

PUBLIC HEALTH AGENCY OF CANADA'S MANAGEMENT RESPONSE AND ACTION PLAN (MRAP)

In response to the recommendations of the Report - Audit of COVID-19 Vaccines
of the Auditor General of Canada to the Parliament of Canada

Report Ref. No.	OAG Recommendation	Departmental Response	Description of Final Expected Outcome/Result	Expected Final Completion Date	Key Interim Milestones (Description/Dates)	Responsible Organization/ Point of Contact (Name, Position, Tel #)	Indicator of Achievement (For Committee Use Only)
Para 55	To reduce further wastage, the Public Health Agency of Canada should draw on vaccine supply management lessons learned and work with other implicated departments and stakeholders to adjust its management of COVID-19 vaccine surpluses.	<p>Agreed. From the onset of the pandemic the Government of Canada's primary objective has been to ensure that Canada has timely access to the most effective vaccines to protect the health and safety of Canadians. Canada's COVID-19 vaccine supply plans have evolved throughout the pandemic, informed by emerging scientific evidence, timing of regulatory approvals, product availability, NACI guidance, and federal/provincial/territorial needs.</p> <p>The Public Health Agency of Canada will review lessons learned and collaborate with other implicated departments and stakeholders to optimize COVID-19 vaccine supply management and reduce COVID-19 vaccine surpluses and wastage throughout the duration of the contracts.</p> <p>These continued efforts will include:</p> <ul style="list-style-type: none"> - Working with provinces, territories and federal partners on demand planning and forecasting, based on evolving scientific evidence and NACI recommendations, to determine supply requirements for ongoing campaigns - Working closely with Public Services and Procurement Canada and vaccine suppliers to adjust contractual commitments and delivery schedules, where possible. - Continuing to collaborate with Global Affairs Canada and COVAX to donate surplus doses to support global health and vaccine equity objectives, recognising there is a limited international demand for donated COVID-19 vaccines in a global market of oversupply. <p>The Agency will also draw on the lessons learned from COVID-19 to help inform vaccine supply planning for future pandemics (December 2024).</p>	PHAC will leverage lessons learned and adjust its supply management strategy, minimizing oversupply where possible while continuing to support PT immunization needs.	Conclusion of COVID-19 pandemic vaccine agreements	<p>Conduct survey of PTs on 2023 vaccine supply preferences (November 2022)</p> <p>Share PT survey results with Pan-Canadian Public Health Network stakeholders and explore common strategies to manage future supply (November - December 2022)</p> <p>Work with PTs on demand planning and forecasting for COVID-19 vaccine supply leveraging the various governance and advisory committees within the Pan-Canadian Public Health Network (ongoing)</p> <p>Instruct Public Services and Procurement Canada, as contracting authority, to work with vaccine suppliers to adjust contractual commitments and delivery schedules, where possible (ongoing)</p> <p>Work with Global Affairs Canada and COVAX to make surplus doses available for donation to support global health and vaccine equity objectives (ongoing)</p> <p>Continue to evaluate internal processes, identify lessons learned and make adjustments to approach in order to optimize vaccine supply management (ongoing)</p> <p>Draft lessons learned document on PHAC public health response, including vaccine procurement (December 2024)</p>	<p>PHAC-VRTF</p> <p>Stephen Bent, VP, Vaccine Rollout Task Force</p> <p>Melissa Sutherland, DG, Supply, Acquisition and Donation 613-295-6936</p>	

