



Prescriptive Authority for Pharmacists in Ontario to Prescribe Vaccines

**OPA Proposal
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Executive Summary

Immunization is one of the greatest public health success stories in history, eliminating diseases, saving lives and delivering significant savings to our health care system. Yet, despite its effectiveness, Ontario continues to experience declining immunization rates, putting Ontarians at risk of vaccine-preventable diseases. Lack of access to vaccination is a key barrier to immunization that must be addressed. To support the evolving healthcare needs of Ontarians, the province should expand the scope of practice of pharmacists to include independent prescribing of vaccines. Removing this barrier to vaccination will strengthen public health immunization efforts, improve patient health outcomes and enable the health system to operate more efficiently.

Pharmacists are highly trained and trusted healthcare providers embedded in communities across the province, including rural, remote and underserved areas. With proven leadership in delivering large-scale immunization programs, pharmacists have demonstrated the readiness, competence, and capacity to safely undertake expanded scope to prescribe vaccines, improving access to care and reducing pressures on other parts of the health system.

Enabling pharmacists with prescriptive authority for vaccines represents a cost-effective solution with the potential to generate meaningful health system savings. Improved access can increase immunization rates, resulting in reduced morbidity and mortality; fewer emergency department visits, hospitalizations, and intensive care unit admissions; and improved productivity. However, to ensure equitable access for patients and the sustainable delivery of this service, regulatory changes must be accompanied by a publicly funded remuneration framework.

OPA recognizes that uptake of expanded scope will vary across practice settings and among pharmacists based on operational realities, patient populations, and readiness. Those prepared to adopt the new scope should be enabled to do so, while ensuring that others receive access to the necessary tools, education, and resources required to integrate these changes at a pace that aligns with their practice realities. Supporting professional wellbeing, operational feasibility, and workforce sustainability must remain central to implementation planning.

OPA is committed to collaborating with the Ministry to strengthen vaccine access for all Ontarians. The benefits of authorizing pharmacists to prescribe vaccines are already being realized in other provinces, and it is time for Ontario to align with national practice. Advancing pharmacist prescriptive authority for vaccines will eliminate unnecessary regulatory barriers to vaccine access, ensuring Ontarians can receive equitable, timely and convenient access to immunization services.

Introduction

OPA is committed to evolving the pharmacy profession and advocating for excellence in practice and patient care. With over 8,500 members, OPA is Canada’s largest pharmacy-based advocacy organization and continuing professional development provider for pharmacy professionals. By leveraging the unique expertise of pharmacy professionals, enabling them to practice to their fullest potential, and making them more accessible to patients, OPA is working to improve the efficiency and effectiveness of the health care system.

Vaccines are our best defense against many infectious diseases, preventing the spread of illness, reducing infant mortality and increasing life expectancy globally.ⁱ The World Health Organization (WHO) estimates that routine immunizations save 3.5 – 5 million lives annually and approximately 154 million deaths have been prevented by immunizations worldwide within the last fifty years.ⁱ

Despite the effectiveness of immunizations, Ontario does not meet the national vaccine coverage goal of 95% for routine childhood vaccines by 2 years of age. Routine immunization rates for tetanus, shingles, and pneumococcal vaccines are also below optimal levels; notably the National Advisory Committee on Immunization (NACI) targets of 80% for pneumococcal vaccination among adults 65 years of age and older and for influenza vaccination.^{ii,iii} It is important that barriers for Ontarians to access and receive routine immunizations be removed as this can prevent outbreaks of vaccine-preventable diseases, which can impact patient morbidity and mortality in addition to increasing healthcare costs to treat diseases and respond to outbreaks.^{iv}

Due to the sustained transmission of measles in Canada for more than a year, the Pan American Health Organization (PAHO) removed Canada’s measles elimination status in fall of 2025.^v This setback signals the need for coordinated efforts that will improve vaccination coverage, strengthen data sharing, enable improved surveillance efforts and provide evidence-based guidance.^v It is also a prime example of how under immunization of the population could lead to a resurgence of illnesses that have significant impact on patients and our health system. Measures to improve vaccination rates among unvaccinated or under-vaccinated populations are critical to ensuring our communities remain well-protected.

