

RESOURCE GUIDE

MINISTER'S DIRECTIVE LONG-TERM CARE HOME COVID-19 IMMUNIZATION POLICY

Introduction

Achieving high immunization rates in Ontario's long-term care (LTC) homes through vaccination is part of a range of measures and actions that can help prevent and limit the spread of COVID-19 in LTC homes. Vaccination against COVID-19 helps reduce the number of new cases, and, most importantly, severe outcomes including hospitalizations and death due to COVID-19 in both residents and others who may be present in a long-term care home.

The new *Minister's Directive - Long-Term Care Home COVID-19 Immunization Policy* (referred to as the "Directive" from herein), requires all LTC home licensees to have an immunization policy. At a minimum, the policy must require staff, students, and volunteers to provide proof of one of three things:

1. **vaccination** against COVID-19; or
2. **a medical reason** for not being vaccinated against COVID-19; or
3. completion of a COVID-19 vaccination **educational program**.

The objectives of the Directive are to set out a provincially consistent approach to COVID-19 immunization policies in long-term care homes, optimize COVID-19 immunization rates in long-term care homes, and ensure that individuals have access to information required to make informed decisions about COVID-19 vaccination.

The purpose of this resource guide is to support licensees in implementing their immunization policies¹.

This guide also includes:

- **Appendix 1:** example minimum policy
- **Appendix 2:** resources to support the creation of a home's educational program
- **Appendix 3:** frequently asked questions (FAQs)

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Providing proof

Proof of vaccination

For people who were vaccinated in Ontario, the only acceptable proof of vaccination is the receipt provided by the Ministry of Health to the person who was vaccinated. The physical/hard copy receipt and email version of the receipt a person would have received will resemble the following:

Ontario 
Ministry of Health Ministère de la Santé
Name/Nom: [REDACTED]
Health Card Number/Numéro de la carte Santé: [REDACTED]
Date of Birth/Date de naissance: [REDACTED]
Date/Date: 2021-05-16, 3:43 p.m.
Agent/Agent: COVID-19_mRNA
Product Name/Nom du produit: PFIZER-BIONTECH COVID-19 VACCINE mRNA
Diluent Product: PFIZER Diluent 0.9% Sodium Chloride
Lot/Lot: [REDACTED]
Dosage/Dosage: 0.3ml
Route/Voie: Intramuscular / intramusculaire
Site/Site: Left deltoid / deltoïde gauche
You have received 1 valid dose(s) / Vous avez reçu 1 dose(s) valide(s)
Vaccine Administered By/Vaccin Administré par: [REDACTED] Registered Practical Nurse
Authorized Organization/Organisme agréé: [REDACTED]
Note: Only valid doses are counted / Remarque: Seules les doses valides sont comptées
<small>Please remain on the premises for the next 15 minutes for observation. You are free to leave the vaccination clinic at 3:58 PM / Veuillez rester sur place pendant les 15 prochaines minutes aux fins d'observation. Vous pouvez quitter la séance de vaccination à 3:58 PM.</small>

Proof of a medical reason for not being vaccinated

Proof must be provided by either a physician or a nurse practitioner (note: A nurse practitioner is a registered nurse who holds an extended certificate of registration under the *Nursing Act, 1991*).

In some instances, the medical reason for the person not being vaccinated may be time-limited. The Directive requires that the note from the physician/nurse practitioner specifies whether the reason is permanent or time-limited. If time-limited, the note should indicate how long it is expected to last. Licensees should communicate this requirement to anyone who is planning on submitting proof of a medical reason.

Proof of completion of an educational program

Licensees are encouraged to plan a way for people to provide proof that they have completed the educational program approved by the licensee. Options could include having the person sign a form saying they completed the educational program (i.e. an attestation) or having them answer questions that confirm they have understood the program's content.

Homes delivering their own educational programs can record the person's participation directly.

Choosing the content for the educational program

The educational program must be approved by the licensee and must address, at a minimum, all of the following:

- How COVID-19 vaccines work;
- Vaccine safety related to the development of the COVID-19 vaccines;
- Benefits of vaccination against COVID-19;
- Risks of not being vaccinated against COVID-19; and
- Possible side effects of COVID-19 vaccination.

