shingles vaccine (Rec				
Shingles vaccine (Red is publicly funded for A			•	•
ACCESS				
A policy or directive from its public health prograshingles vaccines (Re	ams to pro	ovide a	nd administer bes	
Long-term care (LTC)				
Congregate care settir	ngs			
Aging in place / at hor	ne with co	mmun	ity health support	s •
Public health sites				
Doctors' offices				
Pharmacies				
AWARENESS • Trans	parency •	Patie	nt Education Initia	atives
Digital Communication	n Efforts			
Information is available recommended adult vi		rly out	lines all NACI	•
Information specificall specifically for seniors	•	s vacci	nation informatior	n •
Government provided easily found using the Prince Edward Island" Information is found Information is found Information is found Information is found Information was no 10 minutes = 0 pts'	search tei d in under d in 3-5 m d in 5-7 m d in 7 minu t found on	rms: "\ 3 mins ins = 3 ins = 2 utes or	/accines for Senior s = 4 pts pts pts more = 1 pt	rs 4 pts
Information is found revaccination	egarding a	innual/	seasonal influenz	a
Information is found re	egarding s	hingle	s vaccination	
Information is found re	egarding p	neum	ococcal vaccinatio	on 🛑
Information about vac the reader which vacc		_		
A telephone number of public health authorities		is prov	vided to reach loca	
Instructions are provide records	led for acc	essing	personal vaccinat	tion
Information is availabl	e in both E	English	and French	
Communication Effor	ts to Seni	ors		
A Seniors' Guide is av	ailable			
The Seniors' Guide is	up to date	(2020)	
The Seniors' Guide is including printed copie			n a variety of forma	ats,
The Seniors' Guide pro the provision of vaccin	-			t •



Quebec

 LEADERSHIP
 Coalition Avenir Québec (Majority)

 PREMIER
 François Legault (CAQ)

 MINISTER OF HEALTH
 Christian Dubé (CAQ), Minister of Health and Social Services

 MINISTER OF SENIORS
 Not dedicated Marguerite Blais (CAQ) and Informal Caregivers

 CHIEF PUBLIC HEALTH OFFICER
 Dr. Horacio Arruda

OVERVIEW SUMMARY

Quebec, which has the country's second highest number of seniors, follows its own set of provincial guidelines for vaccine recommendations, provided by the Institut National de Santé Publique du Québec (INSPQ). The INSPQ has very limited recommendations on all types of influenza vaccines, resulting in fewer seniors getting the access to best-in-class influenza protection.

Still, there are some proactive programs to provide long-term care residents with both influenza and pneumococcal vaccines, and Quebec is one of the few that appears to administer PNEU-C-13 to those who need additional protection against invasive pneumococcal disease (IPD).

FUNDING



KEY FINDINGS

- 1. Fails to fund comprehensive standard flu programs and does not fund specifically-formulated vaccines for seniors.
- 2. No clear ongoing commitment to fund flu vaccines specifically-formulated for seniors for the 2021-2022 flu season.
- 3. Shingles vaccine is not funded.

ACCESS



KEY FINDINGS

- 1. Access for flu shots appears to be targeted and limited as opposed to providing the broadest coverage possible to encourage herd immunity.
- 2. Physicians do not appear to participate in vaccine distribution.
- 3. Bringing vaccinations to those aging in place and receiving community health supports is a missed opportunity.

AWARENESS



KEY FINDINGS

- 1. Immunization information is missing from the Seniors' Guide.
- 2. Good online information about NACI / INSPQ recommended vaccinations, including shingles, but must still phone a healthcare resource to confirm eligibility, vaccination location, and regionality.
- 3. The shingles vaccine does not appear on adult immunization schedules.

OVERALL GRADE



Population of Adults 60+

% of Total Population

2,310,609

26.95%

AVOIDABLE DEATHS



Quebec is **better than the national average** with 170

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



Quebec is **below the national average** with 78.5%

National average is 84.9%

Your Healthcare System - Regular Access to an HCP, CIHI

- Publicly fund flu vaccines that are specifically-formulated for seniors, and provide for ALL seniors.
- Bring vaccination programs to basic standards as outlined by NACI recommendations.
- Publicly fund the best-inclass shingles vaccine for adults (ideally 50+).