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Para 61	Public Health Agency of Canada should complete implementing VaccineConnect. This should include the data quality procedures.	<p>Agreed. The Public Health Agency of Canada is actively working to advance the implementation and data quality procedures of the three modules of VaccineConnect; namely, the Intelligent Supply Chain (ISC), the Immunization Information System (IIS) and the Immunization Program Management (IPM). The Agency will continue to actively engage jurisdictional partners on identification of service gaps and needs to support future integration of the systems.</p> <p>Building on investments to date in the ISC module of VaccineConnect, the Agency will work closely with other federal departments, as well as provincial and territorial partners to support supply chain management and distribution of vaccines.</p> <p>The Immunization Information System (IIS) will replace the Canadian Adverse Events Following Immunization Surveillance System (CAEFISS), upon completion of acceptability testing.</p> <p>PHAC will test and validate the cloud CAEFISS system in order to prepare for the anticipated minimum viable product launch in fall 2022.</p> <p>The development of the Immunization Program Management (IPM) module is complete, and it was leveraged by a number of jurisdictions during the deployment of the COVID-19 vaccination campaign.</p>	VaccineConnect is an agile, modular digital platform supporting FPT and internal partners. VaccineConnect can be scaled up and down to support business needs related to medical countermeasures for COVID-19, and beyond, across HC and PHAC. Data quality procedures are in place to optimise both user experience and system functionality. VaccineConnect is owned by PHAC, and operated Health Canada, as stipulated by Memorandum of Understanding.	While VaccineConnect will continue to evolve in order to address identified business needs, implementation of the ISC, IIS, Cloud CAEFISS MVP and IPM modules are expected to be completed in 2023 based on current requirements.	<p>The 2.0 iteration of the Intelligent Supply Chain (ISC) module was released in Fall 2022. The release has provided a streamlined user experience while providing business owners with additional reporting capabilities. Additional prioritized enhancements including wastage and inventory data collection, analysis, and interpretation for management of current and future demand and supply will be completed by March 31, 2023.</p> <p>The Immunization Information System (IIS) is evolving to a renewed foundation for vaccine data transfers of vaccine surveillance data between provinces, territories and PHAC. Cloud CAEFISS, a component of the IIS, is advancing to replace the end-of-life Canadian Adverse Events Following Immunization Surveillance System (CAEFISS), with a planned Minimum Viable Product targeted for early 2023 (Q4 2022/23). This release will include user-requested capabilities for automated inter-jurisdictional interoperability and new vaccine surveillance monitoring tools. Subsequent releases, MVP+2 and MVP+3, including additional functionality are planned for Q1 2023 and Q2 2023 respectively, depending on securing further funding.</p> <p>PHAC will complete parallel validation of the Cloud CAEFISS system and data quality procedures to inform the decision regarding timing of full transition from the existing CAEFISS to Cloud CAEFISS. (Completion date: November 30, 2023).</p>	<p>Stephen Bent, VP, Vaccine Rollout Task Force</p> <p>Heather Deehan, ED VLO, VRTF</p>	
Para 77	Given the urgency and importance of improving timely	Agreed. The Public Health Agency of Canada created the Corporate Data and Surveillance Branch in October 2020 to signal its commitment to continue improving health data	Endorsement by the federal, provincial,	March 31 2023	Endorsement by the federal, provincial, and territorial Ministers of Health	Public Health Agency of Canada	

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	access to quality data among health partners, the Public Health Agency of Canada and Health Canada should expedite its work with provinces and territories to complete the Pan-Canadian Health Data Strategy.	<p>collection, sharing and use as their response to recommendation 8.66 in the 2021 Report 8 of the Auditor General of Canada.</p> <p>The Agency and Health Canada have been working with provinces and territories to co-develop the Pan-Canadian Health Data Strategy since December 2020. This Strategy will address the long-standing issues affecting Canada's ability to collect, share, access and use health data.</p> <p>Through the Strategy's series of commitments and proposed actions for improving Canada's health data foundation, it will enable better health outcomes and public health responses for individuals, communities, and Canadian society through learning health systems.</p> <p>Implementation will take place over several years, guided by aligned policies and frameworks with an integrated workplan. A review is planned for every three years. The pace of implementation will respect individual jurisdictions' capacity, readiness, and seek opportunities to accelerate implementation through collaboration and re-use of expertise.</p>	and territorial Ministers of Health		Date: March 31, 2023	Dr. Steven Hoffmann, VP, Corporate Data and Surveillance Branch	
Para 78	<p>The Public Health Agency of Canada in collaboration with Health Canada and the provinces and territories should resolve barriers to:</p> <p>1. Better share vaccine surveillance information among themselves</p>	<p>Agreed.</p> <p>The Public Health Agency of Canada understands that information sharing is an important component of Canada's vaccine safety surveillance system, which is a collaboration between provinces and territories (P/Ts), the Agency, Health Canada (HC), and vaccine manufacturers, and will continue to advance better information sharing with its partners.</p>	Governance documentation and processes for vaccine safety data- and information-sharing, which were enhanced in response to the COVID-19 pandemic, will be strengthened through formalization between PHAC and relevant partners.	November 30, 2023	<p>Identified milestones are in alignment with PHAC's mandate, with a focus on facilitating collaboration and consensus with partners to achieve the desired outcomes.</p> <p>78.1.1 PHAC will lead a review and update of governance documentation and work plan for the Vaccine Vigilance Working Group, the F/P/T governance table for vaccine safety monitoring and information sharing, to reflect lessons learned from the safety surveillance of COVID-19 vaccines and the identified needs of members. (November 30, 2023)</p> <p>78.1.2 PHAC will collaborate with HC on review and update of governance</p>	<p>Stephen Bent, VP, Vaccine Rollout Task Force</p> <p>Anne-Marie Ugnat, DG, Centre for Immunization Surveillance</p> <p>Tel : 613-297-4999 Email : vaccinesurveillanc@phac.gc.ca</p>	

