

Practice Updates: Ordering Grade 7 School Vaccines, School COVID-19 Screening Guidance and Voluntary Testing

Update to York Region health care providers as of March 8, 2021

Updated Ordering Process for Grade 7 School Vaccines

Hepatitis B, Human Papillomavirus, and Meningococcal-C-ACYW vaccines would typically be offered in school-based or community immunization clinics provided by Public Health. As a reminder, York Region Public Health's school-based clinics and community clinics have been temporarily suspended due to the COVID-19 pandemic and ongoing COVID-19 immunization campaign. More details on when these clinics will resume and the eligibility for students who have missed this year's clinics will be provided when available.

It is important to continue to immunize your patients where possible to ensure they remain protected against vaccine preventable diseases. Please be advised, there is a new process for submitting orders for Grade 7 school vaccines for eligible students. Please see the steps below to ensure you can receive these vaccines efficiently for your practice.

To order Grade 7 School vaccines:

1. Complete the Grade 7 School Vaccines Order Form. A copy follows this notice and is available online at york.ca/vaccineinventory.
2. You may request vaccines for a maximum of 30 students at a time.
3. Maintain no more than a one month supply of any vaccine. Do not overstock your fridge.
4. Orders must include the most current five business days of refrigeration temperature logs.
5. Submit the completed order form (4 pages) and refrigeration temperature logs for processing via email to vaccineinformationline@york.ca or via fax to **1-866-258-2026**.
6. Student eligibility for the vaccines and refrigeration temperature logs will be reviewed by Public Health. After the eligibility assessment is completed, a copy of the assessed order form indicating the total number of approved doses will be sent to your office. Denied requests will be indicated with a strikethrough on the dose. Retain a copy of the assessed order form for your records as school vaccines will not be labelled with student names.
7. Completed orders will be processed in approximately four to five business days. You will be notified when your order is ready for pick up from one of our vaccine pick-up locations.
8. Administered doses must be reported to York Region Public Health by either the health care provider or the recipient. Please report via e-mail to immunizations1@york.ca or via fax to 905-895-6066. Students and/or their families can report the immunization at <https://eimmunization.york.ca>.

Updated Screening Guidance for Schools and Child Care Centres

York Region Public Health has recently updated our school screening tool to limit potential spread of COVID-19. All York Region students, staff and essential visitors must complete a York Region Public Health school screening tool every day before going to school. View our [school screening tool](https://york.ca/safeatschool) at york.ca/safeatschool and please share with your patients.

When students, staff and essential visitors should stay home:

- If a student/child/essential visitor or staff member has **ONE** symptom of COVID-19 they must stay home from school, get tested for COVID-19 at an [Assessment Centre](#) and their household member(s) must stay home and **not leave (even for essential reasons)** until the symptomatic person tests negative
- If anyone in the household has **ONE** symptom of COVID-19, **all members of the household must stay home and not leave (even for essential reasons except for medical emergency)** until the symptomatic person tests negative
- If anyone in the household has travelled outside of Canada, **all members of the household must stay home from school** until the 14-day self-isolation period has finished, except for essential reasons
- If anyone in the household is isolating as a close contact or because they are from a dismissed cohort, **all household members must stay home from school and child care for the duration of the 14 day isolation period** regardless of whether the close contact or individual from a dismissed cohort test negative.

Voluntary School-based COVID-19 Testing

In addition to enhanced screening protocols, York Region District School Board (YRDSB) and York Catholic District School Board (YCDSB) are working closely with the Ministry of Education and York Region Public Health to implement asymptomatic and symptomatic screening to support areas with high transmission, high case numbers and schools where access to current testing programs may be challenging.

To increase access to testing for students, school staff, essential visitors and their families, two drop-in community-based COVID-19 testing are now available in York Region, in addition to the traditional COVID-19 Assessment Centres.

Drop-in testing will be available on **Fridays and Wednesday** to start and will be re-evaluated based on the need in the school community. For the latest details on when and where testing will be offered, please refer your patients to york.ca/SafeatSchool or ask them to call Health Connection at **1-800-361-5653**. These school sites are walk-in only and do not require booking an appointment in advance.

Contact York Region Public Health

For more information, call our dedicated health professional COVID-19 line at **1-877-464-9675 ext. 77280** (8:30 a.m. to 4:30 p.m., Monday to Friday, after hours call 905-953-6478).