A qualitative systematic review examining barriers to adult vaccination in Canada found that the top five most frequently reported barriers were lack of vaccine information (41%), lack of access to vaccination (38%), fear of adverse reactions (38%), financial reasons (29%), and lack of awareness of vaccine existence (29%).^{vi} While pharmacists are well positioned to provide education, discuss evidence-based vaccine information and counsel on the risks and benefits of vaccines to address some of the common barriers, other barriers associated with access and cost require broader system-level approaches. This is especially important for those living in rural or underserved communities where access to healthcare services may be limited and/or financial barriers prevent patients from being immunized. Addressing these barriers is essential to improving vaccination coverage in the province, ensuring Ontarians are protected from vaccine-preventable diseases.

Background

Pharmacy professionals are highly trained and trusted healthcare providers embedded in communities across the province, including rural, remote and underserved areas. They are integral to the province's primary care system, providing equitable and convenient access to care for Ontarians. Pharmacists have demonstrated success in delivering patient care services that improve access and reduce pressure on the health care system. For example, since the implementation of the publicly funded minor ailment program in January 2023, pharmacists have provided over 2 million assessments with nearly all community pharmacies participating.^{vii} The positive uptake of minor ailment services by patients demonstrates strong patient uptake and system-wide impact.

Pharmacy professionals have also been participating in immunization efforts since 2012 with the administration of publicly funded influenza vaccines, followed by further scope of practice expansions to include the administration of vaccines for thirteen other vaccine-preventable diseases in 2017, publicly funded COVID-19 vaccines in 2021, and most recently RSV vaccines in 2023. In the 2024/25 respiratory season alone, pharmacy professionals administered over 1.9 million doses of influenza vaccines and over 1.7 million doses of COVID-19 vaccines, representing 68% and 84% of all doses administered in the province, respectively.^{viii} The success of these public health initiatives combined with pharmacists' clinical knowledge, expertise, and extensive experience administering vaccines, underscores their capacity to assess whether a vaccine is appropriate for a patient in alignment with immunization guidelines and public health recommendations, and support safe and effective patient care.

Community pharmacy professionals, who are among the most accessible healthcare providers, have proven their impact and value in vaccine delivery with their success in supporting influenza and COVID-19 vaccine campaigns. However, while pharmacists participate in the administration of vaccines, they do not have formal authority in Ontario to prescribe vaccines. This lack of prescriptive authority can restrict their ability to fully support patient access. OPA recently released its Vaccine Access Action Plan, *Improving Vaccine Access Through Community Pharmacies Across Ontario*, a patient-centred initiative that identified several barriers to vaccine access and outlined actionable recommendations to address them. One key recommendation to remove regulatory barriers to timely and equitable vaccine access is to expand pharmacists' scope of practice to include vaccine prescribing.^{ix} This expansion will streamline access and enhance the overall patient care journey.











Vaccines are categorized as either Schedule I (prescription from an authorized prescriber required for dispensing) or Schedule II (available for purchase without a prescription after pharmacist consultation). Under the current framework, a patient who receives a vaccine recommendation for a Schedule I vaccine must first visit an authorized prescriber (e.g., physician or nurse practitioner) to obtain a prescription before returning to the pharmacy to receive it (Figure 1). This two-step process delays care, discourages uptake, and creates avoidable inefficiencies within the health system.

Pharmacist Prescribing of Vaccines

Current Landscape

Pharmacist prescribing of vaccines is not a novel concept. In fact, amongst the Canadian provinces, Ontario is one of only two provinces where pharmacists do not have prescriptive authority for any vaccine (Table 1). Enabling this authority would bring Ontario in line with other jurisdictions, improving patient access and convenience, aligning with broader immunization efforts by increasing vaccination rates, and optimizing health system efficiency through better use of pharmacy professionals' expertise.

