



COVID-19 Vaccination Program

2022 Value-for-Money Audit

Why we did this audit

- The Ontario government spent about \$1.5 billion from April 2020 to May 2022 on the Ontario rollout of the COVID-19 vaccines purchased by the federal government. The majority of the Province's cost was reimbursing public health units, hospitals, pharmacies and other vaccination entities and the health professionals such as physicians, nurses and pharmacists for administering the COVID-19 vaccines to Ontarians.
- To better prepare for future surges in demand for the COVID-19 vaccine and to address future disease outbreaks, the Ontario government needs to develop a path forward recognizing the lessons learned from the rollout of the COVID-19 vaccine.

Why it matters

- According to the World Health Organization and the Public Health Agency of Canada, COVID-19 vaccination is one of the most effective ways to protect people in the community against severe illness, hospitalization and death from COVID-19.
- Ensuring COVID-19 vaccines are first administered to population groups that are, based on scientific evidence, most at risk of harm if not vaccinated could help protect these individuals and the society at large.

What we found

Vaccine Distribution Not Always Equitable

- The provincial government did not consistently apply its prioritization method across all neighbourhoods in its selection of 114 “hotspot” communities that received vaccines in advance of other communities in spring 2021 when vaccines were scarce.
- This resulted in eight lower-risk neighbourhoods receiving vaccines ahead of high-risk neighbourhoods, and nine higher-risk neighbourhoods being excluded from the hotspot strategy because the Ministry of Health included communities identified in a summer 2020 initiative in its selection of communities that received prioritized access to vaccines in April 2021.

RECOMMENDATION 1

Multiple Vaccination Appointment Booking Systems Contributed to No-Show Appointments

- Ontarians could book their vaccination appointments through the provincial booking system as well as systems operated by public health units, hospitals and pharmacies.
- The use of multiple booking systems created inconsistencies in accessibility and encouraged “vaccine shopping” where some Ontarians registered for multiple appointments using different booking systems.
- According to the Ministry of Health, about 227,000 no-show appointments were noted in 2021 in just the provincial booking system alone—appointments that could have been booked by someone else in need of a vaccine.

RECOMMENDATION 4

**Vaccinators
Compensated
Differently Depending
on Profession and
Work Location**

- Physicians (\$170-\$220 per hour) received much higher compensation than nurses (\$32-\$49 per hour) and pharmacists (\$30-\$57 per hour) for vaccinating at vaccination sites operated by public health units and hospitals.
- A private-sector operator (Calian) paid more to various professionals compared to what a not-for-profit organization (Canadian Red Cross) paid (e.g., \$120 per hour vs. \$62 per hour for a pharmacist.) The Ministry of the Solicitor General contracted with these organizations to vaccinate Ontarians in clinics throughout the province.
- Neither the Ministry of the Health nor the Ministry of the Solicitor General provided the oversight necessary to achieve consistent pay for the same work.

RECOMMENDATION 5

**Lack of a Proper
Vaccine Registry
Limits Ontario's Ability
to Rapidly Respond
to Future Disease
Outbreaks**

- The Ministry of Health built a specific database (COVaxON) for COVID-19 vaccination records because it did not have a reliable vaccine registry.
 - In 2014, the Ministry informed us that it planned to expand Panorama—a system used to record all vaccinations required for school-aged children in Ontario—to include all vaccinations for all Ontarians. However, it had not done so by the time the COVID-19 pandemic emerged, despite spending of about \$170 million on the system since 2010.
- The Ministry incurred over \$144 million on COVaxON between April 2020 and May 2022; significant time and costs were incurred to train vaccinators and support staff to use this new system.

RECOMMENDATION 6

**Responsibilities
in Vaccine Rollout
Not Always Well Co-
ordinated**

- The Province did not clearly outline reporting relationships for organizations such as pharmacies, hospitals and public health units in the context of mass vaccination to guide decision-making when vaccines arrived in Ontario.
- Responsibility for immunization database fraud investigations at Ontario pharmacies remained unclear into the summer of 2022 when decisions were still pending from the Ministry of Health.

RECOMMENDATION 2

**Ontario Wasted 3.4
million Vaccine Doses
Received**

- While the province wasted about 9% of the vaccines received from the federal government as of the end of June 2022, the wastage was 38% between February and June 2022 when demand for boosters was much lower than the province anticipated.
- Two private-sector organizations contracted by the Ministry of the Solicitor General and the Ministry of Health wasted 20% and 57% of the vaccines delivered to them.

RECOMMENDATION 7

**Proof of Vaccination
Not Effectively
Enforced**

- Enforcement officers were required to announce themselves at the beginning of a visit and could not assess the normal operation of the business uninfluenced by the presence of inspectors, including whether the business was using the Verify Ontario application as mandated in early 2022.

RECOMMENDATION 8, 9

**Vaccine Mandate
Decisions Not
Evidence-Based**

- In fall 2021, associations representing hospitals and nurses, as well as the Ontario COVID-19 Science Advisory Table, believed that vaccine mandates for hospital workers would have minimal impacts to hospital staffing while protecting the workforce from absences due to sickness.
- The Ministry of Health decided not to implement a vaccine mandate on hospital workers, indicating that its decision was informed by the Chief Medical Officer of Health's analysis of evidence available at that time, but this analysis was not provided to us.

RECOMMENDATION 10

Communication on Vaccine Safety Unclear

- The provincial government did not clearly and consistently communicate the importance of vaccination to the public and did not dispel misinformation regarding the safety of Moderna in early 2022 after media reports about its side effects.
- The provincial government did not establish any specific vaccination rate goal, or time frame to achieve the goal, for booster shots. The coverage rate for adults aged 18 to 29 for the third dose (or first booster) was 40%, compared to 64% for people aged 50 to 59, as of mid-August 2022.
- Experts informed us that they believed the government's communication approach sometimes undermined public confidence in vaccination.

RECOMMENDATION 3, 11

Conclusions

- By mid-August 2022, more than 80% of Ontarians had been vaccinated with two doses and more than 50% of Ontarians had a third dose or booster, consistent with the rates Canada-wide.
- The Ministry of Health and the Ministry of the Solicitor General established a plan to vaccinate Ontarians to minimize transmission of, and hospitalization and death from COVID-19, but the decision-making criteria for communities that would be prioritized were not applied consistently across all regions.
- The Ministry of Health did not provide consistent pay for the same work by vaccinators across the various vaccination sites. Doctors, nurses and pharmacists were paid differently to do the same work in administering a COVID-19 vaccine.
- The Ministry of Health's approach to booking vaccination appointments was unco-ordinated. The lack of a central vaccination appointment booking system, or a system that was integrated with other booking systems used by pharmacies and other health providers, resulted in many Ontarians booking multiple appointments, contributing to significant no-shows and disadvantaging those in need.

Read the report at www.auditor.on.ca