

Enforcing Legislation Related to Immunization
By
Community Health Nurses Initiatives Group (Registered Nurses
Association of Ontario)

1. What (if any) are the gaps or inaccuracies in this protocol? Are there any missing elements? What (if any) areas do not align with accepted guidelines or evidence-based practices?

none

2. What are the top three changes (i.e., with regards to content, structure, language and terminology) that are required for this protocol to be finalized?

Some of the protocols track clients by gender and some by sex. This protocol uses sex on page 2 when discussing the immunization record of students. As the records are to include all students from 4 to 17 years, it is important that the educational and health care system be prepared for diversity in all of its forms. CHNIG recommends that data collection and surveillance protocols be utilized that incorporate best practices sensitive to the social construction of gender. In addition to male and female, transgender, other, and unknown should be possible categories on the surveillance forms. This is a respectful, client-centred approach to students/clients without replicating a binary construction of only two genders, male and female.

More information on on this topic may be found at:
Registered Nurses' Association of Ontario (2007). Position Statement:
Respecting Sexual Orientation and Gender Identity. Toronto: Author.
http://www.rnao.org/Storage/30/2486_Respecting_Sexual_Orientation_and_Gender_Identity.pdf

page 4 g) replace "physician" in the example to "health care provider" or "MD or RN(EC)"

3. Any other comments

As an expert interest group of the Registered Nurses' Association of Ontario, the Community Health Nurses' Initiatives Group appreciates the opportunity to participate in this consultation process. We believe that the proposed revisions to the draft Ontario Public Health Standards and protocols will increase clarity, consistency, and quality of public health services to better serve Ontarians.