Continue to visit york.ca/healthprofessionals and york.ca/COVID19 for up to date information on COVID-19.



FOR OFFICE USE ONLY

Holding Point Code: YOR_NW

Requisition number:

Grade 7 School Vaccines Order Form

SECTION 1 – INSTRUCTIONS FOR HEALTHCARE PROVIDER

1. Complete all mandatory fields (*) – missing information will result in delays to your order.
2. Maintain no more than one month supply of any vaccine. Do not overstock your fridge.
3. Submit order form for processing to Vaccine Information Line by email to vaccineinformationline@york.ca or fax to **1-866-258-2026**.
4. Orders must include the most current five business days of refrigeration temperature logs.
5. You may request vaccines for a maximum of 30 students at a time.
6. Student eligibility for the vaccines will be reviewed. After the eligibility assessment is completed, a copy of the assessed order form indicating the total number of approved doses will be sent to your office. Denied requests will be indicated with a strikethrough on the dose. Retain a copy of the assessed order form for your records as school vaccines will not be labelled with student names.
7. Completed orders will be processed in approximately four to five business days.
8. Administered doses must be reported to York Region Public Health by e-mail to immunizations1@york.ca or fax to 905-895-6066.

SECTION 2 – HEALTHCARE PROVIDER INFORMATION *Holding Point Code: YOR_NW

*Healthcare provider/Practice name

*Order date (mm/dd/yyyy)

*Number of Immunizers

*Number of fridge(s)

*Type(s) of fridge:

Bar

Domestic

Purpose-built

*Contact person

*Phone number

*Fax

*Email

Unit number

*Street number

*Street address

*City/Town

*Postal code

SECTION 3 – PICK UP LOCATIONS *Select Pick Up Location – pick up hours may vary.

Newmarket

17150 Yonge Street

Richmond Hill

50 High Tech Road

Georgina

24262 Woodbine Avenue

Vaughan

9060 Jane Street

Markham

4261 Highway 7 East

SECTION 4 – ACCOUNTABILITY STATEMENT

By submitting this order, I verify on behalf of the practice that the refrigerator storing publicly-funded vaccines, at the location listed above, maintains temperatures between **+2.0°C to +8.0°C**; meets MOHLTC Vaccine Storage and Handling Protocols and Guidelines; maximum, minimum, and current temperatures are recorded at least twice daily. Furthermore, I verify that no more than one month supply of vaccine is stored at the location listed above; red-dotted and short-dated vaccines are used first; expired vaccines are never administered and are returned as wastage; a review of vaccine inventory and checking for expired vaccines has been completed before placing orders; and all due diligence has been taken to prevent the wastage of publicly-funded vaccines. I understand that I am required to maintain accurate temperature logs that must be kept onsite for a minimum of two years and made accessible to York Region Public Health upon request. Upon vaccine pick-up, I will have the necessary materials for the safe transport of publicly-funded vaccines including properly conditioned hard sided, insulated container, digital temperature monitoring device, and appropriate packaging material. Administered doses must be reported to York Region Public Health.

*Print Name

*Signature

*Date (mm/dd/yyyy)

Complete and submit pages 1 to 4

ELIGIBILITY CRITERIA FOR SCHOOL VACCINES

Publicly Funded Immunization Schedules for Ontario

Vaccine	Eligibility	Doses and Dosing Interval	
Hep-B (Energix™-B, 20mcg adult formulation)	Grade 7 and 8	2 dose series 1st dose in Grade 7 2nd dose 6 months after 1st dose Note: The 2 dose Hep-B schedule and vaccine formulation is licensed for use for children between 11 and 15 years of age. Note: Booster doses of Hep-B vaccine are not publicly funded for students who have previously completed an initial Hep-B or Hep-A&Hep-B (Twinrix) vaccination series	
Men-C-ACYW (Nimenrix™)	Grades 7 to 12	1 dose	
HPV-9 (Gardasil™-9)	Grades 7 to 12 females	<15 years of age at time of 1st dose: 2 dose series	≥15 years of age at time of 1st dose: 3 dose series
	Grade 7 to 12 males, born in or after 2004	1st dose 2nd dose, 6 months after 1st dose	1st dose 2nd dose, 2 months after 1st dose 3rd dose, 4 months after 2nd dose

SECTION 5 – SCHOOL VACCINE REQUEST

Student Initials*	Sex* (M/F)	Date of Birth* (YYYY/MM/DD)	Health Card Number*	Vaccine Requested* Please check (✓) (Only one dose in a multi-dose series will be released at a time.)			Eligibility Reviewed (For office use only)
				Hep B	Men-C-ACYW	HPV-9	
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							

SECTION 5 – SCHOOL VACCINE REQUEST

Student Initials*	Sex* (M/F)	Date of Birth* (YYYY/MM/DD)	Health Card Number*	Vaccine Requested* Please check (✓) (Only one dose in a multi-dose series will be released at a time.)			Eligibility Reviewed (For office use only)
				Hep B	Men-C-ACYW	HPV-9	
9.							
10.							
11.							
12.							
13.							
14.							
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23.							
24.							

