

October 23, 2025

MEMO TO: Retirement Home Operators and Licensees

FROM: Michèle Sanborn, Assistant Deputy Minister
Policy Programs and Strategic Partnerships Division
Ministry for Seniors and Accessibility

SUBJECT: Fall 2025 Respiratory Illness Preparedness

I am writing to provide you with essential information and updated resources to help in your preparation for the upcoming fall respiratory season.

MSAA continues to work with the Office of the Chief Medical Officer of Health, Public Health (OCMOHPH) to monitor and assess the risk of respiratory illnesses in retirement homes as the 2025/26 respiratory season commences. This season, the risk from influenza (flu), respiratory syncytial virus (RSV), COVID-19 is anticipated to be similar to the previous two seasons and to pre-pandemic years. Based on the last two years of concurrent circulation of respiratory illnesses and outbreaks, MSAA recommends that licensees revisit their Infection Prevention and Control (IPAC) programs to ensure readiness for the respiratory season. It is important for retirement homes to be prepared to prevent and respond to a potentially higher prevalence of respiratory outbreaks this fall and winter.

With the approaching fall/winter respiratory virus season, Ontarians, and particularly retirement home residents, are encouraged to stay safe and prevent unnecessary visits to the hospital by staying up to date on all recommended vaccinations and taking recommended preventative measures.

This memo outlines key actions to ensure readiness.

1. Vaccination

This fall, Ontario will continue the publicly funded respiratory vaccine programs for COVID-19, flu and RSV.

Licensees are strongly encouraged to promote COVID-19, and RSV vaccines and their benefits¹ to all eligible residents, staff, and visitors. The flu vaccine should also be promoted per the requirements under the Retirement Homes Act, 2010 (RHA)².

All three vaccines can be co-administered, with availability following similar timelines to previous seasons. Licensees are encouraged to plan their vaccine administration as soon as possible.

A. COVID-19 and Flu Vaccine

For the COVID-19 vaccine, the Ministry of Health (MOH) recommends that individuals at increased risk, including retirement home residents, receive a dose of the new formulation of the vaccine this Fall. Evidence continues to show that immunity from infection or vaccination wanes over time and that new variants continue to emerge. The minimum interval is three months between doses or infection. Details on the new formulation will be released in September.

Operators seeking independent vaccine administration are encouraged to work with their local Public Health Unit (PHU) for onboarding support, plan finalization, vaccine storage, and handling requirements. Operators unable to independently administer the vaccines should consider other methods such as working with a co-located long-term care home or a local provider (e.g., local community pharmacy).

If after considering these resources, your retirement home still needs support administering the COVID-19 and/or flu vaccine, please contact your local PHU or email MOH's vaccine program at vaccine.program@ontario.ca.

B. RSV Vaccine

Operators are encouraged to contact their local PHU for more information on the RSV vaccine program. Evidence continues to show multi-year immunity from the RSV vaccine. Therefore, residents who have already received a dose do not need another, while those who haven't are encouraged to get vaccinated. Details on the vaccine can be obtained through the local PHU.

New this fall, the RSV vaccine program has expanded to include all adults in Ontario 75 years of age and older.

C. Pneumococcal Vaccine and Other Vaccines

¹ Health Canada provides information on vaccine benefits: COVID-19, flu and RSV

² Licensees' obligations under the RHA include ensuring that residents, staff, and volunteers receive information about the advantages of an annual flu vaccination and where the vaccination is available.

In addition to the fall respiratory vaccines, MOH recommends that eligible residents consider vaccination available through the publicly funded [pneumococcal vaccine program](#).

Information about all recommended publicly funded vaccines is available on [Ontario's Routine Immunization Schedule](#) page.

2. Infection Prevention and Control (IPAC)

Licensees are reminded about their obligations under the RHA and its Regulation to ensure there are safety plans in place, including an IPAC program, to manage outbreaks. In conjunction with vaccinations, adherence to foundational IPAC practices, including IPAC training for staff and volunteers and information on how to reduce incidence of infectious disease for residents and families³ is crucial to mitigate the risk of outbreaks and spread of respiratory diseases.

In addition to the RHA requirements, retirement homes should continue to follow the guidance listed below as per the [memo](#) issued by OCMOHPH to the Retirement Homes Regulatory Authority (RHRA) in April 2024:

- [Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings](#); and
- [MSAA's COVID-19 Guidance Document for Retirement Homes in Ontario](#).

Retirement homes may also wish to consider the following resources to support implementation of IPAC guidance and best practices:

- [Respiratory Infection Outbreaks in Institutions and Public Hospitals](#) for respiratory infection outbreak definitions and specific information on respiratory diseases.
- [RHRA's Infection Prevention and Control Guidelines](#) to support understanding of the requirements of select IPAC portions of the RHA and its Regulation.
- [RHRA's Self-Assessment Tool](#) to assess readiness to prevent or effectively respond to a COVID-19 outbreak.
- [Infection Prevention and Control for Long-Term Care and Retirement Homes](#) to prevent the transmission of infections, reduce the risk of outbreaks, and protect residents, staff, and visitors.
- [The IPAC module for non-clinical staff](#), developed by Public Health Ontario (PHO), to strengthen staff knowledge and capacity on IPAC practices.
- [Environmental Cleaning Performance Observation Audit](#) to support staff in applying IPAC best practices when cleaning residents' spaces.
- [Four Moments of Hand Hygiene](#) to support hand hygiene best practices.
- [Provincial Infectious Diseases Advisory Committee Best Practices](#) for IPAC best practice published by PHO.

