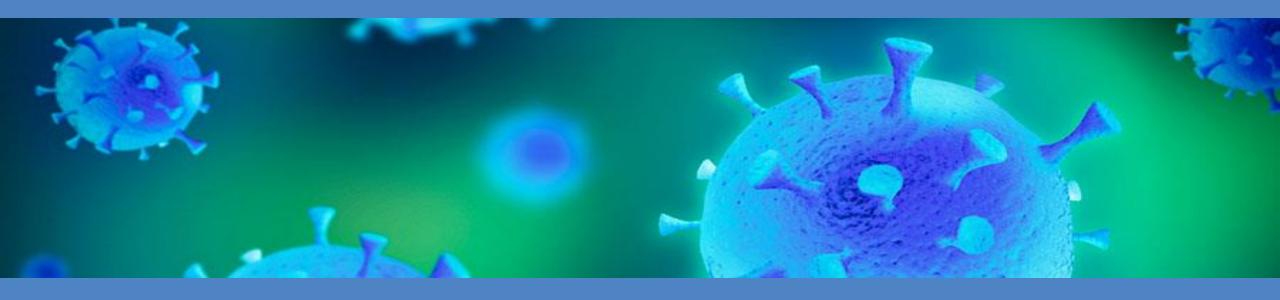
VCHIP / CHAMP / VDH COVID-19 UPDATES



Wendy Davis, MD FAAP - Senior Faculty, Vermont Child Health Improvement Program, UVM Breena Holmes, MD FAAP – VCHIP Senior Faculty & Physician Advisor, MCH Division, VDH April 23, 2021









Technology Notes

- 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 picon or press Enter to send.







Overview



- Celebrate (UN) Spanish Language Day!
 - Google doodle celebrates with the eñe: Ñ
 - Tomorrow (4/24) is National Prescription Drug Take Back Day
 - Prince Louis's 3rd birthday (photo courtesy of his mum, Duchess Kate) where's his helmet?
- □ Reminder weekly event schedule:
 - VCHIP/CHAMP/VDH calls: M/W/F; Gov. Media Briefings Tues/Fri; VMS call with VDH Comm. Levine Thursday
- Situation, VDH, CDC, AAP updates; Friday media briefing
- □ Practice Issues: (Rev. guidance) *Child Care & Out-of-School Time*
 - Breena Holmes, MD FAAP VCHIP Sr. Faculty; physician advisor to VDH.
- □ Q & A/Discussion



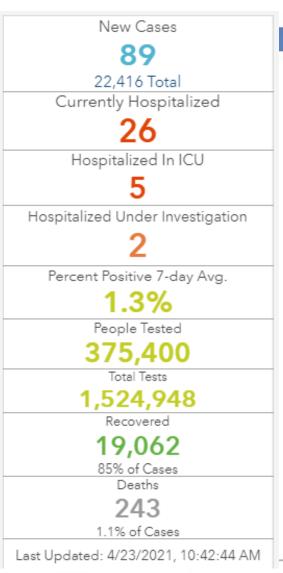
[Please note: the COVID-19 situation continues to evolve very rapidly – so the information we're providing today may change quickly] 3

