

Ministry of Health

# Ontario's Immunization of School Pupils Act (ISPA)

## Qs & As on ISPA FUNDAMENTALS

January 2025

### Purpose

The purpose of this quick guide is to provide a summary of the fundamental requirements under the [Immunization of School Pupils Act](#) (ISPA).

It is not intended to be comprehensive.

It is not intended to provide legal advice nor to provide specific advice on implementation or enforcement of the *Immunization of School Pupils Act*.

It is only current as of January 2025, and is not updated.

Local approaches (i.e., specific processes) may vary slightly when implementing requirements under the ISPA, however, there are minimum requirements set out in:

1. Ontario law (via the [ISPA](#) and its [Regulations](#)), and;
2. [The Ontario Public Health Standards](#) (including the Immunization Standard and its [protocol](#))

### 1. What is the ISPA and why does it exist?

The Immunization of School Pupils Act (ISPA) is Ontario legislation that helps to protect school age (elementary and secondary school) children from serious diseases which are designated under that Act. The designated diseases under the ISPA are measles, mumps, rubella, tetanus, diphtheria, polio, pertussis, meningococcal, and -for those born in or after 2010- varicella.

## 2. Who does the ISPA apply to in Ontario?

The ISPA applies to all minor pupils in elementary and secondary school in Ontario. School includes both public and private schools. (See definition of “school” in the ISPA). The ISPA sets out specific responsibilities for persons. See Table 1 below.

## 3. Who is responsible for what under the ISPA?

Table 1 below provides a simplified summary of requirements under the ISPA and its Regulations.

Visit [Immunization of School Pupils Act, R.S.O. 1990, c. I.1](#), for the **complete** Act and its Regulations.

### Table 1: ISPA Key Requirements and Responsible Parties

#### Responsible Party – Parent

Action required	Additional information
The parent of a pupil must have the pupil complete the prescribed program (set out in the regulations) of immunization in relation to each of the designated diseases unless a valid exemption is on file with the local medical officer of health. (Section.3 Subsections (2) and (3))	The exemptions are either: <ol style="list-style-type: none"><li>1. A medical exemption or;</li><li>2. Statement of conscience or religious belief.</li></ol>

#### Responsible Party – Local medical officer of health (MOH)

Action required	Additional information
<ol style="list-style-type: none"><li>1. Maintain and review records of immunization for each pupil attending school in the area served by the MOH. Section 11 Subsections (1) and (2)</li></ol>	<ul style="list-style-type: none"><li>• Specific information required as part of the record is indicated in Reg. 645 Section 1</li><li>• The designated diseases and the required schedules of immunization that must be followed are indicated in Table 1; Program of Immunization in O. Reg. 645 Section 3 subsection (1)</li></ul>

<b>Action required</b>	<b>Additional information</b>
<p>2. When a child does not have the required immunizations, nor a valid exemption on file, an order of suspension issued to the school principal may be made by the MOH. The order must be a written order requiring a person who operates a school to suspend the pupil named in the order based on circumstances as per Section 6 subsection (2), and/or Section 12 subsection (2)</p> <p>a) A copy of the order is required to be served to the parent of the pupil and, where the pupil is sixteen or seventeen years of age, upon the pupil</p> <p>b) Where the circumstances for making the order no longer exist, the MOH must rescind the order</p>	<p>Term of suspension is for a period of twenty school days, and repeated orders may be issued by the MOH. Section 7</p> <p>Note: An order issued may be appealed to the Health Services Appeal and Review Board (HSARB). The medical officer of health must serve notice that the order may be appealed to the HSARB.</p>
<p>3. Comply with conditions regarding collecting, retaining, using and disclosing a pupil's Ontario education number indicated in O. Reg. 645 Section 1.1 subsection (5)</p>	<p>-</p>

**Responsible Party – Physician or nurse**

<b>Action required</b>
<p>Furnish to the parent of the child a statement signed by the physician or member of the College of Nurses of Ontario showing that they administered the immunization (section 10)</p>

## Responsible Party – School operator

Action required	Additional information
<p>For the purposes of assisting in the accurate maintenance of records of immunization, every person who operates a school shall submit reports containing records for each pupil in the school to the medical officer of health for the health unit in which the school is located. Reg.645 Section 1.1 subsection (1)</p> <p>Note: “person who operates a school” includes the principal, administrator of the school, or the school board.</p>	<p>Information is to be requested by the MOH with a time frame and stipulation of a secure mechanism of information transfer. Reg. 645 Section 1.1 subsection (2)</p> <p>Specific student information to be collected from the school operator is indicated in Reg 645 Section 1.1 subsection (4)</p>

### 4. Are there other immunization requirements for local public health units?

[The Ontario Public Health Standards: Requirements for Programs, Services, and Accountability](#) (‘The Standards’) are published by the Minister of Health under the authority of section 7 of the Health Protection and Promotion Act (HPPA). The Standards specifies the mandatory health programs and services provided by boards of health. Immunization is one of these mandatory health programs, therefore there are additional requirements for local public health authorities (i.e., local public health units) under this Standard.

At the time of development of this document (2025), the Ontario Public Health Standards and their protocols are undergoing a large-scale review, however, a requirement that will remain key in the Immunization Standard is for local public health authorities to comply with requirements under the ISPA.

[The Immunization for Children in Schools and Licensed Child Care Settings Protocol](#) (“the protocol”) is a program-specific document as part of the Immunization Standard. The protocol provides direction to local public health units, and promotes standardized practices, with respect to the required assessment of the immunization status of students, including processes associated with issuing suspensions under the ISPA.

## **5. What other legislation and regulations apply to immunization programs and students / schools and to children?**

There are several pieces of legislation that affect schools and children/students (e.g., ISPA, Health Protection and Promotion Act (HPPA), Education Act, Child Care and Early Years Act (CCEYA), Personal Health Information Protection Act (PHIPA)). These acts aim to achieve the best outcomes for students/children and their communities.

These Acts have many requirements, including:

- Providing powers for medical officers of health (e.g., the HPPA allows for exclusion communicable disease (s. 22) orders during an outbreak in a school or licensed child care setting).
- Providing requirements to other parties which could affect the local health unit/MOH (e.g., the CCEYA requires the licensee of a child care setting to provide the medical officer of health information which will assist in immunization assessment processes).
- Providing public health units parameters to follow regarding their general work (e.g., the PHIPA and handling of personal health information as a health information custodian).

For specific legal interpretation of the various acts including the ISPA, legal counsel should be consulted.

## **6. The ISPA allows for exemptions. Can the exemption forms under the ISPA be altered?**

The Statement of Medical Exemption and the Statement of Conscience or Religious Belief forms are regulated forms prescribed under the ISPA. These forms may not be altered like a contract. Since these forms are not contracts, any alteration to the form, including initialing any changes, is not permitted under the ISPA regulations and there is no requirement for a local medical officer of health to accept a revised form.

## **7. How do school operators and principals ensure they are meeting immunization requirements under the ISPA?**

When contacted by the local public health unit, principals/school operators should work in partnership with them to:

- Provide student information as requested by the local medical officer of health.
- Assist in dissemination of important vaccination and public health information as requested by the local health unit.
- Assist in supporting any suspension or exclusion orders that the local medical officer of health issues under the authority of the ISPA or the Health Protection and Promotion Act (HPPA).