When choosing the content for the educational program that they will be offering, licensees should:

- Consider whether the content meets the requirements specified in the Directive.
- Consult with the home's medical director, the local public health unit, Infection Prevention and Control (IPAC) specialists who attend their LTC home, and/or their local IPAC hub where appropriate/feasible.
- Consider the source of the information. Questions to ask include:
 - Is the content from a reputable source?
 - Is the content current?
 - Is the content clear and easy to understand?
 - Does the content represent the risks and benefits of vaccination fairly and in a transparent manner?
 - Does the content respect that it is an individual's personal choice as to whether to get vaccinated?
- Consider whether the content is appropriate for the linguistic and cultural characteristics of the people who will be taking the educational program.

Licensees should also consider and address any accessibility needs of people who will be taking the educational program.

Resources to help support the creation of a licensee's educational program are provided in **Appendix 2**.

Communicating about the policy

Per the Directive, licensees must communicate the content/requirements in a home's policy to everyone who is subject to the policy and make it available to residents, their substitute-decision makers and family members attending the home.

While licensees should continue to encourage everyone who works at or otherwise attends a LTC home to get vaccinated, communication about the policy should be provided in a way that respects and supports education and informed choice about COVID-19 vaccination.

Sample key messages:

- Given they live in a group setting and may have underlying medical conditions, residents are at increased risk for contracting the COVID-19 virus and experiencing serious outcomes.
- High rates of vaccination in our home is important to protect all people who live in, work, and visit it and to help reduce the risk of outbreaks and the need to isolate residents. Isolation means residents lose in-person social interaction and the ability to engage in activities; the effects of isolation may be greater for residents who have dementia and/or a cognitive impairment.
- Recently released guidance issued by the Ministry of Long-Term Care permits communal dining and indoor activities to resume with precautions in accordance with COVID-19 Directive #3 for Long-Term Care Homes under the *Long-Term Care Homes Act, 2007* issued by the Chief Medical Officer of Health. MLTC Guidance indicates that when at least 85% of residents and 70% of employees are fully immunized, some measures/precautions such as physical distancing requirements are further lifted during these activities, which supports resident wellbeing.
- Although we will respect your decision about whether to be vaccinated or not, we strongly encourage you and all people working in or otherwise attending our home to help protect everyone by getting vaccinated. We will support you in getting access to vaccination.

Ways to support staff, volunteers, and student placements with their decisions regarding vaccination include:

- Facilitating one-to-one conversations with a trusted peer, community leader, or health care professional.
- Tailoring messages to the unique staff characteristics and needs within your homes.
- Continuing to work with local public health units to offer onsite vaccine opportunities wherever possible.
- Identifying *vaccine champions* in your communities, including primary care physicians, seasoned staff, and faith/cultural leaders, who can talk to your staff directly (such as, through a virtual event) and share their personal stories.
- Providing the opportunity to go to an offsite vaccination clinic during paid work time and covering the transportation costs (where onsite options are not feasible), as well as providing paid leave should a staff person experience side effects from the vaccine.
 - Note: On April 29, 2021, the government amended the *Employment Standards Act, 2000* (ESA) to require employers to provide employees who are covered by the ESA with up to three days of paid leave, at their regular

wage, up to \$200 per day, for reasons related to COVID-19. Paid leave is available for certain reasons related to COVID-19, including going to get vaccinated and experiencing a side effect from a COVID-vaccination.

Statistical Information

Per the Directive, all licensees must collect, maintain, and disclose to the Ministry of Long-Term Care, at a minimum on a monthly basis, key data metrics that underpin this Directive.

Licensees will need to provide the following information:

- the total number of individuals subject to the long-term care home's policy for the reporting cycle;
- the total number of individuals who have submitted the proof as per the requirements in section 2.2 of the Directive broken down by which type of proof was provided; and
- for each type of proof, the number of individuals who submitted each type of proof who are staff, student placements, or volunteers.

Licensees must not provide any identifying information to the ministry and should communicate to all individuals who are subject to the home's policy that information will be shared with the ministry in aggregate form only and without any identifying information.

Appendix 1

Example Policy (Minimum Requirements)

ABC LONG-TERM CARE HOME'S COVID-19 IMMUNIZATION POLICY

Purpose

The purpose of this policy is to outline organizational expectations with regards to COVID-19 immunization of staff, student placements, and volunteers.

Contingent upon vaccine availability, all eligible staff, student placements, and volunteers are strongly encouraged to receive a COVID-19 vaccine, unless it is medically contraindicated.

Background

ABC Long-Term Care Home recognizes the importance of immunization of staff members, student placements, and volunteers due to the nature of their work with vulnerable seniors and potential for exposure in the community. This COVID-19 immunization policy aims to protect the home's population including residents, staff, and volunteers.