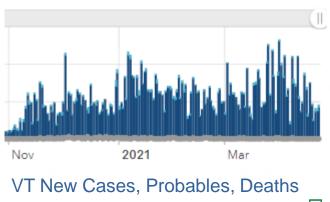
April 23, 2021





Situation update





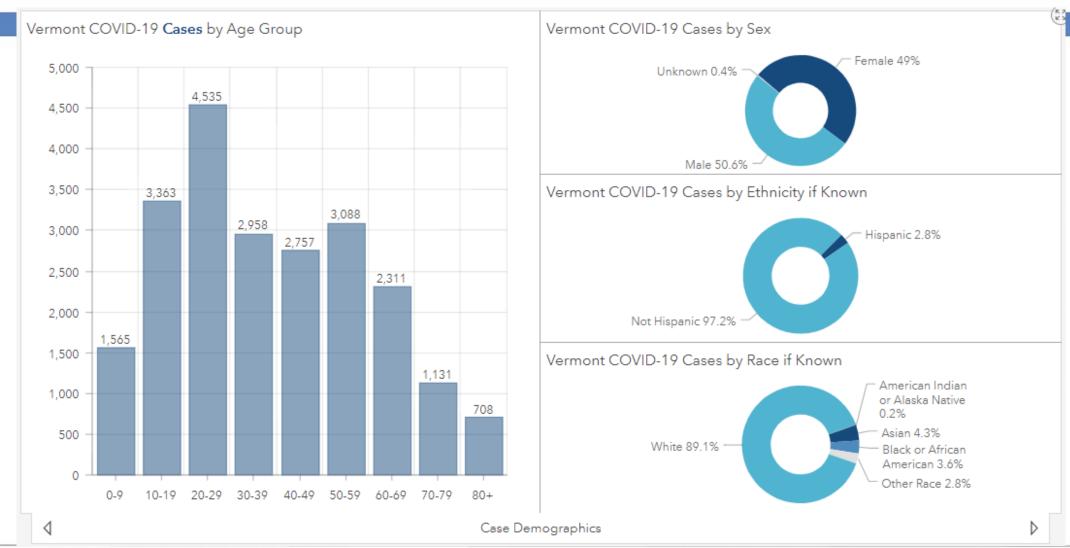
- **Note**: NYT has changed coronavirus tracking pp.
- U.S. 31.9 million+ cases; 569,875 deaths
 - https://www.nytimes.com/interactive/2020/us/coronavirusus-cases.html (updated 4/23/21)
 - 4/22/21: 66,362 new cases; 911 deaths
 - Past week: av. 61,901 cases/day (14d. change -6%)
 - 3 million+ deaths worldwide; 144.2 million+ cases

VDH Weekly Data Summary(4/23/21)

- Weekly Spotlight Topic: Facilities (#30) Experiencing More than One Outbreak
- SEE also: Case Demographics section with detailed data on school-aged children
- Find previous summaries at:
 https://www.healthvermont.gov/covid-19/current-activity/weekly-data-summary



Situation update







COVID-19 Cases Among Vermont's School-Aged Children

This brief reflects data as of April 10, 2021 at 7 pm (the last complete MMWR week). All rates are calculated per 10,000 people. The 14-18 year old age group does not include college students. Data is preliminary and subject to change.

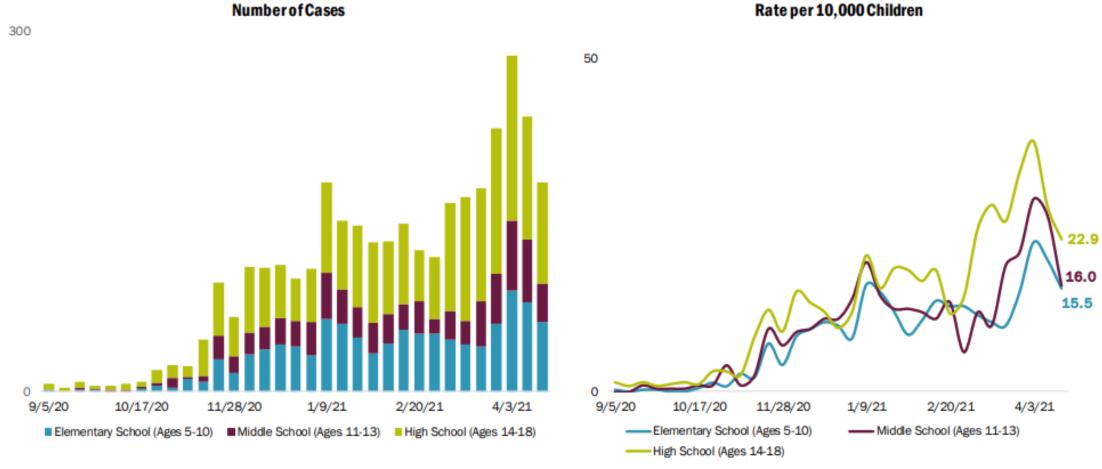
Number of Cases by Week 1500 1000 500 ■ Non-School Aged School Aged (5-18)





