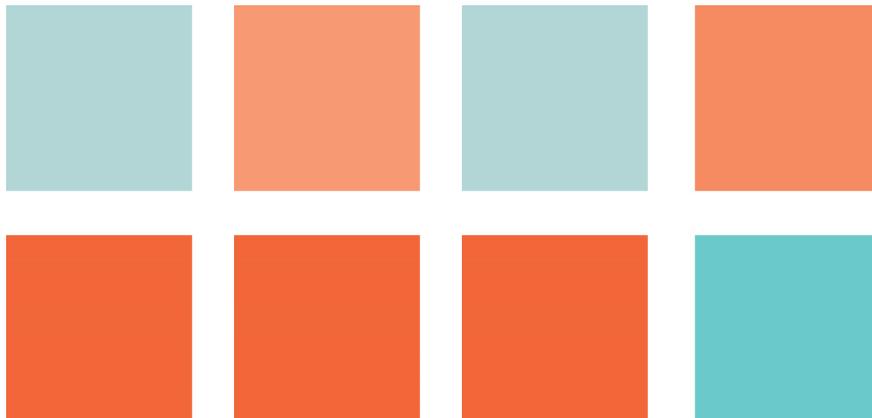


**RNAO Response to Consultation Regarding
Potential Expansion of Publicly Funded Vaccines In
Ontario Pharmacies**

**Vaccine Policy and Programs Branch
Office of Chief Medical Officer of Health,
Public Health Ministry of Health**

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Introduction

The Registered Nurses' Association of Ontario (RNAO) represents more than 50,400 registered nurses (RN), nurse practitioners (NP) and nursing students across the province. For nearly a century, the association has advocated for changes that improve people's health.

RNAO welcomes the opportunity to present our views on the potential expansion of publicly funded vaccines in Ontario pharmacies.

RNAO notes that the stated goals in expanding routine vaccine administration to pharmacies for any or all of the vaccine bundles are:

- connecting every person in Ontario to appropriate and timely care
- providing faster access to care
- maximizing the skills and full potential of health professionals

Overall, RNAO sees this as a stopgap measure that will do little to connect every Ontarian to the comprehensive and continuous primary care needed to advance positive health outcomes. While this strategy may increase access to vaccines, it will disrupt the urgent work of securing robust primary care for the 2.2 million Ontarians currently unattached to a primary care provider.¹

Below, RNAO responds to the four questions outlined in Appendix C of the ministry consultation document.

Question 1

From the perspective of your organization, what are the implications of expanding routine vaccine administration to pharmacies for any or all of the vaccine bundles? Please provide bundle specific details, where applicable (e.g., records management).

RNAO has identified several implications related to expanding routine vaccine administration to pharmacies:

- **Access to primary care:** Vaccine administration is only one aspect of primary care, both in the childhood years and across the life span. Vaccination administration fosters the public connections to primary care, leading to opportunities for health promotion and illness prevention – key aspects of a robust health system.²

Instead of expanding routine vaccine administration to pharmacies, RNAO seeks to create a robust and comprehensive primary care sector -- for all Ontarians -- by focusing on team-based primary care. We are on record calling for increasing the numbers of nurse practitioner-led clinics (NPLC) and enabling all nurse practitioners (NP) in primary-care situations to act as the "Most Responsible Provider" (MRP).³ Indeed, although several proposals for NPLCs are ready to go, NPs eager to serve Ontarians have been waiting almost two years for approvals.

- **Holistic health care:** In reviewing this strategy, it is critical to note that pharmacists focus on an important and specific area of health care: dispensing medications, prescribing some medications, and administering flu and COVID-19 vaccinations. RNAO supports that work. However, expanding to pharmacists the administration of vaccinations across the life span will contribute to fractured, piecemeal care. It will also threaten the holistic, client-centred care model, thwarting continuity of care and caregiver -- the cornerstone of a robust primary care delivery model.⁴

Instead of expanding routine vaccine administration to pharmacies, RNAO calls to augment the current primary care infrastructure by expanding school-health programmes through public health services. [RNAO is on record calling for the permanent funding of the 625 public health nurses in schools – funding that came to an end in June 2023. Nurses in these crucial roles demonstrated value for money and their need remains as vibrant today as \[during the pandemic\]\(#\).](#)

- **Duplication of service:** Different health professions across different sectors engaging in the same type of work with the same populations results in duplication of purpose – and introduces the potential for missed care. Monitoring, teaching about, and administering vaccines is part of the work of well-baby clinics, and is also covered by pre-and post-natal visits, school health programs, and regular follow-up and physical examinations across all age ranges in primary care. Extending the role of pharmacists to include administering additional bundles of vaccination already addressed in our health system adds potential for confusion and misunderstanding by the public and professionals alike related to who is responsible for this vital health practice.