Scorecard	
INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	
Standard influenza vaccines are publicly funded for all adults 65+	•
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	
ACCESS	
A policy or directive from the province/territory exists that directive public health programs to provide and administer standard influenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that dire public health programs to provide and administer influenza vathat are specifically-formulated for seniors :	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	
District the state of the state of	
Public health sites	
Public health sites Doctors' offices	
	•
Doctors' offices Pharmacies	•
Doctors' offices	
Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+	
Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent)	Full list
Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent)	Full list
Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised.	ects
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directits public health programs to provide and administer PNEU-P-	ects
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PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dire its public health programs to provide and administer PNEU-P- (Pneumococcal polysaccharide 23-valent): Long-term care (LTC)	ects -23
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P-(Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings	ects -23
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P-(Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports	ects -23
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P(Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites	ects
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PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P-(Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directits public health programs to provide and administer PNEU-C-1 (Pneumococcal conjugate 13-valent) to people who are	ects -23
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-Polyneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directits public health programs to provide and administer PNEU-C-1 (Pneumococcal conjugate 13-valent) to people who are immunocompromised:	ects -23
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P-(Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-C-1 (Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC)	ects -23
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P-(Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-C-1 (Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC) Congregate care settings	ects -23
PNEUMOCOCCAL • Doses vary • One-time, age 65+ FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-P-(Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directits public health programs to provide and administer PNEU-C-1 (Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports	ects -23

	YES	INC	CONCLUSIVE	NO
HERPES ZOSTER	(SHINGLES)	• Two dos	es • One-time, a	ge 50+
FUNDING				
Shingles vaccine (is publicly funded			•	•
Shingles vaccine (is publicly funded				
ACCESS				
A policy or directivits public health pr shingles vaccines	ograms to prov	vide and a	ıdminister best-iı	
Long-term care (L	ГС)			
Congregate care s	ettings			
Aging in place / at	home with cor	mmunity h	nealth supports	
Public health sites				
Doctors' offices				
Pharmacies				
AWARENESS • TI	ransparency •	Patient E	ducation Initiativ	ves
Digital Communic	ation Efforts			
Information is avai		rly outline	s all NACI	
Information specifically for sen	•	vaccinati	on information	•
Government provious easily found using Quebec"				
Information is fo Information is fo Information is fo Information is fo Information was 10 minutes = 0	ound in 3-5 mir ound in 5-7 mir ound in 7 minut s not found on	ns = 3 pts ns = 2 pts tes or moi	re = 1 pt	3 pts
Information is four vaccination	nd regarding ar	nnual/seas	sonal influenza	•
Information is four	nd regarding sh	ningles va	ccination	
Information is four	nd regarding p r	neumocoo	cal vaccination	
Information about the reader which v		_		•
A telephone numb		s provided	d to reach local	•
Instructions are precords	ovided for acce	essing per	sonal vaccination	1
Information is avai	lable in both E	nglish and	l French	
Communication E	fforts to Senio	ors		
A Seniors' Guide is	available			
The Seniors' Guide	e is up to date ((2020)		
The Seniors' Guide including printed o	e is made availa	able in a v	ariety of formats	,
The Seniors' Guide the provision of va				•

Saskatchewan

LEADERSHIP	Saskatchewan Party (Majority)
PREMIER	Scott Moe (SP)
MINISTER OF HEALTH	Paul Merriman (SP)
MINISTER OF SENIORS	Not dedicated Consolidated with Mental Health and Addictions and Rural and Remote Health portfolios: Everett Hindley
CHIEF PUBLIC HEALTH OFFICER	Dr. Saqib Shahab

OVERVIEW SUMMARY

Saskatchewan is home to pioneering technologies in the areas of fintech, science and agriculture, and the province boasts more roadways than any other province in Canada. But paving the way forward by funding critical vaccines to protect its senior population doesn't seem to be on the province's agenda. What is commendable however, is the government's efforts to provide transparency and awareness of vaccine information. Also, the documented directives for making vaccinations accessible to those in home care are unique in Canada.