COVID-19 is an acute respiratory illness caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). It may be characterized by fever, cough, shortness of breath, and several other symptoms. Asymptomatic infection is also possible. The risk of severe disease increases with age but is not limited to the elderly and is elevated in those with underlying medical conditions.

Application of the Policy

Regardless of how often they are at the home and how much time they spend there, this policy applies to:

- workers (including employees, people on contract, and people employed by an employment agency or other third party)
- students on an educational placement at the home
- volunteers

Policy

It is important that all people make an informed decision about whether to receive a COVID-19 vaccine. In order to ensure that all people subject to this policy are adequately educated about COVID-19 and the COVID-19 vaccines, they must provide one the following:

1. Proof of COVID-19 vaccine administration as per the following requirements:
 - a. If the individual has only received the first dose of a two-dose COVID-19 vaccination series approved by Health Canada, proof that the first dose was administered and, as soon as reasonably possible, proof of administration of the second dose; **or**
 - b. Proof of all required doses of a COVID-19 vaccine approved by Health Canada.
2. Written proof of a medical reason, provided by either a physician or nurse practitioner that sets out:
 - a. that the person cannot be vaccinated against COVID-19; **and**
 - b. the effective time period for the medical reason (i.e., permanent or time-limited).
3. Proof that the individual has completed an educational program approved by *ABC Long-Term Care Home*.

Educational Program

The educational program has been approved by and/or provided by *ABC Long-Term Care Home* and addresses all of the following learning components:

- how COVID-19 vaccines work;
- vaccine safety related to the development of the COVID-19 vaccines;
- benefits of vaccination against COVID-19;
- risks of not being vaccinated against COVID-19; and
- possible side effects of COVID-19 vaccination.

Support for Vaccination

ABC Long-Term Care Home will provide the following supports for people subject to this policy to receive a vaccine: _____ (for example: paid time off, assistance with booking vaccine appointment, peer-to-peer support, etc.).

Non-compliance with the policy

In accordance with *ABC Long-Term Care Home*'s human resources policies, collective agreements and applicable legislation, directives, and policies _____.

Confidentiality Statement

ABC Long-Term Care Home is required, pursuant to the *Minister of Long-Term Care's Directive - Long-Term Care Home COVID-19 Immunization Policy*, to report statistical information to the Ministry of Long-Term Care. No identifying information will be provided to the ministry in relation to this policy; all statistical information will be provided in aggregate form.

Disclaimer:

This document is an example of a policy based on the *Minister of Long-Term Care's Directive - Long-Term Care Home COVID-19 Immunization Policy*. It is intended for illustrative purposes only. It is the responsibility of the licensee to ensure that the information included in their policy meets all requirements under the Minister's Directive and applicable legislation and reflects the individual circumstances and needs of each home it operates in accordance with the Directive.

Please be advised that this example of a policy **does not constitute legal advice** and should not be relied on as such. The information provided in this document does not impact the Ministry's authority to enforce the *Long-Term Care Homes Act, 2007* and Ontario Regulation 79/10 made under the Act. Ministry staff will continue to enforce such legislation based on the facts as they may find them at the time of any inspection or investigation.

It is the responsibility of the licensee to ensure compliance with all applicable legislation, regulations, and Minister's Directives. If the licensee requires assistance with respect to the interpretation of the legislation, regulations, and Minister's Directives and their application, the licensee may wish to consult legal counsel.

Appendix 2

Resources to support the creation of a licensee's educational program (in alphabetical order)

[About COVID-19 Vaccines](#) (Ontario Ministry of Health)

****bilingual**** [Building Confidence in Vaccines](#) [English] and [Accroître la confiance à l'égard des vaccins](#) [French] (Public Health Ontario)

[Communicating effectively about immunization: Canadian Immunization Guide](#) (Government of Canada)

****multilingual**** [Coronavirus disease \(COVID-19\): Awareness resources](#) (Government of Canada)

[COVID-19 Info](#) (Immunize Canada)

****bilingual**** [COVID-19 vaccines and workplace health and safety: Learn how COVID-19 covid 19 vaccines help protect you and make your workplace safer](#) [English] and [Les vaccins contre la COVID-19 et la santé et la sécurité au travail: Découvrez comment les vaccins contre la COVID-19 covid 19 contribuent à vous protéger et à rendre votre lieu de travail plus sécuritaire](#) [French] (Ontario Ministry of Labour, Training and Skills Development)

