

ANNUAL INFLUENZA IMMUNIZATION POLICY 2026-2027

1.0 PURPOSE

- 1.1. To provide provincial direction to immunizers who administer PEI's publicly funded influenza vaccine to Islanders with the goal of reducing the incidence and impact of influenza illness in the province.
- 1.2. Collaboration, coordination and communication across all phases of the immunization process from vaccine distribution to front line immunization strengthens timely and efficient delivery of the annual influenza immunization program.
- 1.3. This policy facilitates improved accountability to minimize vaccine wastage of publicly funded vaccine.

2.0 POLICY

- 2.1. The Chief Public Health Office (CPHO) will provide influenza vaccine free of charge annually to all individuals 6 months of age and older. All individuals living in Prince Edward Island who present for publicly funded Influenza vaccine will receive the vaccine free of charge.
 - 2.1.1. Individuals living in PEI without a PEI Health Card (students, RCMP, Department of National Defense [DND], summer residents or other non-Canadian citizens) who present for publicly funded influenza vaccine will not be charged for the vaccine or an administration fee.
 - 2.1.2. Individuals who do not live in PEI who present for influenza immunization will not be charged for the cost of the vaccine but may be charged an administration fee by the immunizer.

3.0 VACCINE PROVISION

- 3.1. The vaccine will be provided to immunizers who agree to adhere to this policy.
 - 3.1.1. The vaccine must be maintained according to vaccine [Storage and Handling Guidelines](#) to ensure adequate cold-chain management.

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- 3.1.2. All immunizers must be familiar with the annual [National Advisory Committee on Immunization \(NACI\) statement](#) as well as relevant vaccine product monographs.
- 3.1.3. All immunizers are encouraged to complete the on-line PEI Immunization Learning Module for Healthcare Providers or equivalent education.
- 3.1.4. All immunizers are required to review education material and/or resources as needed to ensure immunization administration competency. Immunizers must follow their respective professional guidelines with respect to immunization competency and professional responsibility. Immunizers may need to be deemed competent by their employing agency or college to provide immunization.
- 3.1.5. Immunizers must have access to client immunization record histories in order to review previous immunizations prior to administration as needed.
- 3.1.6. Immunizers must consider all encounters with a client as an opportunity for influenza vaccination in order to maximize access and uptake of influenza vaccine in PEI.
- 3.1.7. Vaccine is provided to immunization clinics, hospitals, community pharmacies, and physician/nurse practitioner offices and clinics.
- 3.1.8. Vaccine is provided to Abegweit and Lennox Island First Nations Health Centres.
- 3.1.9. Vaccine is provided to Provincial Correctional Facilities
- 3.1.10. Vaccine is provided to Long Term Care (LTC) and Community Care (CC).

4.0 WORKPLACE IMMUNIZATION

- 4.1. As part of the publicly funded Universal Influenza Immunization Program, any immunizer or employer of the immunizer, or person working for or contracted by the immunizer or employer of the immunizer:

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- 4.1.1. must not charge a client for the administration of the vaccine or for the vaccine itself.
- 4.1.2. may, if administering influenza vaccine to clients in a workplace setting, charge the employer of those clients for the administration of the vaccine as long as there is no charge for the vaccine itself. This is to recognize that employers may want to have workplace immunization clinics for convenience.
- 4.1.3. must not invoice CPHO for costs incurred if offering influenza vaccine outside of their clinic setting.
- 4.1.4. must provide documentation to the CPHO upon request of appropriate storage and handling of the vaccine according to [Storage and Handling Guidelines](#).

5.0 REPORTING

- 5.1. Immunizers must keep records of all influenza immunizations administered according to the [Public Health Act Immunization Regulations](#).
- 5.2. Immunizers must report data to the Chief Public Health Office for all influenza immunization administered according to the [Public Health Act Immunization Regulations](#) (Section 1.1)
- 5.3. All immunizers must monitor the health and safety of the individuals to whom influenza vaccine is administered; immunizers shall have in place protocols for management of anaphylaxis. Influenza vaccine must only be administered in settings where these protocols are in place.
- 5.4. All unexpected adverse events following administration of influenza vaccine must be reported to the CPHO within 24 hours as soon as observed or reported using the [Adverse Event Following Immunization \(AEFI\) form](#). This requirement is outlined in the [Notifiable Diseases and Conditions and Communicable Diseases Regulations](#) under the [Public Health Act](#).
- 5.5. All unused and/or expired influenza vaccine should not be returned to Pharmacare. Product can be destroyed on site.

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- 5.6. Unused and/or expired vaccine must be reported to the CPHO for inventory management, (quantity and type of vaccine) via the [Vaccine Wastage Reporting Form](#).

6.0 APPLICATION

- 6.1. This policy applies to all immunizers who obtain publicly funded vaccine from the Provincial Immunization Program.
- 6.2. Those who administer influenza vaccine, including those administering vaccine outside of the publicly funded vaccine supply are subject to the recording and reporting requirements under the [PEI Public Health Act and Immunization Regulations](#).
- 6.3. Compliance to this policy will be monitored by the Chief Public Health Office. Those found to be non-compliant will have restrictions placed on their ability to receive publicly funded vaccines which may include not receiving further publicly funded vaccine until there is evidence that corrective measures are implemented.

7.0 DEFINITIONS

- 7.1. **Cold Chain Management** - the process used to maintain optimal conditions during the transport, storage, and handling of vaccines, from the point of manufacture until such time as the vaccine is administered to a client.
- 7.2. **Immunizer** - a health professional eligible to administer influenza vaccine under this policy and includes pharmacists, nurses and physicians.
- 7.3. **Publicly funded influenza vaccine** - vaccine that is purchased annually by the Chief Public Health Office and distributed to immunizers without charge pursuant to this policy.

8.0 BACKGROUND

- 8.1. The National Advisory Committee on Immunization recommends that everyone over the age of 6 months be immunized against influenza, especially those at high risk of complications of influenza and those who care for them including health care workers.

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- 8.2. The goal of the annual influenza immunization program is to prevent serious illness caused by influenza and its complications, including death.
- 8.3. Vaccination is the safest, longest lasting and most effective way to prevent influenza and to minimize complications of influenza.
- 8.4. Each year there is a new vaccine to protect against the expected influenza virus strains of the coming influenza season. Even if the strains have not changed, receiving the influenza vaccine every year is necessary as the duration of protection may not span two influenza seasons.
- 8.5. The Chief Public Health Office participates in a pan-Canadian contract to purchase influenza vaccine annually and provides this free of charge to immunizers to administer to the public.
- 8.6. The influenza vaccine is received by Pharmacare (and pharmacy distributors for community pharmacy) in the fall and distributed according to orders placed by immunizers.

9.0 KEY SEARCH WORDS

- 9.1. Influenza Immunization Policy; Immunization Regulations; Notifiable Diseases and Conditions and Communicable Disease Regulations.

10.0 CROSS REFERENCE

- 10.1. PEI Public Health Act; Notifiable Diseases and Conditions and Communicable Disease Regulations; Immunization Regulations.