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Student Initials*	Sex* (M/F)	Date of Birth* (YYYY/MM/DD)	Health Card Number*	Vaccine Requested* Please check (✓) (Only one dose in a multi-dose series will be released at a time.)			Eligibility Reviewed (For office use only)
				Hep B	Men-C-ACYW	HPV-9	
25.							
26.							
27.							
28.							
29.							
30.							
Total Number of Doses Approved (For office use only)							

FOR OFFICE USE ONLY

Printed by/date:

Clinical Review and Release Approved by:

Vaccine Inventory to Complete

Entered by/date:

Picked by/date:

Sorted by/date:

Packed by/date:

Hep-B Vaccine

Product Name:

Exp. Date:

Lot #:

Men-C-ACYW Vaccine

Product Name:

Exp. Date:

Lot #:

HPV-9 Vaccine

Product Name:

Exp. Date:

Lot #:

COVID-19 SCHOOL AND CHILD CARE SCREENING TOOL

Students/children, all school board and child care staff and essential visitors must screen for COVID-19 every day before going to school or child care. Parents/guardians can fill this out on behalf of a child.

Date: (mm/dd/yyyy): _____

SCREENING QUESTIONS

1. Is the student/child/staff/essential visitor experiencing any of these symptoms (including mild and/or resolved)?

(Check the appropriate answer. Choose any/all that are new, worsening and not related to other known causes or conditions they already have)

Fever and/or chills Temperature of 37.8 degrees Celsius/100 degrees Fahrenheit or higher	Yes	No	
Cough or barking cough (croup) Continuous, more than usual, making a whistling noise when breathing (not related to asthma, post-infectious reactive airways or other known causes or conditions they already have)	Yes	No	
Shortness of breath Out of breath, unable to breathe deeply (not related to asthma or other known causes or conditions they already have)	Yes	No	
Decrease or loss of taste or smell Not related to seasonal allergies, neurological disorders or other known causes or conditions they already have	Yes	No	
Sore throat or difficulty swallowing Painful swallowing (not related to seasonal allergies, acid reflux or other known causes or conditions they already have)	Yes	No	
Runny or stuffy/congested nose Not related to seasonal allergies, being outside in cold weather or other known causes or conditions they already have	Yes	No	
Headache Unusual, long-lasting (not related to tension-type headaches, chronic migraines or other known causes or conditions they already have)	Yes	No	
Nausea, vomiting and/or diarrhea Not related to irritable bowel syndrome, anxiety, menstrual cramps or other known causes or conditions they already have	Yes	No	
Extreme tiredness or muscle aches Unusual, fatigue, lack of energy, poor feeding in infants (not related to depression, insomnia, thyroid dysfunction, sudden injury or other known causes or conditions they already have)	Yes	No	
Pink eye (Adults 18+ only) Conjunctivitis, not related to other known causes or conditions	Yes	No	N/A
Frequent Falls (For older adults)	Yes	No	N/A

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york.ca/COVID19

2. In the last 14 days, has the student/child/staff/essential visitor travelled outside of Canada?	Yes	No
3. In the last 14 days, has the student/child/staff/essential visitor been identified as a “close contact” of someone who currently has COVID-19?	Yes	No
4. Has a doctor, health care provider or public health unit told you that the student/child/staff/essential visitor should currently be isolating (staying at home)?	Yes	No
5. Has someone in the household travelled outside of Canada in the last 14 days who is not exempt from self-isolation because they perform an essential job (e.g. truck driver, pilot) and currently live within the home (i.e. they are not isolating at a government-funded isolation centre)?	Yes	No
6. Has someone in the household been identified as a “close contact” of someone who currently has COVID-19?	Yes	No
7. Has someone in the household been part of a dismissed school or child care cohort in the past 14 days, and are currently at home isolating?	Yes	No
8. Is someone in the household sick with the COVID-19 symptoms outlined above (new or worsening) and does not yet have a negative COVID-19 test result or alternative diagnosis from a health-care provider?	Yes	No