COVID-19 Cases Among Vermont's School-Aged Children

Both the number and the rate of COVID-19 among school aged children have been decreasing in the last two weeks.







COVID-19 Cases in VT K-12 Learning Communities (While Infectious)

- COVID-19 Cases in Vermont K-12 Learning Communities While Infectious
 - https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID19-Transmission-Schools.pdf
 - Table updated **Tuesday & Friday** w/data through previous Sunday & Wednesday.

April 21, 2021

April 18, 2021

Cases in Vermont K-12 Learning Communities While Infectious

	Cases Reported In the Past 7 Days	Total Cases
TOTAL FOR ALL SCHOOLS	31	1240

Cases in Vermont K-12 Learning Communities While Infectious

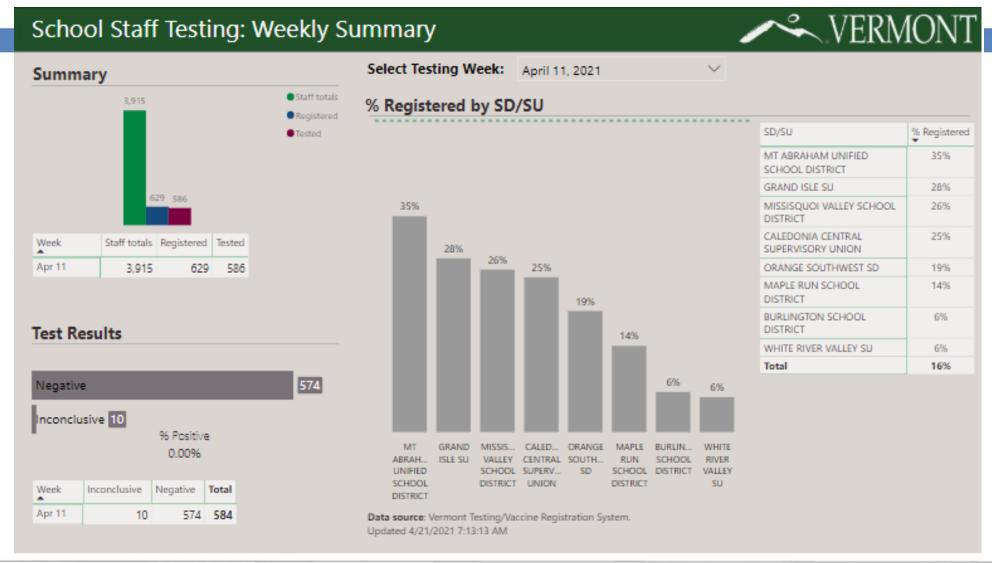
Learning Community Schools with less than 25 students are reported in the "Total for all Suppressed Schools" row at the end of the table.	Cases Reported In the Past 7 Days	Total Cases
TOTAL FOR ALL SCHOOLS	56	1233

- VT College & University dashboards:
 - □ UVM update (week of 4/12-4/18/21): 22 new cases off campus; 11 on campus; 1 faculty; 0 staff
 - Middlebury College results (updated 4/20/21): 0 new cases & 2 active cases (employees).
 - Norwich University: 1 current positive





