Wendy Davis, MD FAAP - Senior Faculty, Vermont Child Health Improvement Program, UVM
Breena Holmes, MD FAAP – VCHIP Senior Faculty & Physician Advisor, MCH Division, VDH
February 26, 2021
1) All participants will be muted upon joining the call.

2) If you dialed in or out, unmute by pressing #6 to ask a question (and press *6 to mute).
   If you are having audio difficulties and are using your computer speakers, you may wish to dial in:

   Call in number – 1-866-814-9555
   Participant Code – 6266787790

Presenters: Please avoid the use of speakerphone and make sure your computer speaker is muted if you dialed in via phone.

3) To ask or respond to a question using the Chat box, type your question and click the icon or press Enter to send.
Overview

- Celebrating **Purim**
  - Happy Thank a Resident Day!
  - National/World Pistachio Day
  - Take a walk – enjoy the sunshine! *(thank you, S. Winters)*

- Reminder – weekly event schedule:
  - **VCHIP/CHAMP/VDH calls:** M/W/F; Gov. Media Briefings Tues/Fri; VMS call with VDH Commissioner Levine Thursday
  - Situation, VDH, federal updates; Friday media briefing
  - Practice Issues: **Friday Potpourri**
  - Q & A/Discussion

*Please note: the COVID-19 situation continues to evolve very rapidly – so the information we’re providing today may change quickly*
Situation update

U.S. 28.4 million+ cases; 508,107 deaths
- Past week: average 69,450 cases/day (decrease of 32% from average 2 weeks earlier)
- 2.5 million+ deaths worldwide; 113 million+ cases

COVID Tracking Project – cease data coll. 3/7/21

VDH Weekly Data Summary (2/26/21)
- Weekly Spotlight Topic – Cases among Black, Indigenous and People of Color (BIPOC)
  - Disproportionate # BIPOC w/COVID-19 in VT. Focus on 1,742 VT resident cases who are Asian, African American or Black, American Indian or Alaskan Native, Hispanic or race other than white.
Situation update

Vermont COVID-19 Cases by Age Group

- Cases 0-9: 938
- Cases 10-19: 1,937
- Cases 20-29: 2,365
- Cases 30-39: 1,524
- Cases 40-49: 1,838
- Cases 50-59: 2,157
- Cases 60-69: 1,719
- Cases 70-79: 948
- Cases 80+: 637

Vermont COVID-19 Cases by Sex
- Female: 50.2%
- Male: 49.3%
- Unknown: 0.6%

Vermont COVID-19 Cases by Ethnicity if Known
- Hispanic: 2.5%
- Not Hispanic: 97.5%

Vermont COVID-19 Cases by Race if Known
- White: 87.7%
- Asian: 5.1%
- Black or African American: 4.3%
- American Indian or Alaska Native: 0.1%
- Other Race: 2.7%

https://www.healthvermont.gov/covid-19/current-activity/vermont-dashboard

February 26, 2021
COVID-19 Cases in Vermont K-12 Learning Communities While Infectious

- COVID-19 Cases in Vermont K-12 Learning Communities While Infectious
  - Table updated Tuesday & Friday w/data through previous Sunday & Wednesday.

<table>
<thead>
<tr>
<th>Learning Community</th>
<th>Cases Reported In the Past 7 Days</th>
<th>Total Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL FOR ALL SCHOOLS</td>
<td>33</td>
<td>649</td>
</tr>
</tbody>
</table>

VT College & University dashboards:

- **UVM update: effective March 1, all students to be tested 2X/week** (3d. In between; reeval 3/13)
- Violations of Green and Gold Promise, except for 1st missed test, to be reviewed for suspension in accordance with UVM policy (on-campus res. students will have 48 hours from a final conduct decision of suspension to vacate their residential hall and leave campus); thru 3/31 for now.
NOTE – 2/17/21: to align w/CDC reporting, # of doses rec’d. for VA & VNG now being removed from # doses rec’d.; accounts for about 8,300 doses.

Daily updates Tues. thru Sat.

Data = counts reported by end previous day; subject to change.

https://www.healthvermont.gov/covid-19/vaccine/covid-19-vaccine-dashboard
GETTING THE COVID-19 VACCINE

COVID-19 VACCINE UPDATE

MAKE AN APPOINTMENT WITH:

THE HEALTH DEPARTMENT

KINNEY DRUGS

WALGREENS

People age 70 years and older can make appointments now.

There are enough appointments for everyone who is eligible. Appointments are required. Clinics cannot accept walk-ins.

To make an appointment online with the Health Department:

1. Create an account (you can do this anytime)!
   You may already have an account if you were tested for COVID-19 at a Health Department site.
2. Make an appointment when your age group is eligible to get the vaccine.