[COVID-19: Vaccines | Centre for Effective Practice - Digital Tools](#) (Centre for Effective Practice)

[COVID-19 Vaccines Explained](#) (World Health Organization)

[COVID-19 Vaccine Information Sheet](#) (Ontario Ministry of Health) **updated link*

****multilingual**** [COVID-19: Vaccine Resources](#) and in [American Sign Language](#) (City of Toronto)

****multilingual**** [Documents multilingues sur la vaccination contre la COVID-19](#) (Alliance des communautés culturelles pour l'égalité dans la santé et les services sociaux)

[Gashkiwidoon toolkit: covid-19 vaccine implementation](#) (Indigenous Primary Health Care Council)

****multilingual**** [LTC COVID-19 Vaccine Promotion Toolkit](#) (Ministry of Long-Term Care)

[Ontario's doctors answer COVID-19 vaccine questions](#) (Ontario Medical Association)

[Sunnybrook COVID-19 e-learning module](#) (Sunnybrook Health Sciences Centre) **new*

[Tools to Boost Vaccine Confidence in LTC Teams](#) (Ontario Centres for Learning, Research and Innovation in Long-Term Care)

[Updates on COVID-19](#) (National Collaborating Centre for Indigenous Health)

Disclaimer: The Ministry of Long-Term Care and the Province of Ontario do not assume any responsibility for the content of any of the resources listed above. The inclusion of the resources in the list above does not constitute an endorsement of the resource or the organization/entity that developed the resource. Long-term care home licensees should seek legal advice on the use of any resources/materials that hold a patent, copyright, trademark, or other proprietary rights. If a long-term care home licensee wishes to use any or all of the resources in the list above, the licensee should clearly and expressly attribute sources appropriately.

Appendix 3

FAQs

Minister of Long-Term Care's Directive - Long-Term Care Home COVID-19 Immunization Policy

1. What are the requirements in the new Minister's Directive?

Under the new Minister's Directive, long-term care home licensees will be required to establish and implement a COVID-19 immunization policy for staff, student placements, and volunteers. At a minimum, each home's policy must require that staff, student placements, and volunteers do one of three things:

1. **Provide proof of COVID-19 vaccine administration; OR**
2. **Provide a documented medical reason** for not being vaccinated against COVID-19; **OR**
3. **Participate in an educational program** about COVID-19 vaccination if not providing proof of vaccination or a medical reason.

2. Why did MLTC issue this new Minister's Directive?

Achieving high immunization rates in Ontario's long-term care homes through vaccination is part of a range of measures and actions that can help prevent and limit the spread of COVID-19 in homes. Vaccination against COVID-19 helps reduce the number of new cases, and, most importantly, severe outcomes including hospitalizations and death due to COVID-19 in both residents and all others who may be present in a long-term care home.

The objectives of the Directive are to:

- set out a provincially consistent approach to COVID-19 vaccination policies in long-term care homes;
- optimize COVID-19 vaccination rates in long-term care homes; and
- ensure that people have access to information required to make informed decisions about COVID-19 vaccination.

3. When are these requirements going into effect?

To provide for a period of transition, the effective date of the Minister's Directive is July 1, 2021. A July 1st effective date balances the need for licensees to have some lead time to develop or adapt their policies and undertake implementation activities, with the need to have the policy in place as soon as possible to protect homes' populations.

4. Who is responsible for ensuring that staff, student placements, and volunteers are notified of a home's immunization policy?

Every licensee shall ensure that the policy on COVID-19 immunization is communicated to all staff, student placements, and volunteers, and a copy is made available to residents, their substitute-decision makers and family members attending to the home free of charge.

While licensees should continue to encourage and support all people who work or otherwise attend LTC homes to get vaccinated, communication about the policy should be provided in a manner that supports education and informed choice about COVID-19 vaccination.

5. To whom do the new requirements apply?

The Directive requires that homes' immunization policies apply to all staff, student placements, and volunteers. The definition of "staff" in the Directive is the same as that under the *Long-Term Care Homes Act, 2007*; it means persons who work at the home

- as employees of the licensee,
- pursuant to a contract or agreement with the licensee, or
- pursuant to a contract or agreement between the licensee and an employment agency or other third party.

6. My home has volunteers that only come into the home for 2 hours once a week; would they be subject to the home's immunization policy?

Yes. The Directive requires that homes' immunization policies apply to all staff, student placements, and volunteers regardless of the frequency or duration they attend the home.