AOE School Staff Testing Dashboard





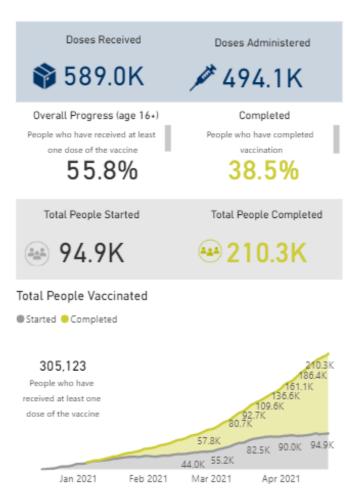


VDH COVID-19 Vaccine Dashboard

- Daily updates Tuesday thru Saturday
- Data = counts reported by end previous day; subject to change.
- https://www.healthvermont.gov/ covid-19/ vaccine/ covid-19vaccine-dashboard

NOTE: the reported number of doses delivered on April 9 inadvertently included 22.8K doses that were shipped to Veteran Affairs. The VA doses have been removed from the total reported on April 13.

Vaccination by County The percent of the county population that has received at least one dose of the Show Rates By: Race/Ethnicity Ethnicity County Overall progress Addison 59,9% Bennington 59.8% 49.0% Caledonia Chittenden 59.0% 44,4% Essex Franklin 50.3% Grand Isle 59.8% Lamoille 58.7% Orange 51.6% 50.0% Orleans Rutland 55.7% Washington 58.5% Windham 50.9% Windsor 54.3% 55.8% Vermont





Updated 4/23/2021 8:50:31 AM

VDH COVID-19 Vaccine Dashboard

- Daily updates Tuesday thru Saturday
- Data = counts reported by end previous day; subject to change.
- https://www.healthvermont.gov/ covid-19/ vaccine/ covid-19vaccine-dashboard

NOTE: the reported number of doses delivered on April 9 inadvertently included 22.8K doses that were shipped to Veteran Affairs. The VA doses have been removed from the total reported on April 13.

Vermont Vaccination Data Select County Clear filters By Age - Statewide The percent of the statewide population of each age group that has received at least one dose of the vaccine Age 16 - 17 11.9% 23.7% 18 - 29 40.3% 30 - 39 40 - 49 49.1% 50 - 59 60.7% 60 - 64 74.9% 65 - 69 86.9% 92.9% 70 - 74 75+ 89.2% Vermont 55.8% By Sex - Statewide The percent of the statewide population of each sex that has received at least one dose of the %*

BI N

Sex information is missing for 0% of people vaccinated.

Female

Vermont

Male

Summary

By Age, Sex, Race, Ethnicity

By Race - Statewide

The percent of the statewide population of each race that has received at least one dose of the vaccine

53.7%
33.770
39.3%
7.896
17.0%
37.6%
46.8%
52.9%

Race information is missing for 5% of people vaccinated.

By Ethnicity - Statewide

The percent of the statewide population of each ethnicity that has received at least one dose of the vaccine

Ethnicity	%*
Hispanic	52.0%
Not Hispanic	50.6%
Vermont	50.6%

Ethnicity information is missing for 14% of people vaccinated.

By Race/Ethnicity and Age - Statewide

The percent of the statewide population of each race/ethnicity that has received at least one dose of the vaccine

Race*	16 - 64	65+	Total
BIPOC	38.9%	75.2%	42.9%
Non-Hispanic White	40.3%	82.3%	50.7%
Vermont	40.2%	82.1%	50.2%

Race/ethnicity information is missing for 10% of people vaccinated.

BIPOC refers to Black, Indigenous, and people of color.

*Percentages reported as 95% here indicate >=95%. Values above 95% are suppressed to protect personal health information.

Updated 4/23/2021 8:50:31 AM





61.1%

50.2%

55.7%

VDH COVID-19 Vaccine Registration & Sites

https://www.healthvermont.gov/covid-19/vaccine/getting-covid-19-vaccine

MAKE AN APPOINTMENT

There are enough appointments for everyone who is eligible. Appointments are required. You will make your second-dose appointment when you get your first dose.