February 26, 2021

Appointments from 2/26/21 – 5/18/21

- **722 clinics** (health care, VDH POD – does not include pharmacies); **123,018** total appointments
- VDH Local (District) Health Office sites; health care sites

Online (preferred) and **phone** appointment scheduling:
- 1-855-722-7878
- *If you need to speak with someone in a language other than English, call this number, and then press 1.*

**Call Center Hours:**
- Monday-Friday, 8:15 a.m. – 5:30 p.m.
- Saturday and Sunday, 10:00 a.m. – 3:00 p.m.
From the CDC Vaccine Tracker

https://covid.cdc.gov/covid-data-tracker/#vaccinations

February 26, 2021
From the CDC: U.S. COVID-19 Cases Caused by Variants

<table>
<thead>
<tr>
<th>Variant</th>
<th>Reported Cases in US</th>
<th>Number of Jurisdictions Reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>B.1.1.7</td>
<td>2102</td>
<td>45</td>
</tr>
<tr>
<td>B.1.351</td>
<td>49</td>
<td>15</td>
</tr>
<tr>
<td>P.1</td>
<td>6</td>
<td>5</td>
</tr>
</tbody>
</table>

Emerging Variant Cases in the United States


February 26, 2021
Meeting today

- Agenda:
  - Overview; Vermonters with developmental disabilities as a high risk health condition; current landscape; equity efforts; J & J vaccine; vaccine hesitancy & outreach; public comment
  - VMS/AAPVT/VAFP actively working with AHS to make this a streamlined process!
Developmental and Intellectual Disabilities and COVID

● Background
  ▪ Novel virus- not many studies
  ▪ Vermont’s leadership style- do not overpromise (NYState listed ALL developmental and intellectual disability)
  ▪ CDC only includes Down Syndrome

● Gratitude- Kirsten Murphy, Executive Director, VT Developmental Disabilities Council and Lynne Cardozo, Director, VT Communication Support Project
Developmental and Intellectual Disability and COVID Recommendation

● Chromosomal anomaly
  ▪ Examples- Down Syndrome, Prader-Willi Syndrome, Angelman Syndrome

● Intellectual Disability (IQ less than 70)
  ▪ Examples- Fragile X, Fetal Alcohol Syndrome, Autistic Disorder (some), Brain Injury (some)

● Disability that compromises lung function
  ▪ Examples- Cerebral Palsy (some), Muscular Dystrophy (some), Multiple Sclerosis (some), Spina Bifida (some)
Some evidence

- U.K. Study in patients with Down Syndrome- increased mortality with COVID
- Dozens of less common diagnoses fit into this broader categories so hard to generalize
  - Example- patients with schizophrenia have worse outcomes with COVID. Some people with schizophrenia have intellectual disability but not all
- In several studies, people with intellectual disability have worse outcomes with COVID
  - confounder is the studies are in congregate settings which is itself a risk factor
- People with intellectual disability have higher rates of other chronic conditions than the general population
Public Health Considerations

- Some people with intellectual disability live in congregate settings
- People with intellectual disability are not able to implement public health 
  preventions strategies due to their intellectual disability
- People with intellectual disability may be less able to recognize physical symptoms 
  of COVID
Governor Phil Scott

- 65+ starts Monday; Walgreens pharmacy signup starts now
- Education update: “how are kids are doing, and why it’s so important to get them back in school.”
  - Our kids are not OK – will talk about the “sobering details”
  - Fact that kids are struggling does not reflect lack of effort by schools
  - 30% in-person, 50% hybrid, 20% fully remote (after nearly 1 yr.)
- Some serious enough to end up in ED; kids reporting more anxiety, stress, sleeplessness, substance misuse; 12-14 hrs./day on line.
- “Why I set goal of getting kids back to IP school April…”
Governor Phil Scott

- We can put kids back in school & still manage COVID-19.
- Building analogies: “when you find yourself in a hole, stop digging...it’s all about a good foundation – a building, a child is compromised by weak foundation.”
- Have to start assessing educational, social, emotional impacts and work to address them ASAP, & that means IP education.
- Open to discussing what’s next after protecting those most vulnerable to serious illness & death – “we continue to have productive conversations with VT NEA.”
- Expect some additions to our vaccine strategy next week.
DMH Commissioner Sarah Squirrel

- Importance of protective factors
- Rising depression rates; increased pediatric visits
- Reviewed PACE study data (see VCHIP call: 2/19/21)
- Pediatricians reporting increased demand & increased MH needs
- Peds ED, Peds PCP quotes (from VMS/AAPVT/VAFP survey)
- Importance of school-based MH services
- Two most important factors to help are communication & connection
Vermont Afterschool Exec. Director Holly Morehouse

Impact of pandemic

Vermont Youth Project survey data

Past month: youth sometimes/often felt difficulties piling up so much that they could not overcome them.

>45% say COVID made MH worse (their own & those around them)

47% worsened school connections; 57% 11-12th grade COVID hurt their educ. experience; >50% increased loneliness; 48% incr. anxiety; 35% w/sleeping problems (65% response rate is decreased from 2018 – i.e., more difficult to engage youth voice).