7. What must be included in a home's immunization policy?

Under the new Minister's Directive, every licensee must establish and implement a written policy on COVID-19 immunization and ensure that the policy is complied with.

At a minimum, the home's policy on COVID-19 must set out that those subject to the policy provide to the licensee one of three things:

(a) Proof of COVID-19 vaccine administration as per the following requirements:

- i. If the individual has only received the first dose of a two-dose COVID-19 vaccination series approved by Health Canada, proof that the first dose was administered and, as soon as reasonably possible, proof of administration of the second dose; or
- ii. If the individual has received the total required number of doses of a COVID-19 vaccine approved by Health Canada, proof of all required doses.

(b) Written proof of a medical reason, provided by either a physician or registered nurse in the extended class, that sets out:

- i. that the person cannot be vaccinated against COVID-19; and
- ii. the effective time period for the medical reason.

(c) Proof that the individual has completed an educational program approved by the licensee that addresses, at a minimum, all of the following:

- i. how COVID-19 vaccines work;
- ii. vaccine safety related to the development of the COVID-19 vaccines;
- iii. the benefits of vaccination against COVID-19;
- iv. risks of not being vaccinated against COVID-19; and
- v. possible side effects of COVID-19 vaccination.

There are also requirements regarding the reporting of statistical information related to the Directive.

8. How much time do existing and newly hired/ retained staff, student placements, and volunteers have to come into compliance with a LTCH's COVID-19 immunization policy?

Every licensee of a long-term care home must ensure that the policy provides staff, caregivers, student placements, and volunteers up to 30 calendar days counted from the effective date of the Directive (i.e. July 1, 2021) for existing staff, student placements, and volunteers or from the first day the individual begins attending the home for the purposes of working, providing caregiving, undertaking a student placement or volunteering to meet the applicable policy requirements set out in section 2 of the Directive.

9. What happens if someone has had their first dose of a two dose vaccine series but will not provide proof of a second dose even though it's been several months since he/she got their first dose?

If a person subject to the home's immunization policy provides proof of having received the first dose of a two-dose vaccine series and fails to provide proof of having received the second dose in accordance with the timeframe set out in the Directive, the home would then be required to ask the person to either provide a medical reason for not receiving the second dose or participate in an educational program.

10. Are there any circumstances where a licensee may grant a person subject to the home's policy more than 30 days to comply with the LTCH's COVID-19 immunization policy?

Yes. Licensees may grant extensions of a reasonable duration to the 30-day allowance on a case by case basis, if they determine there are unforeseen or extenuating circumstances outside of the control of the person subject to the policy that makes it difficult for the person to meet the requirements in requirements specified in section 2.2 of the Directive.

11. What is meant by unforeseen or extenuating circumstances with respect to the section in the Directive around the possibility of people having more than 30 days to come to meet the requirements in the home's policy?

There may be circumstances outside of the control of the individual that prevents a person from being able to meet the requirements in the licensee's immunization policy. Unforeseen and extenuating circumstances may include, but are not limited to, difficulties getting a

vaccination appointment due to local circumstances, a physician/nurse practitioner is not available (e.g. he/she is on vacation) to provide documentation of medical reason for not being vaccinated against COVID-19, the individual has misplaced their vaccination receipt and needs to obtain a new copy. Homes should make determinations about whether to allow for an extension of a reasonable duration on a case-by-case basis.

12. Are all persons who would be subject to a home's immunization policy eligible to receive a second dose of the COVID-19 vaccine at a shortened interval?

The Ontario government has added high-risk health care workers to the list of those eligible to receive their second dose of the COVID-19 vaccine earlier than the extended four-month interval. High-risk health care workers include long-term care home workers as defined in this [backgrounder](#).

13. How are licensees expected to choose content for their educational program?

When choosing the content for the educational program that they will be offering, licensees should:

- Consider whether the content meets the requirements specified in the Directive regarding what a home's educational program must address.
- Consult with the home's medical director, the local public health unit, Infection Prevention and Control (IPAC) specialists who attend their LTC home and/or their local IPAC hub where appropriate/feasible.
- Consider the source of the information. Questions to ask include:
 - Is the content from a reputable source?
 - Is the content current?
 - Is the content clear and easy to understand?
 - Does the content represent the risks and benefits of vaccination fairly and in a transparent manner?
 - Does the content respect that it is an individual's personal choice as to whether to get vaccinated?
- Consider whether the content is appropriate for the linguistic and cultural characteristics of the person(s) who will be undertaking the educational program.

Licensees should also consider and address any accessibility needs of people who will be taking the educational program.