³Licensees' obligations under the RHA include providing each resident and the resident's substitute decision-makers information about how to reduce the incidence of infectious disease, including the need for and method of proper hand hygiene and the need for and process of reporting infectious illness.

Further IPAC tools to support engagement with residents and families are provided in Appendix A.

Retirement homes seeking additional IPAC support to prepare for the upcoming respiratory season are encouraged to contact their IPAC Hub. IPAC Hubs can assist with outbreak management plans, work alongside retirement homes in IPAC assessments and audits, and provide other IPAC supports to strengthen IPAC programs and practices. Should you seek assistance connecting with your IPAC Hub, please contact IPACHubs@ontario.ca.

3. Antiviral Treatments

Licensees are strongly encouraged to educate residents on accessing antiviral treatments, including [Paxlovid and Remdesivir](#) (for COVID-19) and [Oseltamivir and Zanamivir](#) (for flu). Residents should be encouraged to include antiviral treatments in their plan of care discussions with their primary care providers.

Ontario Health advises that antivirals can offer increased protection and limit the severity of illness when taken early in the course of a confirmed infection. Individuals aged **65 and over** are among the high-risk groups eligible to be tested and assessed for [COVID-19 antiviral treatments](#) (including Paxlovid) as they are at higher risk of severe outcomes from COVID-19.

Residents can call Health Connect Ontario at Health811 or 1-866-797-0007 (toll-free TTY) for more information on antiviral treatments, assistance, or eligibility for virtual care options.

4. Accessing Emergency Supplies of Personal Protective Equipment (PPE) and Testing Supplies

[PPE Supply Portal \(PSP\)](#) will continue to facilitate orders for emergency supplies of PPE (including PCR swabs and Rapid Antigen Tests (RATs)) this fall/winter season. Licensees should ensure they maintain an adequate supply of personal protective equipment (PPE) and routinely check for expiry dates. To support inventory planning and tracking, operators may choose to use the [PPE Burn Rate Calculator](#). Operators are also encouraged to (re)train staff on proper PPE use, including ensuring N95 masks are appropriately fitted when necessary. To support training efforts, please refer to [PHO's PPE tools](#).

The PSP ordering tool is accessible online for efficient access to swift reordering, easy product edits for new orders, and real-time tracking of shipment statuses. For assistance in creating an account or accessing an existing account, or for any questions about orders and shipment, please contact SCO.Supplies@ontario.ca.

Licensees are reminded that any PPE or testing supplies ordered are to **not to be resold or distributed to any other organization**. By receiving supplies from this program, retirement homes are expected to adhere to the established terms and conditions.

Retirement homes continue to have access to Rapid Antigen Tests through the [Provincial Antigen Testing Program](#) to facilitate timely detection of respiratory illnesses and access to antiviral treatment when appropriate. In cases of suspect or confirmed outbreak in the home, please continue to follow your local PHU's directions on testing.

5. Staffing Contingency and Fallback Planning

It is expected that the upcoming fall/winter respiratory season will impact human resource capacity across the province, including retirement homes. As a reminder, operators should encourage staff to stay home when they are sick and to follow local public health guidance for return to work.

To support preparedness for critical staffing shortages, MSAA highly encourages licensees to review the [RHRA Self-Assessment Tool](#) and to become familiar with key considerations when developing a staffing contingency plan, including:

- Changing the scheduling of work or shifts and collecting information about availabilities of staff for alternative shifts;
- Conducting skills and experience inventories of staff to identify viable alternative roles (i.e., cross training staff to work in multiple departments);
- Identifying local college/university/high school students that can provide support; and/or
- Providing appropriate training or education as needed to staff and volunteers.

6. Fall Preparedness Webinar

Similar to previous years, MSAA will host a webinar in collaboration with the Ontario Retirement Communities Association (ORCA) on respiratory season preparedness. The details of the webinar will be shared through RHRA and ORCA.

As always, I thank you for your efforts in keeping retirement home operations running smoothly while protecting the safety and well-being of retirement home residents and staff.

If you have any additional questions, please contact our team at RHinquiries@ontario.ca.

Sincerely,

Original signed by

Michèle Sanborn

c: Peter Kaftarian, Interim Deputy Minister, MSAA and MLTC
Marsha Pinto, Director, Retirement Homes Branch, MSAA
Dr. Daniel Warshafsky, Associate Chief Medical Officer of Health, OCMOH
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Appendix A – ADDITIONAL IPAC RESOURCES

- [How to Handrub / How to Handwash](#) to support hand hygiene best practice.
- [Cover Your Cough](#) to support respiratory etiquette best practice
- [Additional Precautions Signage and Lanyard Cards](#) to help provide visual messaging regarding PPE usage and any additional precautions.
- Respiratory infectious diseases awareness [resources](#)
- Immunize Canada COVID-19 [awareness and promotional resources](#)
- Immunize Canada RSV [awareness and promotional resources](#)