FUNDING



KEY FINDINGS

- 1. Has funded specifically-formulated influenza vaccines for residents of long-term care in previous flu season (prior to 2020-2021).
- 2. Coverage for specifically-formulated influenza vaccines for residents of long-term also extended to congregate care.
- 3. Shingles vaccine is not funded.

ACCESS



KEY FINDINGS

- While access and distribution seem good for other publicly funded vaccines, the lack
 of funding for critical vaccine programs for seniors resulted in a negative impact on
 the overall score with points lost in both the Funding and Access categories.
- 2. Access for PNEU-C-13 for people who are immunocompromised is unclear as to how to qualify and where to get the vaccine.
- 3. Pharmacists are able to provide flu vaccines in home to those aging in place where mobility challenges or mental decline are present.

AWARENESS



KEY FINDINGS

- 1. Impressive efforts to support immunization of seniors and other populations.
- 2. Information is both clear and comprehensive.
- 3. Immunization schedule appears to be out of date (not updated since 2018)

OVERALL GRADE



Population of Adults 60+

% of Total Population

265,242

22.50%

AVOIDABLE DEATHS



Saskatchewan is worse than the national average with 232

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



Saskatchewan is **below the national average** with 81.4%

National average is 84.9%

Your Healthcare System – Regular Access to an HCP, CIHI

L	Publicly fund flu vaccines
	that are specifically-
	formulated for seniors,
	and provide for ALL
	seniors

Ш	Increase access for
	PNEU-C-13 and make
	it clear who can get it.

Empower pharmacie					
	to administer all publicly				
	funded vaccines				

Review and update
the Seniors' Guide
annually and include
immunizations

INFLUENZA • Single dose • Annual	
FUNDING	
Standard influenza vaccines are publicly funded for all adults aged 18–64	•
Standard influenza vaccines are publicly funded for all adults 65+	
Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+	
Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020).	
ACCESS	
A policy or directive from the province/territory exists that dir its public health programs to provide and administer standar influenza vaccines :	
Public health sites	
Doctors' offices	
Pharmacies	
A policy or directive from the province/territory exists that dir public health programs to provide and administer influenza v that are specifically-formulated for seniors :	
Long-term care (LTC)	
Congregate care settings	
Aging in place / at home with community health supports	
Public health sites	
Doctors' offices	
Pharmacies	
PNEUMOCOCCAL • Doses vary • One-time, age 65+	
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent)	•
FUNDING	Partial list
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised.	
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent)	list
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dir its public health programs to provide and administer PNEU-F	list
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FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dir its public health programs to provide and administer PNEU-F (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings	list
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dir its public health programs to provide and administer PNEU-F (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports	list
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dir its public health programs to provide and administer PNEU-F (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites	list
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dir its public health programs to provide and administer PNEU-F (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices	list rects -23
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dir its public health programs to provide and administer PNEU-F (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directits public health programs to provide and administer PNEU-C- (Pneumococcal conjugate 13-valent) to people who are	list rects -23
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-F (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-C-(Pneumococcal conjugate 13-valent) to people who are immunocompromised:	list rects -23
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dir its public health programs to provide and administer PNEU-F (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-C- (Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC)	list rects -23
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dirits public health programs to provide and administer PNEU-F (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that direits public health programs to provide and administer PNEU-C-(Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC) Congregate care settings	list rects -23
FUNDING PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) is publicly funded for people who are immunocompromised. ACCESS A policy or directive from the province/territory exists that dir its public health programs to provide and administer PNEU-F (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies A policy or directive from the province/territory exists that directive public health programs to provide and administer PNEU-C- (Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports	list rects -23