Table 1: Pharmacist Authority to Prescribe Vaccines Across Canadian Provinces^{xi}

	BC	AB	SK	MB	ON	QC	NB	NS	PEI	NL
Prescriptive Authority for Vaccines										

Pharmacist Readiness

According to the Ontario College of Pharmacists (OCP) guideline on Pharmacist Prescribing: Initiating, Adapting and Renewing Prescriptions, pharmacists can only prescribe if “they possess sufficient knowledge and skills respecting the drug and the patient’s condition to do so safely and effectively”, and “it is in the best interest of the patient and appropriate, given the known risks and benefits of prescribing the drug”.^{xii} Similarly, OCP’s guideline on Administering a Substance by Injection requires that, prior to administering a vaccine, the pharmacist must possess “sufficient knowledge, skill and judgment respecting the substance to be administered and the device(s) used to administer the substance” and have “sufficient understanding of the condition of the patient”.^{xiii} Furthermore, the pharmacist is also required to determine the therapeutic appropriateness of the vaccine to be administered by assessing the patient and basing the decision on the approved indication for use; patient factors such as age, individual needs, medical history, health status; consideration of the potential risks and benefits of administration; and the pharmacist’s professional judgement.^{xiii} As such, the foundational clinical components required for patient assessment prior to vaccine prescribing are already performed by pharmacists within their current scope of administering vaccines.

Additionally, vaccines that are categorized as Schedule II (i.e., a prescription is not required for sale) are routinely recommended by pharmacists to patients where applicable. In such cases, the pharmacist is still required to complete a patient assessment to ensure that the vaccine is indicated,

safe and appropriate for the patient to receive. This assessment process to make a recommendation would not be different from what is required to authorize a prescription for a vaccine categorized as Schedule I.

Pharmacists have demonstrated that they provide safe and quality patient care when it comes to vaccine administration. An analysis by the Institute of Safe Medication Practices (ISMP) of vaccine errors reported to its National Vaccine Errors Reporting Program from January 1, 2022 through December 31, 2023 found that errors in the outpatient setting were least likely to occur in community pharmacies (9%) compared to medical clinics (43%), public health immunization clinics (18%) and doctors' offices (17%).^{xiv} Similarly, when looking at the healthcare providers involved in the events, pharmacists were only involved 13% of the time in comparison to medical assistants (48%), registered nurses (27%) and licensed vocational nurse or licensed practical nurses (19%).^{xiv} These findings indicate that pharmacists have the knowledge and expertise to safely administer vaccines and, as an extension, prescribe vaccines.

Furthermore, a study conducted at a university travel clinic with pharmacists specializing in pretravel health found that when compared to traditional primary care providers, pharmacists consistently provided more evidence-based recommendations on oral anti-infectives and vaccines, and patients were also more adherent to pharmacist recommended therapies.^{xv} These findings demonstrate that pharmacists can effectively prescribe vaccines by applying evidence-based guidelines to ensure safety and efficacy.

Patient Benefits

Removing barriers to vaccination is critical to protecting the health of all Ontarians. Immunization is important in all stages of life, but especially in vulnerable populations such as infants, young children and older adults who may be more susceptible to vaccine-preventable diseases.^{xvi} Being up to date on vaccines is also important for those with chronic conditions who may be at increased risk of infections or more severe disease should they get an infection.^{xvii} Furthermore, immunization can prevent the spread of infections, indirectly protecting individuals who may not be able to receive vaccinations or who may not adequately respond including newborns, elderly people and those who cannot be vaccinated due to medical reasons.^{xvi}

Expanding the scope of pharmacists to enable prescriptive authority for vaccines will support equitable and convenient access to care for all Ontarians. This expansion will enable the profession to play a larger role in increasing access to vaccines for patients and relieve pressures on the health care system. Some potential challenges/barriers associated with patient access to immunization services that could be addressed by authorizing pharmacists to prescribe vaccines include:

- **Greater access points to care** – With over 5,000 community pharmacies in Ontario, located in communities across the province including rural and remote locations, patients will have more options for where to receive their vaccines. Additionally, approximately 64% of

Ontarians live within walking distance of a pharmacy and 91% within a 5 km drive.^{xviii} Over half of Canadians (55%) also visit their community pharmacist at least once a week and see their community pharmacist up to ten times as often as their family physician.^{xix} This high degree of accessibility means that granting pharmacists authority to provide vaccines can expand care options for many patients.