ONLINE

MAKE AN APPOINTMENT

Use the blue button above to make an appointment through the state website, which includes clinics run by the Health Department, the National Guard, health care partners, Costco, Hannaford, Price Chopper, Shaws and Walmart.

BY PHONE

Can't make an appointment online or need help? Contact our call center at 855-722-7878.

- To speak with someone in a language other than English, call this number, and then press 1.
- · For people who are Deaf or hard of hearing, you can make a TTY call to this number.

Call Center Hours

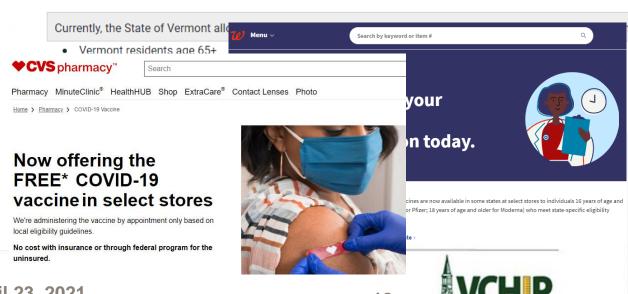
Monday - Friday, 8:15 a.m. – 5:30 p.m. Saturday and Sunday, 10:00 a.m. – 3:00 p.m.

Information you need to make an appointment





COVID-19 Vaccination Scheduling at Kinney Drugs in Ve



Vermont Vaccine Eligibility (updated 4/12/21)

WHEN CAN VERMONTERS SIGN UP FOR A CO	VID-19 VACCINE? VERMONT
Long-term care residents and staff, health care, first responders	Registration open now
Ages 65+	Registration open now
Ages 16+ with certain high-risk health conditions	Registration open now
K-12 teachers and staff, child care, public safety	Registration open now
Ages 60+	Registration open now
Ages 50+	Registration open now
BIPOC households & caregivers of kids with high-risk condition	ons Registration open now
Ages 40+	Registration open now
Ages 30+	Registration open now
Ages 16+	Registration opens April 19
Vermont college students with out of state addresses	Registration opens April 30
Most Vermonters should expect the entire process, from registration vaccine is most effective, to take about two months.	Goal to have Vermonters fully vaccinated by July 2021 Updated 4.12.2





VDH: Getting the COVID-19 Vaccine

Special instructions for 16 & 17 year-olds:

- □ "You will only see appointments for the Pfizer vaccine, since that is the only vaccine that is authorized for people age 16 and 17.
- For the state appointment system and appointments made through CVS, your parent or guardian will need to review the consent forms and check the box giving their consent for you to get the vaccine. Your parent or guardian does not need to go with you to your appointment.
- □ Kinney and Walgreens require a parent or guardian to be present and give consent at the appointment."

https://www.healthvermont.gov/covid-19/vaccine/getting-covid-19-vaccine





NEW: VDH Vaccine FAQ for Vermonters 16 – 17 y.o.

I'm 16 or 17. What do I need to know about getting my vaccine? (4/15/21)

- If you are making an appointment through VDH website, create an account.
 (youth or parent may create), or parent or guardian can add you as a dependent on their account.
- You will only see appointments for the Pfizer vaccine (only vaccine authorized for people age 16-17). May need to look at neighboring cos. if nothing in your co.
- Parent/guardian must review consent forms & check the box giving their consent.
 for you to get the vaccine. Consent built into the registration process, so parent/guardian does not need to accompany youth.
- If appt. directly through Kinney Drugs, CVS, Walgreens or Northfield Pharmacy, check their confirmation email for instructions re: consent from a parent/guardian and requirement to come with you to your appointment.

VDH: Getting the COVID-19 Vaccine

Special instructions for those who live another state:

- "You can still get a vaccine in Vermont if
 - You work in an occupation/setting in Vermont that is currently eligible.
 - You moved to Vermont w/in last 6 mos. w/intention of becoming a resident & are in age, occupation or another group currently eligible.
- April 30: VT expects to open registration to college students who are residents of another state & do not intend to stay in VT for the summer, and people who live part of the year in Vermont will be based on the vaccine supply from the federal government."
 - □ Set up account now, so you'll be ready to make appt. when eligible.





