

# IMMSFORMATION!

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BC Centre for Disease Control  
An agency of the Provincial Health Services Authority



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Influenza season is almost upon us – vaccine is being distributed throughout BC. As in recent years, quadrivalent vaccines will be offered to those 6 months – 17 years old, and trivalent to all others.



Read about Kids Boost Immunity in this newsletter. It's a way to inform kids about the importance of immunization while providing vaccines to low income countries!

**Welcome to the inaugural immunization newsletter for British Columbia's immunizing community!** Through this regular newsletter, we will be providing updates on a variety of vaccine and immunization related topics. This newsletter will supplement but is not intended to replace the clinical guidelines supporting the publicly funded immunization programs in BC found in [Chapter 2 - Immunization](#) of the Communicable Disease Manual on the [bccdc.ca](http://bccdc.ca) web site, nor the other information including summary epidemiological reports about vaccine preventable diseases in BC also on [bccdc.ca](http://bccdc.ca) for health professionals. As well, please continue to refer your patients to [immunizebc.ca](http://immunizebc.ca) for information about vaccines and the location of immunization clinic services in their community. We welcome suggestions for content: please send these to [mnds.assist@bccdc.ca](mailto:mnds.assist@bccdc.ca)



## NEW AND UPCOMING

[Kids Boost Immunity](#) (KBI) is a new online learning resource for BC students that pairs learning about the importance of immunizations

and earning vaccines for children in need through UNICEF. All 30+ KBI lessons are aligned with either the science 8 or social studies 6 curricula on topics such as the immune system, vaccines, infectious diseases and outbreaks, and global inequalities in health.



After completing a lesson, students take online quizzes using their school computer or their own device to earn vaccines in support of UNICEF Canada. Learning outcomes are assessed through team and individual leaderboards that track student achievement. KBI lets students compete with other schools across the country!

Kids Boost Immunity is a national education initiative administered through the Public Health Association of British Columbia, with financial support from the BC Ministry of Health and the Public Health Agency of Canada. The program is coordinated through the BCCDC and developed by the BC Immunization Committee's Immunization Promotion Working Group.

## VACCINE UPTAKE

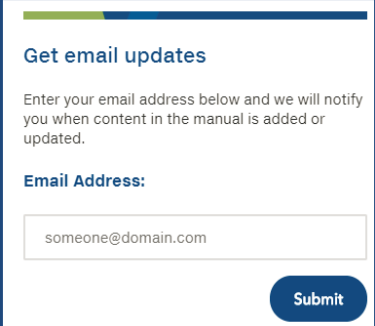
Since the 2017/2018 school year, all grade 6 students in BC are eligible for the Human Papillomavirus (HPV) vaccine series, including boys. Did you know that grade 6 girls have been offered HPV vaccines through school programs since 2008? Although we are in the 11<sup>th</sup> year of the program, HPV vaccine series completion rates in grade 6 girls are below the levels for all other vaccines offered to school-age children. In the 2016/2017 school year, only 66.5% of grade 6 girls completed their HPV vaccine series. As trusted sources of information, health care providers have a vital role in advising children, adolescents, and parents about immunization, including the school-based immunizations. Your strong recommendation to clients and families about the HPV vaccine program is important.

Look out for the school-aged children immunization coverage report coming out this fall to see the uptake of HPV vaccine and other school aged vaccines from the 2017/2018 school year. Click [here](#) for more information on Immunization Coverage.

## GUIDELINES

The [BC Immunization Manual](#) provides best practice guidelines to direct the provision of immunization services. Parts 1 to 5

include specific guidelines related to clinical decision making for the provision of vaccines. The appendices are reference materials that support evidence-based best practice. The manual is updated regularly with the online version being the most current. Revisions to the manual are summarized in the [Administrative Circulars](#). You can subscribe to receive email notifications when content in the manual has been revised; Click on the graphic below and scroll to the bottom right of the page.



The screenshot shows a form titled "Get email updates". It contains the text: "Enter your email address below and we will notify you when content in the manual is added or updated." Below this is a label "Email Address:" followed by a text input field containing the placeholder "someone@domain.com". A blue "Submit" button is located at the bottom right of the form.

What's new in the guidelines?

For information on the 2018/19 seasonal influenza vaccines click [here](#) and go to Influenza Vaccines.

## EDUCATION

Flu season is around the corner, how can you prepare for offering influenza vaccine?

The BCCDC has two online influenza courses available to health care providers. The [Foundations of Influenza](#) course is for those new to influenza immunization as well as those who want more in-depth

information on the disease and/or vaccine. The [Seasonal Influenza Update](#) course is for those who have taken the Foundations course and/or experienced clinicians wanting an update for the current influenza season. Another way to get yourself and your office ready for flu season is to take the 30 minute [Vaccine Storage and Handling Course](#). These courses are available for free to all health care providers on [bccdclearning.ca](http://bccdclearning.ca).



## KUDOS

In the fall of 2017, Interior Health Authority (IHA) experienced a meningococcal outbreak in the Okanagan. The age cohort who was most at risk during this outbreak was quickly identified as those 15-19 years of age prompting an immunization campaign targeting this age group. Between December 14, 2017 and February 14, 2018, Public Health held a total of 255 clinics and immunized 11,417 people with quadrivalent meningococcal vaccine to cover the W strain that caused this outbreak. A collaborative approach with schools and other stakeholders was used to coordinate the many immunization clinics and follow up of contacts. As a result the IHA team was successful in reducing the spread of the disease as evidenced by no further meningococcal cases related to this cluster.

Kudos to all IHA staff and external partners for their rapid response to the outbreak.