- **Timely access to care** – Requiring patients to visit multiple healthcare providers to be vaccinated (e.g., family physician for a prescription and the pharmacist to have the prescription filled and vaccine administered) complicates the patient journey, is time-consuming, and delays vaccination, potentially resulting in missed vaccination opportunities. Removing this unnecessary regulatory roadblock and enabling pharmacists to prescribe vaccines improves the patient experience and ensures care is provided and received in a timely manner.^{xx}
- **Convenient access to care** –17% of Canadians have passed on a doctor’s appointment because there were no availabilities outside of working hours.^{xxi} Pharmacies extended hours, including on weekends and holidays, makes care more accessible.
- **Confidence in vaccines** – Pharmacists are not only one of the most accessible healthcare providers, but they also consistently rank as one of the most trusted health professionals in Canada.^{xix} This makes them an ideal health professional to assess, educate, recommend, prescribe and administer vaccines to patients.
- **Financial costs** – A major barrier to vaccination is reimbursement and insurance coverage. High levels of cost-sharing may deter patients from vaccination and hinder pharmacists’ efforts to increase vaccination coverage rates.^{xxii} Enabling pharmacists with the authority to prescribe vaccines will make it easier for patients to receive a prescription for an indicated vaccine, which is often required for insurance coverage purposes.
- **Culturally competent and relevant care** –The delivery of culturally competent care is essential to improving health outcomes and quality of care in addition to reducing racial and ethnic health disparities.^{xxiii} Pharmacy professionals embedded in local communities can offer culturally sensitive, tailored, linguistically appropriate services to improve health disparities.

A study involving a pharmacist-managed travel clinic in Alberta, Canada where the pharmacist was authorized to prescribe and administer vaccines found that a majority (79%) of recommended vaccines were administered at the clinic and 94% of patients who completed the post-travel questionnaire reported they were satisfied or very satisfied with the care they received.^{xx} This underscores the high level of trust patients place in pharmacists and highlights the opportunity for pharmacies to serve as a streamlined, single point of care for vaccination services. It also suggests a high level of acceptability of the role of pharmacists as prescribers, which may support improved access to and engagement with care.

Health System Benefits

Enabling pharmacists to have prescriptive authority for vaccines will also help to support health system sustainability by:

- **Addressing gaps in service** – In Ontario, 2.5 million Ontarians did not have a family doctor in 2024 and this number is forecasted to reach 4.4 million people by 2026.^{xxiv,xxv} Additionally, an estimated 525,000 rural residents do not have a primary care provider, 65% of rural Ontario municipalities do not have access to walk-in clinics, and in 2023, there were over 600 emergency department temporary closures in rural Ontario.^{xxvi} Pharmacists with prescribing authority for vaccines can help to close this gap and provide access to immunizations for patients who need it.
- **Increasing health system capacity** – Currently, vaccines can only be prescribed by authorized healthcare professionals such as physicians and nurse practitioners. Expansion of prescriptive authority for vaccines to pharmacists can increase health system capacity by supporting efficient use of resources and freeing up time for our healthcare partners, i.e., doctors, nurses and other healthcare providers, to focus on managing more complex care cases.
- **Reducing healthcare provider burnout** – The pressures on the health system have a significant toll on the mental health of physicians, nurses and other healthcare professionals.^{xxvii} A 2019 survey of Ontario primary care physicians found that 54% felt their job was “extremely” or “very” stressful – higher than the Canadian average of 45% - and nearly half (49%) were “slightly” or “not at all” satisfied with their daily workload.^{xxvii} By expanding the role of pharmacists to prescribe vaccines, some of this workload can be alleviated, helping to reduce pressure on other healthcare providers and support their well-being.
- **Improving patient health outcomes** – As one of the most important accomplishments in public health, immunization has led to the elimination, containment and control of many diseases, preventing hospitalizations, morbidity and mortality.^{xvi} Removing a potential barrier to access by enabling pharmacists to prescribe vaccines will support increasing vaccination rates to ensure Ontarians remain protected from vaccine-preventable diseases.

