

Community Vaccine Providers' News

Issue 4, October 2014

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Influenza Program Information

The community start date for this year's publically funded influenza campaign is November 3rd.

However, we plan on redistributing the vaccine to Physicians, First Nations communities and Community Vaccine Providers (CVPs) as soon as we have sufficient quantity.

Vaccine Ordering:

Similar to last season, we will be receiving our influenza vaccines in weekly allotments over the period of the last week of September to the first week of November. With the exception of the Flumist vaccine, which is recommended for children 2-17 years old and preferentially offered to children 2-8 years of age, we expect to have a sufficient supply of influenza vaccine products to redistribute to physicians and other community vaccine providers in October. With the delay in receiving the Flumist product, it is advised that another appropriate product be offered to that cohort until Flumist is available. Please note that due to the incremental arrival of the vaccines, we may not be able to fill all orders completely at the onset. We will endeavor to ensure fair and equitable distribution to all community partners and fill your complete order in as few installments as possible.

As was done last season, physicians and all other community vaccine providers (pharmacists, nurses in First Nations communities, acute and residential care facilities and Workplace Health & Safety, and others) are requested to place an order for their influenza vaccines. Your order for pneumococcal vaccine can be placed at the same time.

Click here to to access Influenza Order forms.

They can be found at: http://www.northernhealth.ca/ Professionals/ImmunizationResourcesTools.aspx Please fax your order at your earliest convenience to the local Health Unit at the number identified on the form. After receipt of your vaccine order, influenza vaccines will be available for pick up from the Health Units starting the week of October 27th, 2014. If sufficient supplies arrive earlier, you will be notified of an earlier pick up date.

REMINDERS:

- Call the Biological Product Monitor (BPM) at your local Health Unit to arrange your influenza order pick up date.
- Agriflu packaging requires nine times more storage space than the equivalent number of Fluviral doses. Please bring additional coolers to accommodate the extra storage needs when you pick up your influenza order.



Local biological product monitor contact:



- Keep your biological fridge between 2-8 degrees
- Notify the local BPM of any cold chain break incidents and report accordingly.
- Return all unused and partially used vials of publically funded vaccines to your BPM. Do not dispose.

About Influenza Vaccines:

Five publicly-funded vaccine products will be distributed in Northern Health for use this influenza season. Four of the vaccines contain the WHO recommended strains for the Northern Hemisphere:

 A/California/7/2009 (H1N1) pdm09-like virus

- A/Texas /50/2012 (H3N2) -like virus, and
- B/Massachusetts/2/2012-like virus

The fifth vaccine product (LAIV Flumist Quadrivalent) contains an additional strain:

• B/Brisbane/60/2008 - like virus

Influenza Vaccine Products:

- Fluviral®
- Fluad®
- Agriflu®
- Flumist trivalent® (not available for pharmacists)
- Flumist Quadrivalent® (not available for pharmacists)

For more information visit:

BCCDC Influenza (flu) information: http://www.bccdc.ca/imm-vac/ VaccinesBC/Influenza/default.htm

BCCDC Immunization Manual: Section VII - Biological Products at: http://www.bccdc.ca/NR/ rdonlyres/528C4C20-F2F8-4333-9927-E8DC455A5E76/0/SectionVII_ BiologicalProducts_September2014. pdf



Adverse Reactions following Immunization (AEFI):

All significant adverse reactions following immunization with any vaccine product are to be reported to the local health unit. MHO recommendations for future immunizations will be sent to the immunizer. The form for reporting AEFIs is available at: http://www.bccdc.ca/NR/ rdonlyres/0F7FC86E-924C-4232-87DD-F5859E41A7A2/0/ HLTH2319pdffill_19MAR13.pdf

Reporting of Vaccine Administered

Community vaccine providers are asked to report required details for all clients who receive the pneumococcal vaccine, and for children 8 years of age and younger who receive influenza vaccine so that public health records are complete and administration of unnecessary doses is avoided. You will be provided with this form at the time you receive your vaccine.

Click here to access influenza and pneumococcal reporting forms. The form can also be accessed at: http:// northernhealth.ca/Professionals/ ImmunizationResourcesTools.aspx

Egg allergies/Oculo-Respiratory Syndrome (ORS)

Community vaccine providers who have unresolved client questions about egg allergies and severe Oculo-Respiratory Syndrome (ORS) may contact their local health unit or MHO.

Education

A Northern Health Clinical Teaching Tool: http://www. northernhealth.ca/Professionals/ ImmunizationResourcesTools.aspx

BCCDC Immunization Competency Course: http://www.bccdc.ca/ imm-vac/ForHealthProfessionals/ ImmunizationCourses/ ImmsInFLUenzaCourse.htm

Resources

 The National Advisory Committee on Immunization (NACI) "Statement on Seasonal Influenza Vaccine for 2012-13" has been published in the Canada Communicable Disease Report (CCDR) Volume 38. ACS-5 August 2012 and is available at: http://www.phac-aspc. gc.ca/naci-ccni/assets/pdf/flugrippe-eng.pdf

- Recommended composition of influenza virus vaccines for use in the 2014-2015 northern hemisphere influenza season: http://www.who. int influenza/vaccines/virus/ recommendations/2014_15_ north/en/
- FluWatch: http://www.phacaspc.gc.ca/fluwatch/indexeng.php
- 4. Northern Health Influenza Information is available at: http://www.northernhealth. ca/YourHealth/PublicHealth/ InfluenzaInformation.aspx
- 5. Health LinkBC—Health Files: https://www.healthlinkbc. ca/servicesresources/ healthlinkbcfiles/#/healthfiles/ toc-i.html

or:

- Influenza (12b)
- Influenza Vaccine (12d)
- Influenza Immunization: Myths & Facts (12c)
- Pneumococcal Polysaccharide Vaccine (62b)
- 6. ImmunizeBC website at: http://www.immunizebc.ca
- BCCDC Communicable Disease Guidelines at: http://www. bccdc.ca/dis-cond/commmanual/CDManualChap2.htm

BCCDC Immunization Manual: Section VII - Biological Products at: http://www.bccdc.ca/NR/ rdonlyres/528C4C20-F2F8-4333-9927-E8DC455A5E76/0/SectionVII_ BiologicalProducts_September2014. pdf

Cervarix[™] Catch up Campaign Continues:

Human Papilloma Virus (HPV) is one of the most common sexually transmitted infections in Canada. Estimates are that three out of four sexually active women will have at least one HPV infection in their lifetime. Cervarix® is the approved HPV vaccine for use in the provincially funded one-timeonly program to immunize females age 26 and younger before series commencement and born before 1994. Cervarix® is offered as a three dose series and protects against HPV types 16 and 18 which contribute to 70% of cervical cancers. It does not protect against HPV types 6 and 11 which cause most genital warts and are included in the vaccine approved for the provincially funded school program.

The Cervarix® program will continue until the vaccine expires in August 2015, or until all of the available vaccine is used up. Eligible females can receive the vaccine through their doctor, pharmacist, some youth/sexual health clinics, and public health.

Health care providers' ability to influence decisions about acceptance of immunizations is widely recognized. Your assistance in promoting HPV vaccine with clients as opportunities arise would positively impact vaccine uptake. Through our joint efforts, we can help educate people on the importance of receiving this vaccine and in turn, protect more women against the ill effects associated with HPV infection. You can continue to promote and administer this vaccine until notified that our stock is depleted.

The Cervarix® program will continue until the vaccine expires in August 2015, or until all of the available vaccine is used up. Continue to promote and administer this vaccine until notified that our stock has depleted.

For more information on the HPV-One-Time Cervarix® program visit the following website: http://www.immunizebc.ca/ healthcare-professionals/hpv



Announcing the *I Boost Immunity campaign* Hard Launch coming in the fall.

Spread the word about immunity and earn free stuff.

The I Boost Immunity campaign is based on a peer-to-peer online information and story sharing rewards application at www. IBoostImmunity.ca that is designed to give a voice to the silent majority of people who support immunization in British Columbia. The platform allows people that register with the site to easily share articles and stories through Facebook, Twitter and email for points, achievement badges and rewards that can be redeemed through the site's online store.

The goal is to increase immunization rates in British Columbia. The *I Boost Immunity* campaign is based on the idea that giving people who vaccinate a platform to speak up about their choice is long overdue. It's a platform that encourages conversations between friends, co-workers and family members about why vaccination is important. I Boost Immunity uses the immediacy of social media to 'spread the word' because sharing evidence-based information and stories is the currency in which we trade.



For more information, please contact Kyrsten.thomson@northernhealth.ca





northernhealth.ca 10-414-6063 (IND Rev10/14)

What is the role of First Nations Health Authority in supporting immunization?

Brittany Deeter is the First Nations Health Authority (FNHA) Communicable Disease Coordinator(CDC) coordinator for Immunization. She is based in Vancouver and works on four levels to support immunization service delivery to First Nations communities in British Columbia.

The first level is supporting coordination and collaboration between Regional Health Authorities and First Nations communities to assist in building relationships and addressing issues related to the delivery of immunization programs.

The second is immunization and vaccine preventable disease program support and clinical direction. This support is provided to nurses working in First Nations communities and is comprised of both the development of resources and guidelines, and the provision of direct advice according to the needs of each community. All FNHA nurses are invited to a monthly call to discuss best practice and to address any issues that have come up in community.

The third is support for the continued implementation of immunization best practices in First Nations communities. This is done by assisting Community Health Nurses (CHNs) to become trained and to maintain their certification to immunize using the BCCDC Online Immunization Competency Course. Nurses working in First Nations communities are provided with additional immunization education at a biannual TB/IMMS 101 workshop and an annual CD workshop. In the last two years, the CD Immunization program has developed and implemented a Skills Checklist Assessor program. This program is offered to experienced nurses and involves an advanced in-person workshop to

review the National Immunization Competencies, self-assessment of Immunization proficiency and leads to certification to assess their colleague's immunization practice and sign off their Immunization Skills checklists.

The fourth level is representing First Nations Health Authority at the provincial level, ensuring that the voice of First Nations communities and nurses working within them are heard and considered in provincial immunization planning processes. Brittany sits on groups including: BC Immunization Committee. the BC Immunization Promotion Working Group, the BC Professional Education Working Group, the BC Informed Consent Working Group and the BC Vaccine Inventory Management working group.

The First Nations Health Authority is in an exciting period of transition and we are seeking new ways to best support our communities, our nurses and the partnership between First Nations communities and the local public health community. If you would like to discuss how to improve immunization program collaboration between your health unit and the local First Nations community health nurse please connect with your local Community Health Nurse and with us!

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First Nations Health Authority Health through wellness