Instead of expanding routine vaccine administration to pharmacies, RNAO calls to increase resources to strengthen the current system infrastructure now responsible for vaccinations across the four vaccine bundles.

- **Population vaccination rates:** We are acutely aware of the critical need for high vaccination rates to maintain population health and avoid resurgences of diseases once all but eradicated. Linking vaccination bundles to health professionals already providing primary and preventive health care across sectors ensures better, timelier uptake of vaccination. Further, health teaching related to the importance of timely vaccination is part of regular primary, pre- and post-partum, and school health.
- **Erosion of not-for-profit health care:** RNAO views this strategy as another attempt to deliver not-for-profit services through a for-profit model -- consistent with Bill 60: Your Health Act, 2023. As RNAO indicated in our response to Bill 60,⁵ setting up parallel for-profit health care delivery of care and services will destabilize the health system and result in worse health outcomes.

Instead of expanding routine vaccine administration to pharmacies, RNAO calls on the government to increase funding to strengthen primary care and school health, both of which will address the vaccination needs of Ontarians.

Questions 2 and 3

2. Which bundle(s) would you recommend (if any) to be expanded to the pharmacy channel, and why?

3. Which vaccine bundles would you not recommend (if any) to be expanded to the pharmacy channel, and why?

RNAO recommends that **no** routine vaccination bundles be expanded to the pharmacy channel.

Question 4

Are there any other important considerations the Ministry should explore in assessing potential expansion of publicly funded vaccine administration through the pharmacy channel?

RNAO believes vaccination through the pharmacy channel should be reserved for mass vaccination administration such as flu or COVID-19 vaccines which must be delivered to large population groups in a short period of time.

The proposed expansion does nothing to achieve critical system changes needed to advance stronger access to robust primary care which is foundational to all high functioning health systems and to optimize population health outcomes.

RNAO recommends that the Ontario Ministry of Health:

1. increase access to team-based primary care
2. immediately approve the NPLC proposals currently under ministry review, and double – at minimum – the number of NPLCs over the next three years
3. authorize all NPs working in primary care to be “Most Responsible Providers” (MRP) to enable more unattached patients to be linked to a primary-care MRP
4. make full use of the broad range of expertise and skills of registered nurses (RN) across the continuum of care – including in primary care settings – to advance client-centred holistic care.⁶ This should include situating RNs as care coordinators in primary care settings, as recommended in RNAO’s ECCO model⁷
5. approve RN prescribing immediately to allow RNs across all sectors – and particularly in the primary care, home care and long-term care sectors – to communicate diagnoses and prescribe medications, commensurate with their expert skills in comprehensive assessment, treatment, monitoring and evaluation
6. fund on a permanent basis the 625 public health nurse positions approved during the pandemic, to expand the school health focus, and bolster health promotion and prevention programs across the life span

¹ INSPIRE-PHC. (2023). Background: Inspire-PHC Research Findings for Ontario.
<https://www.ontariofamilyphysicians.ca/news-features/news/backgrounder-research-findings-april-2023.pdf>

² Registered Nurses' Association of Ontario. (2020). Enhancing Community Care for Ontarians ECCO 3.0.
<https://rnao.ca/policy/ecco-30-enhancing-community-care-for-ontarians>

³ RNAO Nurse Practitioner Task Force. (2021). Nurse Practitioner Task Force: Vision for Tomorrow.
https://rnao.ca/sites/rnao-ca/files/NP_TF_Feb_25_FINAL_3.pdf

⁴ Registered Nurses' Association of Ontario. (2020). Enhancing Community Care for Ontarians ECCO 3.0.
<https://rnao.ca/policy/ecco-30-enhancing-community-care-for-ontarians>

⁵ Registered Nurses' Association of Ontario. (2023). Submission to the Ministry of Health on Bill 60, Your Health Act, 2023. <https://rnao.ca/media/3914/download?inline>

⁶ Registered Nurses' Association of Ontario. (2023). Nursing Career Pathways Opportunities and Barriers.
<https://rnao.ca/media/3828/download?inline>

⁷ Registered Nurses' Association of Ontario. (2020). Enhancing Community Care for Ontarians ECCO 3.0.
<https://rnao.ca/policy/ecco-30-enhancing-community-care-for-ontarians>