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**MINISTRY OF HEALTH  
INFORMATION BRIEFING NOTE**

**Cliff # 1060371**

**PREPARED FOR:** Honourable Terry Lake, Minister – **FOR INFORMATION**

**TITLE:** Potential Additions to BC's Publicly Funded Immunization Program

**PURPOSE:** To provide the Minister with information on potential additions to BC's immunization program

**BACKGROUND:**

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BC considers new and improved vaccine programs for inclusion in the publicly funded schedule using a number of factors to inform the decision, including efficacy, burden of illness, cost-effectiveness, feasibility of delivery and public acceptability. BC's Communicable Disease Policy Advisory Committee (the Committee), chaired by the Provincial Health Officer, provides annual recommendations for new or improved vaccine programs to the Ministry of Health for consideration. In June 2016, the Committee met to finalize its recommendations for this fiscal year.

**DISCUSSION:**

Committee recommendations are presented below in priority order as ranked by Ministry of Health staff and the Provincial Health Officer. A summary table of potential additions is provided in Appendix A; additional context and financial implications is provided in Appendix B; Committee recommendations as ranked by Committee members are attached in Appendix C; pros and cons of program implementation are provided in Appendix D. Based on this analysis, priority consideration is on the committee's first recommendation:

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Given a variety of factors outline in Appendix B, the Ministry may want to defer consideration of the remaining committee recommendations:

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3a) Implement universal influenza immunization eligibility

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**FINANCIAL IMPLICATIONS:**  
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**ADVICE:**

The Committee has provided its annual recommendations for new vaccine programs to the Ministry for consideration. NR

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A

ministerial briefing on the Committee and Ministry recommendations is requested.

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**Program Contact (for content):** Warren O'Briain

**Drafter:** Haley Miller

**Date:** October 20, 2016

Attachments:

- Appendix A: Summary of Potential Additions to the Provincial Immunization Program
- Appendix B: Additional Context and Financial Implications
- Appendix C: Recommendations Ranked by BC's Communicable Disease Policy Advisory Committee Members
- Appendix D: Pros and Cons of Program Implementation

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## Appendix A: Summary of Potential Additions to the Provincial Immunization Program

Priority	Recommended Vaccine Program	Cost-Effective Program? (threshold \$50,000/QALY <sup>1</sup> )	Provider(s)	Current Program Budget for fiscal 2016/17	Incremental Cost per fiscal year	Ongoing Program Budget with Incremental Cost
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	Universal Influenza Vaccination Eligibility	s.13,s.17				
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<sup>1</sup> QALY (quality-adjusted life years) is a unit of measurement that considers the number of life years remaining multiplied by a factor representing quality of life. In Canada, an intervention is considered cost-effective from the point of view of a health care purchaser if it costs less than Canadian \$50,000 to gain one QALY.

## **Appendix B: Additional Context and Financial Implications**

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3a) Implement universal influenza immunization eligibility

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### 3a) Implement universal influenza immunization eligibility

#### **Background:**

BC offers influenza immunization to those at serious risk of influenza illness, those who are close contacts of individuals who are at high-risk (including workers in and visitors to health care facilities), and other groups that provide essential community services, such as paramedics.

The recommendation for universal influenza vaccine eligibility was put forward for Ministry consideration in 2014 following the Leadership Council decision that visitors to health care facilities would be eligible for free influenza vaccine under the Influenza Prevention Policy. At this time, the Minister directed the BC Centre for Disease Control (BCCDC) to monitor uptake of influenza vaccine prior to making a decision about universal eligibility.

Based on this monitoring of the provincial influenza program, BCCDC has reported that:

- The number of doses distributed annually has increased from 1.1 million to 1.5 million in the years since the Influenza Prevention Policy was implemented.
- BC's current targeted program continues to compare reasonably well with coverage rates in provinces that have moved to universal programs.
- There is a lack of robust evidence that identifies universal influenza vaccine eligibility as having an incremental benefit over targeted influenza immunization.
- Accumulating evidence suggests influenza vaccine effectiveness is influenced by prior influenza immunization history, and that this influence can be positive or negative, depending on whether or not previous immunizations were a match or mismatch to the circulating strains.

BCCDC and other national and international partners are currently participating in a World Health Organization review of the emerging evidence related to repeat influenza vaccine effects and will be convening in October 2016 to discuss a research strategy to inform policy and program implications. Ministry staff recommend waiting for the outcome of the meeting in October 2016 before deciding to implement universal influenza immunization eligibility.

#### **NACI Recommendations:**

NACI recommends the influenza vaccine for everyone 6 months of age and older who do not have contraindications to the vaccine.

#### **Financial Implications:**

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**Appendix C: Recommendations Ranked by BC's Communicable Disease Policy Advisory Committee Members**

Priority	Rank/10	Program
1	8.2	NR
2	5.5	Implement Universal Influenza Vaccination Eligibility
3	5.3	NR
4	5.0	
5	4.3	

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**3a) Implement universal influenza immunization eligibility**  
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## NEW VACCINES/ VACCINE PROGRAMS - DISCUSSION

### ITEM # 5G

**DATE:** June 21 2016

**PREPARED FOR:** Communicable Disease Policy Advisory Committee - **FOR RECOMMENDATION**

**PREPARED BY:** Monika Naus, Medical Director, IPVPS, BCCDC

**PURPOSE:** To obtain CD Policy Advisory Committee (CDP) input on prioritization of new/ expanded potential immunization programs, for provision of these recommendations to the Ministry of Health for consideration for the fiscal year 2017/8.

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NACI statements are available here:

<http://www.phac-aspc.gc.ca/naci-ccni/index-eng.php>

**NEW PROGRAM / EXPANSIONS FOR CONSIDERATION:**

For each of the following new vaccine / program expansions, the summary below captures the conclusions of the task group, with some information updated subsequently. The task group was chaired by Monika Naus, and participants included: Shovita Padhi, Silvina Mema, Craig Thompson, Julie Bettinger, Meena Dawar, Gina Ogilvie and Brent Gabel.

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### **3. Influenza vaccine: universal expansion**

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TOPIC / ISSUE	DISCUSSION	ACTION	PERSON
	NR	M Naus to have MHOs review recommendation language.	
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TOPIC / ISSUE	DISCUSSION	ACTION	PERSON

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**CD Policy**

**June 21, 2016**

**New Vaccine Program Discussion**

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**3. Universal influenza vaccine program**

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