Pharmacy professionals have demonstrated their ability to deliver safe, accessible, and efficient vaccination services through well-established community pharmacy programs such as those for influenza and COVID-19. Building on this success will enable the health system to make better use of existing infrastructure and expertise.

Economic Impact

Pharmacists have demonstrated their ability to generate cost savings for the health system through the administration of vaccines. A study by O'Reilly et al. found that the overall cost savings from direct healthcare costs and lost productivity in the province during the first two influenza seasons

where pharmacists were enabled to administer publicly funded influenza vaccines in Ontario was potentially \$2.3 million.^{xxviii} Similarly, a modelling study forecasting the health and economic impact of expanding pharmacist-administered pneumococcal vaccines to seniors in Canada from 2016 to 2035 estimated total cost savings of between \$206 million to \$761 million, with an estimated return on investment increasing from \$2.80 per dollar spent in 2016 to as high as \$72.00 by 2035.^{xxix} Further demonstrating the economic value of pharmacy-delivered immunizations, analyses from the COVID-19 vaccination campaign showed that vaccines administered through pharmacies saved an average of \$39 per dose compared to administration through public health units, equivalent to savings of over \$610 million since the program launch.^{xxx} Finally, a study by Singhal and Zhang found that the average direct costs paid per adult vaccination of herpes zoster, pneumococcal 23-valent or influenza vaccines in pharmacies were 16-26% lower compared to physician offices and 11-20% lower compared to other medical settings when considering factors including the health plan and enrollee paid amounts for the vaccine, vaccine administration, dispensing fee and visit (where applicable).^{xxxi} Collectively, this evidence confirms that pharmacies provide a cost-effective, scalable, and sustainable channel for the administration of vaccines. As an extension, it is reasonable to anticipate that expanding pharmacists' scope of practice to include vaccine prescribing will further increase vaccination rates through improved patient access, thereby generating additional health system cost-savings.

Building on this projected impact, a study by Jackson et al. estimated that when compared to prescribing by nurses, pharmacist prescribing for pre-travel consultations was more cost-effective due to more appropriate prescribing of vaccines and medications.^{xx} Additionally, research on pharmacists prescribing vaccines and other medications has found that pharmacists adhere to clinical practice guidelines more often than other healthcare providers.^{xv,xxxii} This greater adherence to evidence-based guidelines combined with the fact that pharmacists already have authority to prescribe vaccines in all other provinces except British Columbia provides confidence that pharmacist prescribing is not expected to increase the risk of harm to patients, which in turn supports the sustainability of the projected cost savings. Collectively, these findings reinforce the economic value of enabling pharmacists to prescribe vaccines.

Beyond the demonstrated economic value, granting pharmacists prescriptive authority also has important implications for access. It will remove barriers to vaccine administration at the time of consultations, thereby supporting vaccine uptake. A study testing a life-course vaccination assessment performed by a community pharmacist found that while 95.1% of consultations resulted in at least one vaccine recommendation, only 5.9% of recommended vaccines were administered at the time of the consultation due to scope of practice limitations, including the pharmacist not being able to prescribe vaccines and/or administer all vaccines, and the inability for pharmacies to access all publicly funded vaccines.^{xxxiii} Similarly, another study found that the rate of first injections by pharmacists compared to by doctors or other healthcare providers was highest in Alberta (73.2%) and lowest in Ontario (10.7%) due to pharmacists in Alberta having prescribing and administering authority for vaccines and high public funding levels for the studied vaccines.^{xxxiv}

Immunization generates cost savings for the health care system by reducing morbidity and mortality in addition to reducing emergency room visits, hospitalizations and intensive care unit admissions.ⁱ In Canada, it is estimated that adult vaccines produce an annual cost savings of \$2.5 billion from fewer hospitalizations and increased productivity (\$514 million in savings for the health care system and \$1.9 billion in economic savings).ⁱ This includes 17,000 hospitalizations prevented, 267,000 outpatient visits averted and 57,000 hours of physician time made available.^{xxxv} On average, every dollar invested in adult vaccines generates an estimated \$3.41 in return from averted healthcare costs and productivity gains.^{xxxv}

Further increasing vaccine uptake can lead to even greater cost savings. For example, in Canada, increasing adult uptake of the shingles, Respiratory Syncytial Virus (RSV), pneumococcal, Human Papillomavirus (HPV), COVID-19 and influenza vaccines by 10% could result in annual cost savings of \$3.1 billion; this could rise to \$3.8 billion with a 20% increase, and up to \$6 billion if uptake reached 80%.ⁱ This illustrates the significant return on investment associated with improving immunization rates and underscores the importance of removing regulatory barriers, such as the lack of authority for pharmacists to prescribe vaccines, to improve access and vaccine uptake.