14. Are there any requirements regarding what must be included in an educational program that licensees are able to use?

Per the Directive, licensees must ensure that the educational program addresses, at a minimum, all of the following:

- how COVID-19 vaccines work;
- vaccine safety related to the development of the COVID-19 vaccines;
- the benefits of vaccination against COVID-19;
- risks of not being vaccinated against COVID-19; and
- possible side effects of COVID-19 vaccination.

15. How will homes have access to an educational program?

Licensees are responsible for offering their educational program. Some homes may choose to develop their own educational program. Other homes may wish to use existing webinars, videos, websites, etc. The ministry has provided a list of resources in the resource guide accompanying the Directive to help guide licensees to existing content, however, it is up to the licensees to select or identify their educational program's content, approve the content, and administer the educational program.

16. What if a licensee has a staff, student placement, and/or volunteer whose first language is neither English nor French?

Licensees must deliver the educational program in a manner that ensures that staff, student placements, and volunteers are able to understand the content of the educational program. When choosing the content for the educational program that will be offered, licensees should consider whether the content is appropriate for the linguistic and cultural characteristics of the person(s) who will be undertaking the educational program. Licensees should also consider and address any accessibility needs of people who will be taking the educational program.

17. What if a person objects to being vaccinated against COVID-19 on religious/conscientious grounds?

If a staff, student placement, and/or volunteer objects to vaccination for any reason, including based on religious or conscientious grounds, the licensee would be required to ensure that the individual participates in an educational program approved by the licensee, as described in the Directive.

18. What if a staff, student placement, and/or volunteer has a medical condition that prevents them from being vaccinated?

If there is a medical reason that the person cannot be vaccinated, the licensee must ensure that the individual provides to the long-term care home written proof of a medical reason, provided by either a physician or registered nurse in the extended class (commonly referred to as a nurse practitioner). The written proof must include that the person cannot be vaccinated against COVID-19 and the effective time period for the medical reason (i.e., permanent or time-limited). If the reason is time-limited, the written proof must set out how long the reason is in place (e.g. 6 months, 1 year, etc.).

19. What is a registered nurse in the extended class?

As set out in the *Long-Term Care Home Act, 2007*, "registered nurse in the extended class" means a registered nurse who holds an extended certificate of registration under the *Nursing Act, 1991*. These professionals are commonly called "nurse practitioners".

20. What happens if a staff, student placement, and/or volunteer provides a time-limited medical reason for not being vaccinated?

If the staff, student placement, and/or volunteer is unable to receive their vaccine for a medical reason but that reason is valid for a limited time, the licensee must follow-up with the staff, student placement, and/or volunteer once that time period has expired and must ensure that, within 30 days of the time-limited medical reason expiring, the individual

provides proof of vaccination or proof that the individual completed an educational program approved by the licensee.

21. How are the new requirements in the Minister’s Directive being enforced?

Requirements set out under the Minister’s Directive are subject to monitoring and inspection by the ministry’s inspectors, pursuant to the *Long-Term Care Homes Act, 2007*.

22. What type of data are licensees required to report to the ministry regarding their immunization policies?

Every licensee must collect, maintain, and disclose to the Ministry of Long-Term Care, at a minimum on a monthly basis and in a manner set out by the ministry, the following statistical information:

- the total number of people subject to the long-term care home’s policy for the reporting cycle;
- the total number of people who have submitted the proof of vaccination, proof of a medical reason, or proof they completed the educational program; and
- for each type of proof above, the number of people who submitted each type of proof who are staff, student placements, or volunteers.

23. What is an acceptable proof of vaccination?

For people who were vaccinated in Ontario, the only acceptable proof of vaccination is presenting the actual or a copy of the physical or electronic receipt provided by the Ministry of Health to each person who has been vaccinated in Ontario. Individuals who misplace their receipt can obtain a replacement copy by logging into the provincial vaccine portal.

For persons vaccinated outside of Ontario, licensees must ensure the proof being provided by the other jurisdiction is valid and that the vaccine administered is one of the ones that has been approved by Health Canada.

24. What is an acceptable proof of having completed the educational program?

Licensees are encouraged to plan for an approach for people to provide proof that they have completed the educational program. This could take the form of having the individual sign a form which says the person completed the educational program (i.e. an attestation) or the completion of some questions that would gauge the person’s understanding of the content provided through the educational program (e.g. a short quiz).

Homes delivering their own programs can record the person’s participation directly in a manner they see fit.