YES	INCONCLUSIVE	NO				
HERPES ZOSTER (SHINGLES) • FUNDING	Two doses • One-time, age	50+				
Shingles vaccine (Recombinant Zoster Vaccine, RZV) is publicly funded for ANY adults aged 50+. Shingles vaccine (Recombinant Zoster Vaccine, RZV)						
A policy or directive from the province/territory exists that directs its public health programs to provide and administer best-in-class shingles vaccines (Recombinant zoster vaccine, RZV):						
Long-term care (LTC)						
Congregate care settings						
Aging in place / at home with com	nmunity health supports					
Public health sites						
Doctors' offices						
Pharmacies						
AWARENESS • Transparency • I	Patient Education Initiatives					
Information is available that clearl	v outlines all NACI					
recommended adult vaccines						
Information specifically identifies specifically for seniors	vaccination information	•				
Government provided information easily found using the search term Saskatchewan" Information is found in under 3 Information is found in 3-5 min Information is found in 5-7 min Information is found in 7 minut Information was not found on t 10 minutes = 0 pts"	mins = 4 pts s = 3 pts s = 2 pts es or more = 1 pt	4 pts				
Information is found regarding an vaccination	nual/seasonal influenza					
Information is found regarding sh	ingles vaccination					
Information is found regarding pn	eumococcal vaccination					
Information about vaccine coverage the reader which vaccines are fun	=	•				
A telephone number or website is public health authorities	provided to reach local					
Instructions are provided for accessing personal vaccination records						
Information is available in both En	glish and French					
Communication Efforts to Seniors						
A Seniors' Guide is available						
The Seniors' Guide is up to date (2	The Seniors' Guide is up to date (2020)					
The Seniors' Guide is made available in a variety of formats, including printed copies upon request						
The Seniors' Guide provides up to date information about the provision of vaccinations in the province/territory						

Yukon

LEADERSHIP	Liberal (Majority)			
PREMIER	Sandy Silver (L)			
MINISTER OF HEALTH	Pauline Frost (L), Minister of Health and Social Services, Minister of Environment, Minister responsible for the Yukon Housing Corporation			
MINISTER OF SENIORS	None			
CHIEF PUBLIC HEALTH OFFICER	Dr. Brendan Hanley			

OVERVIEW SUMMARY

Yukon is a good news, bad news story. The good news is that it is one of only two jurisdictions to have recently publicly funded the shingles vaccines for seniors 65-70 (see Ontario). The Yukon is also the first territory to empower its pharmacists to administer flu vaccines. The bad news? The absence of coverage for specifically-formulated influenza vaccines for seniors, even extends to those in long-term care, which is strange given the federal government's financial support for this vaccine program this year. Increased efforts to educate and inform seniors about its vaccine programs are sorrowfully lacking.

FUNDING



KEY FINDINGS

- Only covers standard flu vaccines. Does not fund flu vaccines that are specificallyformulated for seniors.
- 2. Funds best-in-class vaccine for shingles (65-70).
- 3. Only funds PNEU-C-13 for a partial list of immunocompromised conditions as provided by NACI.

ACCESS



KEY FINDINGS

- 1. Access for PNEU-C-13 for people who are immunocompromised is unclear.
- 2. It is at times unclear from publicly available information who can administer publicly funded vaccines.
- 3. Pharmacies participated in publicly funded flu vaccination programs for the first time this year.

AWARENESS



KEY FINDINGS

- 1. Vaccination information is strongly skewed towards children. Seniors are missing.
- 2. It is unclear which vaccines are publicly funded for seniors.
- 3. While the site does provide good information about the vaccines themselves, how and where to get the vaccines is confusing or unclear, and is not called out well for adults, let alone seniors.

OVERALL GRADE



Population of Adults 60+

% of Total Population

8,727

20.75%

AVOIDABLE DEATHS



Yukon did not report this information

National average is 190 per 100,000

Your Healthcare System – Avoidable Deaths, CIHI

REGULAR ACCESS TO A DOCTOR



Yukon is **below the national average** with 78.8%

National average is 84.9%

Your Healthcare System – Regular Access to an HCP, CIHI

- Publicly fund flu vaccines that are specifically-formulated for seniors, and provide for ALL seniors.
- Empower pharmacies to administer all publicly funded vaccines.
- Make the website easier to navigate and include a dedicated seniors section.