Roadmap to Establish Pharmacist Prescriptive Authority for Vaccines

Regulatory Amendments

To expand pharmacists' scope of practice to include prescriptive authority for vaccines, amendments to O. Reg. 256/24 under the *Pharmacy Act, 1991* are required to enable open prescribing of vaccines. While OPA recommends that pharmacists be enabled to prescribe all vaccines, at a minimum, regulatory amendments should enable authority to prescribe any vaccines that pharmacists are currently authorized to administer (i.e., the vaccines listed under Schedule 3 of O. Reg. 256/24).

It is important to note that the approach of using prescriptive drug and vaccine lists in regulations has many disadvantages. They require regulatory amendments to be made every time new changes are needed, e.g., the addition of a new drug or vaccine, and they may also limit patient access to newly approved products. This disadvantage was seen most recently with prescribing authority for minor ailments. While pharmacists have had the authority since 2023 to assess and prescribe for atopic dermatitis where appropriate, the list of drugs that can be prescribed is restricted by regulation. Consequently, newer therapies such as roflumilast are excluded, despite being a phosphodiesterase 4 (PDE4) inhibitor, similar to crisaborole (which is listed in the regulations) and having Health Canada approval for the topical treatment of mild to moderate atopic dermatitis in patients six years of age and older.^{xxxvi}

The inefficiencies and disadvantages of prescriptive lists in regulations were also observed when pharmacist's scope of practice was expanded to include the administration of COVID-19 and RSV vaccines. Since the authority for pharmacists to administer vaccines is based on a list defined in regulation, regulatory amendments were required to include these vaccines within scope. Similarly, to support the Ministry's recent proposal to make six publicly funded adult vaccines (i.e., RSV, pertussis, tetanus, diphtheria, pneumococcal and shingles) available through community pharmacies, regulatory amendments have been proposed and are awaiting government approval to add tetanus, diphtheria and pertussis vaccines to Schedule 3 of O. Reg. 256/24 to enable administration by pharmacy professionals. These examples underscore the need for regulatory modernization to eliminate outdated, list-based restrictions that delay patient access to vaccines.

Patient safety and health would not be compromised by enabling pharmacists to prescribe and administer all Health Canada approved vaccines as Health Canada's comprehensive regulatory process for approving vaccines for use in Canada, along with ongoing post-market monitoring, ensures the safety and efficacy of vaccines and acts as an appropriate safety control. Patient safety is further supported by pharmacists, who assess the appropriateness of vaccination for each individual in accordance with immunization guidelines, public health recommendations, and their professional judgement.

OPA therefore strongly recommends that regulatory amendments authorize pharmacists to prescribe and administer all vaccines. This approach will not only improve access to currently available vaccines in Canada, but also future-proof the regulatory framework by ensuring that any newly Health Canada–approved vaccines automatically fall within pharmacists’ prescribing and administering authority. This will help ensure patients have timely and consistent access to both existing and emerging vaccines as they become available.

Remuneration Framework

Establishment of a publicly funded remuneration framework to accompany expanded scope of practice for pharmacists to prescribe vaccines is essential to ensuring equitable and sustainable access to this professional service. OPA recommends a fee of \$20 be payable for each assessment and if necessary, prescription issued, for a vaccine. Recognizing that immunization services provided to insured persons in connection with, and for the sole purpose of, travelling to a country outside of Canada are not insured services in accordance with Regulation 552 General under the *Health Insurance Act*, the recommended fee payable for vaccine services provided by pharmacists would align with this exception.

