



## Memorandum

Ministry of Health  
Primary Care Division  
Population and Public Health Division

1205926

**Date:** August 20, 2021

**To:** Health Authorities and Division of Family Practice Primary Care Partners

**Re:** 2021-22 Influenza Immunization Planning

Community immunizers make important contributions to the Province's immunization programs, which help to protect British Columbians from vaccine-preventable diseases. As we have seen this past year with the COVID-19 pandemic, immunization is especially important in protecting those who are most vulnerable to serious illness and hospitalization.

We would like to recognize and thank the physicians, nurse practitioners and other community immunizers who have supported our immunization programs and have been trusted sources of information, guidance and support for their patients.

Through the fall and winter last year, strong local collaboration and planning between health authorities, primary care providers and other partners saw 1.5 million doses of influenza vaccine administered amid the challenges of the COVID-19 pandemic. Physicians, other primary care providers and pharmacists were instrumental in the administration of these doses and we extend a huge thank you for your efforts. This year, we have an even more ambitious target of providing approximately 2.5 million influenza vaccine doses to British Columbians.

### **Planning for the 2021-22 Influenza Immunization Program**

Our ambitious target will require the same level of local partnership and collaboration as was seen last year especially with COVID-19 still circulating in our communities. As we approach the influenza season, the Ministry of Health, the Office of the Provincial Health Officer, the BC Centre of Disease Control and regional health authorities are engaging with partners on the details of the 2021-22 B.C. Influenza Immunization Plan and regional immunization plans.

Our goal is to increase immunization levels against all vaccine-preventable diseases on the provincial immunization schedule, with emphasis on influenza immunization to high-risk groups like seniors, young children, health-care workers, residents in long-term care settings and individuals with underlying health risk factors.

## **The Role of Community Immunizers**

Community immunizers will participate in the 2021-22 influenza immunization program in the same way that they did last year – whether that is in clinics, pharmacies, primary care offices or by supporting immunization clinics in partnership with public health. Of the influenza vaccine administered in 2020-21, 10% was administered through public health, 72% was administered through pharmacies and 18% was through medical clinics by physicians, nurse practitioners and nurses.

Building off the successes of last season’s local collaborative planning approach, the ministry is seeking input from primary care providers, divisions of family practice and health authorities on this year’s plan and approach, including distribution, inventory tracking and management, and working with partners to develop immunization plans at local and regional levels. **Engagement sessions are expected to be held in late-August and through September, with exact dates to be finalized shortly. Details will be shared through interdivisional strategic councils.**

Partnership between health authorities, divisions of family practice and other community primary care providers is crucial to this work. We ask health authorities, primary care, public health and community care providers to continue to work together on immunization planning and implementation as the fall approaches and throughout the 2021-22 influenza season.

## **Expectations for the 2021-22 Influenza Season**

As British Columbians return to pre-pandemic levels of socializing, it is expected that seasonal influenza and other respiratory viruses will be co-circulating alongside COVID-19 this fall and winter.

Seasonal influenza and COVID-19 have the potential to add substantially to the pressures usually faced by the health system, particularly if infection waves from both viruses coincide. Therefore, influenza immunization is a priority to reduce serious illness and death associated with influenza and to reduce emergency room visits and hospitalizations overall.

## **Changes to Vaccine Distribution in B.C.**

Publicly funded vaccine distribution in B.C. is transitioning to a direct distribution model. This will be implemented in a phased approach while ensuring equitable and appropriate access to vaccines throughout the province, including considerations for rural, remote and Indigenous communities.

The first phase will start with the 2021-22 influenza season and will begin with community pharmacies who will be able to order influenza vaccine directly from pharmaceutical distributors.

The model will leverage the distribution infrastructure already in place for pharmaceuticals across pharmacies as well as innovation from the COVID-19 vaccine program (e.g., pharmacies were able to order COVID-19 vaccine directly from distributors). Future phases will expand direct distribution to other community immunizers, including physicians and nurse practitioners, as early as the 2022-23 influenza season and include more publicly funded vaccines.

For the 2021-22 influenza season, community immunizers, other than pharmacies, will continue to pick up their influenza vaccines from public health units as has occurred in previous years.

Many community immunizers have expressed an interest in direct-to-office delivery of vaccines as a flexible and convenient way to ensure access to vaccines for people in B.C. This model will help support public health's goal of providing protection to patients and broader communities throughout the province.

The current distribution model requires significant human resources from public health and community providers, which can result in system delays and, in some cases, vaccine wastage. Direct distribution to pharmacies in other provinces has increased efficiencies and reduced wastage leading to system-wide cost savings. This new system will support human resources in being redirected to provide direct health-care services and also improve reporting and traceability of vaccine.

### **Consultation on Direct Distribution for Publicly Funded Vaccines**

The BC Centre for Disease Control will also be engaging with physicians, pharmacists, nurse practitioners and other partners, including health authorities and distributors, to discuss options for how immunizers receive publicly funded vaccines, cold chain management, information technology infrastructure and reporting requirements. More information on timing and how you can participate will be shared in the coming weeks. A questions and answers document, which provides more information on the direct distribution model, is attached.

We thank primary care providers, including family physicians and nurse practitioners, for their role in contributing to the success of B.C.'s influenza immunization efforts. We look forward to working collaboratively with our partners as we have in previous years and encourage you to continue to leverage primary care networks and local partnership tables such as collaborative services committees in this process.

We will continue to provide you with updates and more information on our influenza immunization program in the coming weeks and months. If you have any questions, please contact your General Practice Services Committee liaison, your primary care lead or public health lead.

Sincerely,



Ted Patterson  
Assistant Deputy Minister  
Primary Care Division  
Ministry of Health



Lorie Hrycuik  
Executive Lead  
Population and Public Health  
Ministry of Health