INFLUENZA • Single dose • Annual **FUNDING** Standard influenza vaccines are publicly funded for all adults aged 18-64 Standard influenza vaccines are publicly funded for all adults 65+ Influenza vaccines specifically-formulated for seniors are publicly funded by the province/territory for all adults 65+ Influenza vaccines specifically-formulated for seniors were funded in LTC in the previous calendar year (2019-2020). **ACCESS** A policy or directive from the province/territory exists that directs its public health programs to provide and administer standard dose influenza vaccines: Public health sites Doctors' offices **Pharmacies** A policy or directive from the province/territory exists that directs its public health programs to provide and administer influenza vaccines that are specifically-formulated for seniors: Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies PNEUMOCOCCAL • Doses vary • One-time, age 65+ **FUNDING** PNEU-P-23 (Pneumococcal polysaccharide 23-valent) is publicly funded for all adults 65+. PNEU-C-13 (Pneumococcal conjugate 13-valent) **Partial** is publicly funded for people who are immunocompromised. list **ACCESS** A policy or directive from the province/territory exists that directs its public health programs to provide and administer PNEU-P-23 (Pneumococcal polysaccharide 23-valent): Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices **Pharmacies** A policy or directive from the province/territory exists that directs its public health programs to provide and administer PNEU-C-13 (Pneumococcal conjugate 13-valent) to people who are immunocompromised: Long-term care (LTC) Congregate care settings Aging in place / at home with community health supports Public health sites Doctors' offices Pharmacies

	YES		INCONCL	USIVE	NO		
HERPES ZOSTER ((SHINGLES)	• Two	doses • On	e-time, age	50+		
FUNDING							
Shingles vaccine (Recombinant Zoster Vaccine, RZV) is publicly funded for ANY adults aged 50+.							
Shingles vaccine (Recombinant Zoster Vaccine, RZV) is publicly funded for ALL adults aged 50+.							
ACCESS	ACCESS						
A policy or directive from the province/territory exists that directs its public health programs to provide and administer best-in-class shingles vaccines (Recombinant zoster vaccine, RZV):							
Long-term care (LT	C)						
Congregate care se	ttings				•		
Aging in place / at h	nome with co	mmur	nity health s	upports			
Public health sites							
Doctors' offices							
Pharmacies							
AWARENESS • Tra	ansparency •	Patie	nt Educatio	n Initiatives			
Digital Communica	tion Efforts						
Information is availarecommended adul		rly ou	tlines all NA	CI			
Information specific specifically for senio	•	vacc	ination infor	mation			
Government provid easily found using t Yukon" Information is for Information is for Information is for Information was 10 minutes = 0 p	the search ter und in under und in 3-5 mi und in 5-7 mi und in 7 minu not found on	ms: "\ 3 mins ns = 3 ns = 2 ites or	Vaccines for s = 4 pts pts pts more = 1 pt	Seniors t	0 pts		
Information is found vaccination	d regarding a	nnual	/seasonal in	fluenza	•		
Information is found	d regarding s	hingle	s vaccinatio	n			
Information is found	d regarding p	neum	ococcal vac	cination			
Information about which value		-			•		
A telephone number public health autho		is pro	vided to read	ch local	•		
Instructions are pro records	vided for acc	essing	g personal va	accination			
Information is availa	able in both E	nglish	and French	ı			
Communication Eff	forts to Seni	ors					
A Seniors' Guide is	available						
The Seniors' Guide	is up to date	(2020))				
The Seniors' Guide including printed co			n a variety o	f formats,	•		
The Seniors' Guide the provision of vac					•		



Glossary

Aging in Place Aging in place means having the health and social supports and services come to you in order to live safely and independently in your home for as long as you wish and are able. This may include government funded services provided by personal care/support workers.

Community Health Centre Community Health Centres are multi-sector health and health care organizations that deliver integrated, people-centred services and programs reflecting the needs and priorities of the communities they serve.

Congregate Care Settings A group living setting where a number of unrelated people reside in close proximity for either a limited or an extended period of time and receive care services in that location. May be called: Nursing Homes, Assisted Living, Supportive Living, etc.

