



# INFORMATION REPORT

<b>TO:</b> Mayor and Members Board of Health	<b>WARD(S) AFFECTED:</b> CITY WIDE
<b>COMMITTEE DATE:</b> June 18, 2012	
<b>SUBJECT/REPORT NO:</b> Vaccine Preventable Disease School Program Review (BOH12014) (City Wide)	
<b>SUBMITTED BY:</b> Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services Department	<b>PREPARED BY:</b> Dr. Julie Emili (905) 546-2424 Ext. 2169
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**Council Direction:** N/A

## Information:

The Vaccine Preventable Disease Program (VPD) in collaboration with the Applied Research and Evaluation (AR&E) team conducted a program evaluation of the elementary school-based immunization program for Hepatitis B, Meningococcal, and HPV vaccines given to grade 7 students (Hepatitis B and Meningococcal) and female grade 8 students (HPV). The provision of this school-based immunization program is a mandated requirement under the Ontario Public Health Standards (2008), Vaccine Preventable Diseases. The methods used for the review of the program are also mandated under the Foundational Standards

The key objective was to determine how to better collaborate with school boards, schools, parents and students in order to increase immunization coverage for all three vaccines. In Hamilton, the coverage for completing the full course of each immunization is lower than the target of 90-95% per immunization outlined in the Accountability Agreement with the Ministry of Health and Long-Term Care (BOH11038a) that was approved by the Board of Health earlier this year: 74% for the two-dose Hepatitis B series, 80% for the one-dose meningococcal vaccine, and 55% for the three-dose HPV series.

The methodology involved a comprehensive review of the literature, the completion of 376 parental surveys and input from the Boards of Education (Public, Catholic, French). The literature was reviewed for current best practices for increasing vaccine uptake while meeting the needs of all stakeholders (parents, students, schools, school boards). Parental surveys were conducted in an effort to gather local data that could be used to operationalize and tailor suggested changes from the literature review. School Boards were presented the findings of both the literature review and parent surveys and were asked to provide input into the current and proposed processes and resources.

### **Program Changes and Implementation Timelines**

Based on the several conceptual and practical recommendations proposed from the evaluation, the VPD program will implement the following changes over the next two school years, within the existing budget:

#### **2012/13 School Year**

- Using a balanced and tailored approach, redesign vaccine information sheets and consent forms for parents, as well as, develop separate material for students. These materials will use plain, simple language, will contain graphics and will be at a grade 6 reading level.
- Develop a process to ensure materials are distributed to parents earlier. Parents indicated they need more time to consider the vaccine information provided and to seek out other sources of information relevant to their needs.
- Redesign the program website and ensure the link is included in all materials and resources. The website would include information that parents indicated they would like to see; such as, details about vaccine ingredients, vaccine safety and testing and would include graphs, tables and statistics.
- Development of a resource for teachers focused on how they can support students' anxieties and fears the day of immunization clinics.

#### **2013/14 School Year**

- Incorporate vaccine information into existing sexual health curriculum used and approved by the Boards of Education.
- Develop "priming" information to be distributed to Grade 6 students for Hepatitis B and Meningococcal vaccines and for Grade 7 girls for HPV vaccine.
- Plan, implement and evaluate a community awareness campaign focused on marketing and advertising, community engagement (i.e. parent vaccine information sessions, vaccine champions and attendance at Board of Education parent conference) and social media.

The proposed changes will be monitored for their impact on immunization rates and will be reported back to the Board of Health.