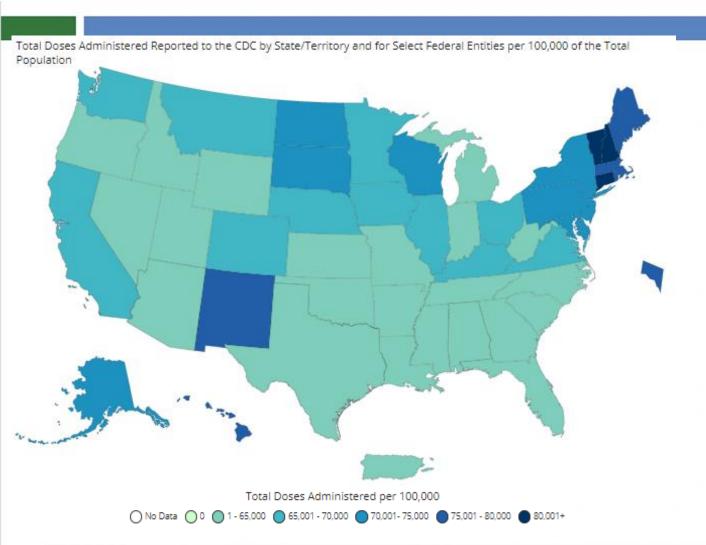
VDH COVID-19 Vaccine Registration & Sites (cont'd.)

- □ Appointments from 4/23/21 7/2/21
 - 258,213 total appointments clinics: health care, VDH (Local/District Health Office POD), and some pharmacies (e.g., Costco, Walmart)
- Online (preferred) for most 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.



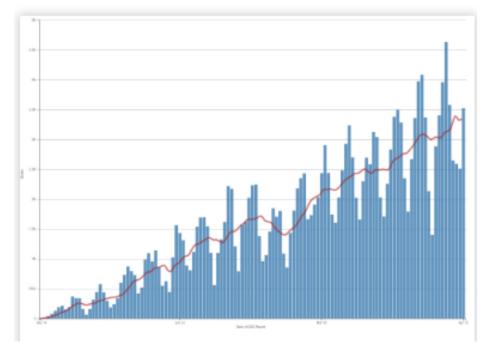


From the CDC Vaccine Tracker [NOTE: revised color coding]



Daily Change in Number of COVID-19 Vaccinations in the United States Reported to CDC

----7-Day moving average



https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html

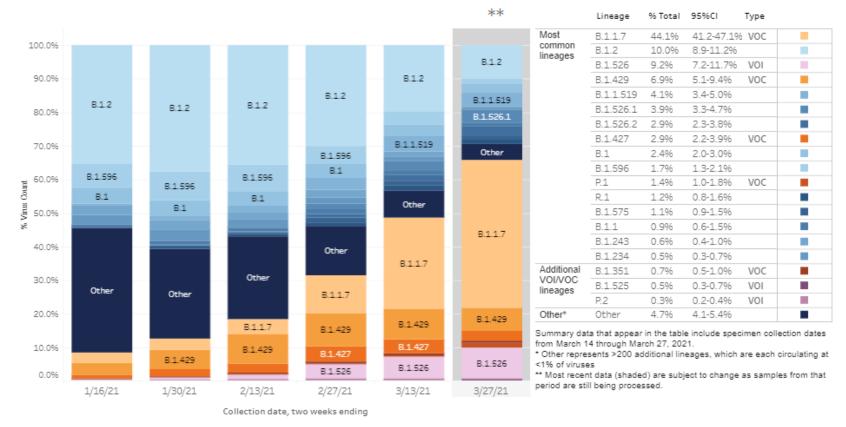




From the CDC: SARS-CoV-2 Variants in the U.S.