Diphtheria According to the Government of Canada (2018), diphtheria is a disease that is caused by the toxin-producing strains of the bacteria Corynebacterium diphtheriae. This bacterium is commonly spread through person-to-person contact and affects mucous membranes, specifically skin and upper respiratory tract.

Doctor's Office While here we say Doctors' offices, we are generally talking about licensed medical practices primarily engaged in the private or group practice of general or specialized medicine or surgery. Examples: private practices, walk-in clinics, health centres. This may also extend from physicians to nurse practitioners and other health care providers (HCPs).

Immunocompromised From NACI: asplenia; solid organ transplant; immunocompromising therapy including use of long-term corticosteroids (other than by inhalation, topical, or injection into a joint) e.g. oral prednisone for longer than 2 weeks, chemotherapy, radiation therapy, post-organ transplant therapy and certain anti-rheumatic drugs; Human Immunodeficiency Virus (HIV); hematopoietic stem cell transplant (HSCT); malignant neoplasms; nephrotic syndrome; sickle cell disease.

Influenza "Influenza is a respiratory infection caused by influenza A and B viruses. Seasonal influenza epidemics occur annually in Canada, generally in the late fall and winter months. Typical symptoms include the suddent onset of fever, cough, and muscle aches and can cause serious health complications for those with comorbidities such as diabetes or heart conditions, leading to reduced functional ability in extreme cases.

Long-Term Care Facilities that provide living accommodations for senior residents who require onsite distribution of care and services 24 hours a day, seven days a week. Examples of provided services and care would be help getting out of bed, getting dressed, bathing, laundry, meals, health check ups, administering of medication, or housekeeping.

Each province/territory may use different names:

ON, NL, NU, NT, NB, YT, AB - Long-Term Care

BC - Long-term Care, Residential Care Facility

MB - Personal Care Home

QC - Residential and Long-term care Centre (CHSLD)

NS - Residential Care Facilities

SK - Special Care Homes, Long-term Care

PE - Long-Term Care or Nursing Homes

NACI National Advisory Committee on Immunization (NACI) makes recommendations for the use of vaccines currently or newly approved for use in humans in Canada. NACI provides the Public Health Agency of Canada with ongoing and timely medical, scientific, and public health advice relating to immunization.

Pertussis As stated by the Government of Canada (2020), pertussis is caused by Bordetella pertussis bacteria. Pertussis, also known as whooping cough, is a contagious infection targeting the lungs and airways.

Pharmacy Establishments, known as pharmacies and drug stores, primarily engaged in retailing prescription or non-prescription drugs and medicines.

PNEU-C-13 (Pneumococcal conjugate 13-valent)
Vaccine The PNEU-C-13 vaccine is approved by Health
Canada and provides protection against 13 types of
Streptococcus pneumoniae, which causes pneumococcal
disease and has been shown to provide additional
protection for those who are immunocompromised or
more susceptible to invasive pneumococcal disease (IPD).

PNEU-P-23 (Pneumococcal polysaccharide 23-valent) Vaccine The PNEU-P-23 vaccine prevents pneumonia and other infections caused by 23 types of the streptococcus pneumoniae bacteria.

Pneumoccocal (pneumonia) The bacterium Streptococcus pneumoniae is the cause of invasive pneumococcal disease (IPD) and a common cause of community acquired pneumonia (CAP).

Public Funding/Publicly Funded Paid for by the provincial/territorial government.

Public Health Site A Public Health Site is an official health location where vaccinations are administered. They also may offer healthy living programs and disease prevention information.

Glossary

Senior For the purposes of this report, "senior" is defined through a health care delivery policy lens as it pertains to each identified vaccine in order to establish a metric for assessment: influenza: 65+; Pneumonia; 65+; all other illnesses: 65+, Shingles 50+. Where data has been collected by age cohort, we indicate that age marker in the report. Age demarcation used in this report is reflective of third party data sets. CanAge takes a LifeCourse Approach, and seeks age-inclusion, rather than using a specific age-number.