If you selected “Yes” to any of the above, the student/ child/staff/essential visitor should stay home (do not go to school or child care)

SCREENING RESULTS

If you answered “YES” to question 1 and the student/child/staff/essential visitor has any ONE of the symptoms listed that are new or worsening and not related to known causes or conditions that they already have (including mild and/or resolved), do not go to school or child care

- The student/child/staff/essential visitor should self-isolate away from other household members and not leave except to get tested or for a medical emergency.
- All household members are required to stay home without exemption, even for essential reasons (except for medical care), until the symptomatic individual tests negative
- Book an appointment to get the student/child/staff/essential visitor a COVID-19 test:
 - If the result is negative, the student/child/staff/essential visitor and household members can return to normal activities (including school and child care) as long as they do not have a fever and symptoms are improving for at least 24 hours
 - If the result is positive, the student/child/staff/essential visitor who is COVID-19 positive must isolate for 10 days after symptoms first started AND household members must self-isolate as directed by Public Health; contact your school/child care provider to let them know about this result
- If the student/child/staff/essential visitor does not get tested for COVID-19, they must isolate for 10 days after symptoms first started AND household members should isolate for 14 days from their last exposure to the symptomatic household contact

If you answered “YES” to question 2, 3, or 4, do not go to school or child care

- The student/child/staff/essential visitor should self-isolate away from other household members for 14 days after last known exposure OR return from travel, or as directed by Public Health, and not leave except to get tested or for a medical emergency
- Book an appointment to get the student/child/staff/essential visitor a COVID-19 test (if not already completed)
- Follow the advice of Public Health. Individuals can return to school/child care after they are cleared by Public Health
- If student/child/staff/essential visitor develop symptoms, seek testing at a COVID-19 Assessment Centre and contact public health or a doctor/health-care provider for more advice

- All members of your household should stay home from school or child care for the duration of the close contact's 14 day isolation period regardless of whether or not the close contact tests negative.
- If the close contact remains asymptomatic and tests negative, household members may leave the home for essential reasons (e.g. groceries, essential work) but NOT attend school or child care.

For question 3 Only:

- All members of your household should stay home from school and child care for the duration of the close contact's 14 day isolation period regardless of whether or not the close contact tests negative.
- If the close contact remains asymptomatic and tests negative, household members may leave the home for essential reasons (e.g. groceries), but CANNOT attend school or child care.

If you answered "YES" to question 5, do not go to school or child care

- The student/child/staff/essential visitor should stay home from school child care and only leave the home for essential reasons for the full isolation period of the household member regardless of if the household member tests negative
- If the household member is symptomatic and/or has a positive COVID-19 test result, the student/child/staff/essential visitor and household members must self-isolate for 14 days after their last contact with the household member who is COVID-19 positive; the student/child/staff/essential visitor of the household member should also seek out testing as recommended by Public Health

If you answered "YES" to question 6 or 7, do not go to school or child care

- The student/child/staff/essential visitor should stay home from school and child care
- If the household contact identified as a "close contact" or in a dismissed cohort remains asymptomatic and tests negative, household members may leave the home for essential reasons (e.g. groceries) but CANNOT attend school or child care until the "close contact" or individual from the dismissed cohort has completed their 14 day self-isolation.
- If the household member who is a "close contact" or in a dismissed cohort becomes symptomatic and/or has a positive COVID-19 test result everyone in the household must self isolate. Notify the school or child care who will contact Public Health for next steps.

If you answered "YES" to question 8, do not go to school or child care

- All household contacts of symptomatic individuals are required to self isolate without exemption, even for essential reasons (except medical care), until the symptomatic individual receives a negative COVID-19 test result, or an alternative diagnosis by a health care professional
- If the household member's result is negative, the student/child/staff/essential visitor and household members can return to normal activities as long as they do not have a fever and symptoms are improving for at least 24 hours
- If the household member's result is positive, the student/child/staff/essential visitor and household members must self-isolate for 14 days after their last contact with the household member who is COVID-19 positive; the student/child/staff/essential visitor of the household member should also seek out testing as recommended by Public Health

Visit york.ca/SafeAtSchool for more information on ways to protect yourself, your family and your school community.