This proposed fee reflects the time and expertise required to provide this immunization service, to ensure successful implementation and to enable pharmacy professionals to continue offering services in a safe and effective manner. Data from Nova Scotia’s Community Pharmacy Primary Care Clinics showed that appointments where only one vaccine was requested (88% of all appointments) took over 25 minutes to complete and increased to 42 minutes for appointments where three vaccines were requested.^{xxxvii}

If these services are uninsured, it may lead to a two-tiered system resulting in some patients experiencing inequitable access to immunization services due to financial barriers. This in turn can limit vaccine uptake and the ability for pharmacists to practice to full scope and support increasing overall immunization rates.

Other Considerations

Additional factors that should be taken into consideration to support implementation of pharmacists’ prescribing authority for vaccines include:

- **Staged uptake accompanied by operational and practice supports** – As with any new scope or change to practice, staged and varied uptake is to be expected. Adoption and implementation will depend on each practice environment, the patient population served, and the readiness and comfort level of the pharmacist to integrate new services into their workflow and practice. Those who are prepared to adopt expanded scope once approved should be enabled and supported to do so while other pharmacists may benefit from additional tools, resources and education to feel confident and prepared to implement these services at a later stage.

- **Workplace setting and capacity** – Workplace pressures and burnout are an unfortunate reality for some pharmacists, similar to other health professions including but not limited to physicians and nurses. Therefore, it is crucial to ensure that pharmacists are able to continue to maintain full autonomy to make decisions and provide care based on the best interests of their patients. It is critical that work continues to explore initiatives around staffing requirements, availability of appropriate resources and space, etc. to support the sustainable provision of any new services, while also giving consideration to the operational feasibility and potential impact on access to care. Feedback from both front-line pharmacists as well as pharmacy operators will be essential to inform any decision-making that may impact practice, professional autonomy, and ultimately patient care.
- **Awareness and collaboration** – Ensuring that there is a clear and consistent communication plan including transparent and adequate timelines prior to any scope and/or program implementations is critical to supporting preparation and planning by the pharmacy sector to promote uptake and ensure smooth implementation of new changes. Increasing awareness amongst other healthcare professionals and the public is also beneficial to encourage interprofessional collaboration and drive higher vaccine uptake.
- **Enhanced health system integration** – While authorizing pharmacists to prescribe vaccines does not depend on having a province wide electronic health record (EHR), progress toward a fully integrated health system would significantly reduce administrative burdens for pharmacy teams and other healthcare professionals. For example, an integrated EHR would eliminate the need for pharmacists to separately notify the patient’s primary care provider or prescriber, if available, within a reasonable time after initiating a prescription for a vaccine. Strengthening system integration would also promote continuity of care, supporting improved patient safety and overall wellbeing.

Conclusion

Pharmacists are ready to take on a larger role in protecting Ontarians through vaccination. Enabling pharmacists to prescribe vaccines is a critical step toward ensuring patients receive timely and convenient access to immunization services, while strengthening health system capacity and improving the efficient use of resources. By removing barriers to accessing immunizations, such as the need for patients to see another healthcare professional solely to obtain a prescription, missed vaccination opportunities can be avoided and the patient journey improved overall, particularly in rural and remote areas where access to primary care providers may be more limited.

Improving timely and equitable access to vaccines is essential to closing coverage gaps across the province. Pharmacists have proven they play a critical role as immunizers. Their success in supporting influenza and COVID-19 vaccine campaigns have demonstrated their ability and capacity to deliver high-quality vaccine care. Building on these successes and further leveraging pharmacists' knowledge and expertise as prescribers will enable them to provide more comprehensive immunization care and enhance their ability to improve vaccination rates to advance Ontario's immunization goals and protect Ontarians from vaccine-preventable diseases. Granting pharmacists authority to both prescribe and administer a broader range of vaccines will eliminate unnecessary regulatory barriers that currently limit Ontarians' access to vaccines compared to other Canadian jurisdictions.

As the province continues to navigate evolving public health challenges, OPA looks forward to collaborating with the Ministry on the next steps to strengthen vaccine access for all Ontarians. Together, we can modernize our health care system and improve patient outcomes by ensuring every Ontarian can access the vaccines they need, when and where they need them.

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