Hope for opportunity to mitigate with summer programming.
AOE Secretary Dan French

- Surveillance testing not done this week (school vacation)
- Survey to educators & child care providers – vaccine strategy will evolve as supply increases – seeking interest to inform planning.
- U.S. DOE will invite SBAC waivers for testing provisions only – but must still administer.
- “Recovery Guidance” document to be published this afternoon.
  - Students at-risk pre-pandemic doing worse now.
  - Assess, plan, implement
  - Need in-person in order to respond.
- Some districts may use summer programming to address needs.
3 DOCUMENTS

1) Cardiac screening:

2) Medical Clearance:

3) Return-to-play:
Distribution Plan

- Going out thru multiple channels: VPA, athletic trainers/directors, SNs, COVID coordinators (AAVT & VAFP?)
- Posted prominently on VCHIP COVID-19 web page
- VDH school liaison staff working hard in additional roles in vaccine clinics & outbreak prevention request your assistance to support your local schools, Districts!
  - Some already have – thank you! (Deanne Haag, FNESU & FWSU)
Your inquiries/questions:

- Request from Rehab Therapy OP services (PT and OT) (who see AYA pop.) to share the AAP/ AHA guidance and UVM MC algorithm
- 5 step graduated return is for all athletes, right – not just moderate/severe?
  - ALL ATHLETES
- What about strenuous PE exertion & RTP?
  - SAME process. We decided we cannot separate strenuous PE exertion from other recreational activities/sports – recommend same RTP clearance. Judgment call either way – didn’t seem to make sense to say you can run as hard as you want in gym class without any clearance. So for now, play is play.
Your inquiries/questions (cont’d.):

- Does this guidance apply to elementary school PE class participation?
- Is this guidance retroactive for students who were positive in the fall or earlier this winter?
- Is a completed medical clearance document now required for students to return to school and PE class or do we just hold kids out of PE until we get the clearance?
- Regarding public pre-K 3-5 yo: any implications for them as far as clearance for gross motor activities, vigorous free play outdoors or PT sessions?
- We are working with our VDH school liaison & consulting pediatrician; other SNs may have concerns, & we would all appreciate your help.
Mask Exemptions

- Guidance document available
  - Only a few exemptions indicated – will resend document
- Have received inquiries, esp. re: implementation as school-based athletic competition resumes
  - Teams may forfeit games if guidance not followed.
- Please help support appropriate implementation
Seeking Your Assistance!

- **Medicaid is seeking a Katie Beckett Medical Expert**: medical doctor to provide clinical expertise (via hourly annual contract) on Katie Beckett appeals & fair hearings (as needed basis).
  - Provide a clinical opinion on disability determinations and/or level of care assessments in Katie Beckett appeals/fair hearings; available to testify to that opinion in front of the Human Services Board on the State’s behalf.

- Disability and level of care determinations for Katie Beckett are made by DDS (SSA).
  - (Initial) determinations clearly documented – when decision appealed, medical expert testimony required; DDS prohibited by federal govt. from testifying in state level appeals.

- Qualifications: currently licensed to practice medicine in VT; free from significant professional licensing decisions; specialize in Pediatrics and/or Disabling Pediatric Disorders; have significant professional experience.
Seeking Your Assistance (Katie Beckett medical expert)

**Scope of Work:**

- Recent appeal caseloads have averaged 10 cases/year; average 3 hours of medical case review & testimony prep work per case.
  - Contactor paid on hourly basis at $150/hour, up to a maximum of $10,000/contract year (maximum contract amount ~ 66 hours/year).
- Successful candidate will undertake extensive medical record review in Disabled Children’s Home Care (Katie Beckett) program cases & be expected to:
  - Examine material facts of the case (medical records & lay witness testimony); prepare written reports/statements; provide expert testimony before administrative Hearing Officer; testify at deposition or at administrative fair hearing; break down the scientific, technical language and terminology; work as part of a team (Dept. staff, AAGs)
- If interested, please email Ashley Berliner, Director of Medicaid Policy, at Ashley.Berliner@vermont.gov
Big Change Roundup: bigchangeroundup.org

Largest fundraiser for the UVMCH; funds raised support patients and families (e.g.) some child life services; new program startup (e.g., Transgender Program; safe sleep program on Mother Baby Unit); injury prevention initiatives; food insecurity initiative (CSC); support for inpt. families (ferry passes, gas cards, meal vouchers)

Please help promote personally & through your practices/ orgs.

3/19-3/21: Big Change Roundup Drive Thru Collections (3 loc.)
3/26/2021: Big Change Roundup Final Total Announcement (counted off air/off-site)
Q & A Goal: monitor/respond in real time; record/disseminate/revisit later as needed.

For additional questions, please e-mail: vchip.champ@med.uvm.edu

What do you need – how can we be helpful (specific guidance)?

VCHIP CHAMP VDH COVID-19 website:
https://www.med.uvm.edu/vchip/projects/vchip_champ_vdh_covid-19_updates

Next CHAMP call – Monday, March 1, 2021 – 12:15 – 12:45 pm

Generally back to Monday/Wednesday/Friday schedule

Please tune in to VMS call with VDH Commissioner Levine:

Thursday, March 4, 2021 – 12:30-1:00 p.m. – Zoom platform & call information:

Join Zoom Meeting:
https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVdqdJ2ZG4yQT09

Meeting ID: 867 2625 3105 / Password: 540684

One tap mobile - +1 646 876 9923,,86726253105#,,,0#,,540684#