Seniors' Guide/Information Booklet Document that contains information pertaining to seniors produced by provinces and territories.

Shingles Herpes zoster (shingles) is a manifestation of reactivation of the chicken-pox virus that causes neuropathic pain and a dermatomal vesicular rash.

Shingles Vaccine Recombinant Zoster Vaccine (RZV) is a specifically-formulated vaccine recommended for adults 50+ used to prevent varicella-zoster virus (VZV).

Specifically-Formulated A vaccine that has been formulated and tested for an older adult (senior) population.

Tetanus Tetanus is a disease caused by the neurotoxin produced by the anaerobic bacterium called Clostridium tetani. This bacterium can be found in spore form among soil, dust and manure. There is no cure for tetanus, however it is a vaccine-preventable disease.

Vaccine A product that stimulates a person's immune system to produce immunity to a specific disease, protecting the person from that disease. Vaccines are usually administered through needle injections, but can also be administered by mouth or sprayed into the nose.

Vaccine Schedule A government recommended series of vaccinations depending on age, health, and sometimes occupation in order to prevent certain diseases. The Federal Government body, NACI, recommends which vaccines for which populations and when, however each provincial/territorial government decides which they will publicly fund. If you would like to know which vaccines you should have as an older adult in Canada, you may download one here.

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About CanAge

CanAge is Canada's national seniors' advocacy organization, working to improve the lives of older adults through advocacy, policy, and community engagement. We are non-partisan and backed by a pan-Canadian membership base.

CanAge has quickly established itself as Canada's national advocate for issues affecting older people in our country, having ramped up operations last year in urgent response to the threat COVID-19 poses to vulnerable seniors in long-term care.

CanAge has been working tirelessly, both behind the scenes in meetings with policymakers and on the national media stage as a trusted commentator, moving the needle on behalf of our rapidly aging population.

CanAge members enjoy access to exclusive benefits from vetted senior-friendly partners. They are socially engaged advocates who care about aging — a unifying issue that affects us all.

Benefits of FREE membership:

- Exclusive access to exciting offers and perks from our trusted partners.
- Advance notice of engaging events, announcements and inspiring learning opportunities.
- Connect with a community of other passionate advocates who share your interests.
- Participate in surveys and polls, lending your voice to guide our advocacy work and future member benefits.
- Support a worthwhile cause with the power to change countless lives across Canada.

Think older Canadians deserve better?
Join the movement
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Interested in supporting our work? Email partnerships@CanAge.ca

VOICES of Canada's Seniors: A Roadmap to an Age-Inclusive Canada



In 2020, CanAge launched its comprehensive policy platform: **VOICES of Canada's Seniors:** A Roadmap to an Age-Inclusive Canada. Developed through an exhaustive coast-to-coast-to-coast consultative process, VOICES pulls from evidence-based reviews, highlights best practices, and identifies stubborn or complex issues affecting older people. We viewed these issues through diverse lenses to ensure that we represented the varied experiences of often marginalized communities.

VOICES now serves as the foundation for all of CanAge's strategic work, and has already been credited with driving forward several major policy changes, including:

- 1. The federal government's commitment to creating National Long-Term Care Standards.
- 2. Getting social inclusion to be a key priority issue for federal and provincial governments, and
- 3. The federal government's commitment to fund specifically-formulated seniors' influenza vaccine for all long-term care homes in Canada in 2020/21.

The roadmap covers 40 critical issues and makes 135 concrete and measurable recommendations.



The 6 Compass Points of VOICES:

- Violence and Abuse Prevention
- Optimal Health and Wellness
- Infection Prevention and Disaster Response
- Caregiving, Long-Term Care, Home Care and Housing Resources
- **E** Economic Security
- Social Inclusion

The impetus of this report was "I: Infection Prevention and Disaster Response" and, specifically, several of its key issues:

Issue #16: Vaccine Uptake and Reform

Issue #17: Prioritize Adult Vaccination During COVID-19

Issue #18: Adult Vaccine Schedule and Uptake Tracking

Get more information at CanAge.ca/VOICES





Authored by CanAge. February 2021.

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