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			Expected outcome is consistent with PHAC's mandate, and focussed on facilitating collaboration and consensus among partners.		documentation for PHAC-HC vaccine safety collaboration and information sharing, to reflect lessons learned from the safety surveillance of COVID-19 vaccines and the identified needs of members. (November 30, 2023)	ccin@phac-aspc.gc.ca	
	2. Provide access to the Canadian Adverse Events Following Immunization Surveillance System for Health Canada	The Agency is leading consultations with provincial and territorial partners on a proposal to provide Health Canada with access to the Canadian Adverse Events Following Immunization Surveillance System (CAEFISS). CAEFISS receives reports from all provincial and territorial public health authorities and from some federal departments. Some Provinces and territories have put conditions on the access to and use of the health information they provide to the Agency.	Barriers to Health Canada accessing CAEFISS will be identified and action plan created to address them.	December 1, 2024	<p>78.2.1 PHAC will complete a series of P/T consultations first initiated by the Agency on February 24, 2022 through a presentation to Canadian Immunization Committee (CIC), on a proposal to provide Health Canada staff access to CAEFISS and obtain from each P/T written assent or an articulation of persisting barriers to implementation. (Completion date December 1, 2023)</p> <p>P/T consent is required for any use of case-level data beyond national public health monitoring.</p> <p>P/Ts have cited concerns related to risk of public disclosure of personal information on AEFIs and lack of related patient consent.</p> <p>78.2.2 PHAC will continue to share CAEFISS data per the parameters of the Letter of Agreement between Health Canada and PHAC on CAEFISS data sharing, which was extended beyond its October 2022 expiry date for an additional ten years. (Ongoing)</p> <p>78.2.3 PHAC will develop a new Letter of Agreement between Health Canada and PHAC to include any new parameters established during the engagement discussions with P/Ts around access to CAEFISS for HC staff (Completion date: 12</p>		

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					<p>months following the completion of 78.2.1 above)</p> <p>78.2.4 Should parameters remain at status quo following these discussions, PHAC will work with Health Canada to identify avenues that may address any persisting barriers.</p>		
	3. Provide surveillance data, including case-level details as needed, to the World Health Organisation and vaccine companies in a timely manner	The Agency will continue to share CAEFISS data in aggregate form with the World Health Organization (WHO) on a regular schedule, and on an as-needed basis with vaccine companies. The Agency will engage with provinces and territories in an effort to allow it to release more granular data to the WHO and vaccine companies, as needed, while recognizing the importance of protecting patient confidentiality, respecting privacy laws, and supporting accurate interpretation of the data.	Canada is sharing vaccine pharmacovigilance data with the WHO and with vaccine manufacturers, to the level of granularity supported by Canadian F/P/T Immunization programs.	March 31, 2024	<p>78.3.1 PHAC will continue to share aggregate vaccine surveillance data with the WHO per their requests, and to provide tailored presentations and/or updates to relevant committees (e.g. the Global Advisory Committee on Vaccine Safety). (Ongoing)</p> <p>78.3.2 PHAC will review and update (as necessary) the process for sharing of case-level data on identified safety issues with vaccine manufacturers, inclusive of target performance/timelines standards. (March 31, 2023).</p> <p>78.3.3 PHAC will facilitate consultations with HC and F/P/T immunization programs on options to share more granular vaccine safety data with the WHO and vaccine manufacturers, with a focus on addressing barriers identified by F/P/T immunization programs. PHAC will report on the results of consultations held. (Report date: March 31, 2024)</p> <p>78.3.4 Should parameters remain at status quo following these discussions, PHAC will work with Health Canada to identify avenues that may address any persisting barriers.</p>		