SARS-CoV-2 Variants Circulating in the United States

SARS-CoV-2 Variants Circulating in the United States, January 3 - March 27 2021



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T (E)

† Estimated weights come from laboratory data providing the number of reverse transcription polymerase chain reaction (RT-PCR) tests and number of positive RT-PCR test results stratified





From the CDC

- Preliminary Findings of mRNA Covid-19 Vaccine Safety in Pregnant Persons
 - https://www.nejm.org/doi/full/10.1056/NEJMoa2104983?query=featured_home
 - No safety concerns for vaccinated pregnant women or their infants. Over 3,900 women enrolled in v-safe pregnancy registry, both side effect & pregnancy outcomes were similar to those among the general population.
 - Total of 35,691 v-safe participants 16 to 54 years of age identified as pregnant.
 - Injection-site pain was reported more frequently among pregnant persons than among nonpregnant women; HA, myalgia, chills, fever were reported less frequently.
 - Among 3958 participants enrolled in v-safe pregnancy registry, 827 had a completed pregnancy, of which 115 (13.9%) resulted in a pregnancy loss and 712 (86.1%) resulted in a live birth (mostly among participants with vaccination in the third trimester).





From the CDC

- Preliminary Findings of mRNA Covid-19 Vaccine Safety in Pregnant Persons (cont'd.)
 - https://www.nejm.org/doi/full/10.1056/NEJMoa2104983?query=featured_home
 - Adverse neonatal outcomes included preterm birth (in 9.4%) and small size for gestational age (in 3.2%); no neonatal deaths were reported.
 - Although not directly comparable, calculated proportions of adverse pregnancy and neonatal outcomes in persons vaccinated against Covid-19 who had a completed pregnancy were similar to incidences reported in studies involving pregnant women that were conducted before the Covid-19 pandemic.
 - Among 221 pregnancy-related adverse events reported to the VAERS, the most frequently reported event was spontaneous abortion (46 cases).





In the News

- □ ACIP meeting today (11 a.m.):
 - Federal health officials leaning toward lifting recommended pause on Johnson & Johnson vaccine – found only ltd. # of additional cases of blood clotting disorder among recipients; waiting to act until ACIP issues recommendation.
 - CDC Director Walensky said federal officials had found "needles in haystacks," an indication of how thorough the government's oversight was. "We would like to make a decision quickly after ACIP . . . America & world are interested in moving forward."
- FDA considered likely to attach warning to label to inform HCPs & public re: exceedingly uncommon side effect.
 - https://www.nytimes.com/2021/04/22/us/politics/johnson-and-johnson-vaccine.html
 - European regulators have recommended this week that J & J vaccine rollout continue as long as a risk warning was added to the product.





In the News (cont'd.)

- In Vermont: House Health Care Committee identifies crisis re: youth waiting in ED due to lack of mental health services.
 - Testimony by Christian Pulcini, MD FAAP: ED not appropriate place for youth to wait – detrimental to their health & wellbeing.
 - Parents testified on their lived experiences.
 - SEE WCAX story from last evening & link to hearing (YouTube)
- VT Digger story: Unlicensed fight promoter issued top fine for child fighting, pandemic violations
 - <u>https://vtdigger.org/2021/04/22/unlicensed-fight-promoter-issued-top-fine-for-child-fighting-pandemic-violations/</u>
- National (WaPo): "Burned Out by the Pandemic, 3 in 10 HCWs
 Consider Leaving the Profession"

NEW VDH Multilingual Vaccine Resources

- Talking points on J & J vaccine pause translated into several languages – are on translation & multilingual pages.
- Arabic, Burmese, French, Nepali, Somali, Spanish, Swahili,
 Vietnamese, English
- Kirundi in review process & will be posted when ready.
- https://www.healthvermont.gov/covid-19/resources/multilingual-resources
- Multilingual Task Force have also released video on same topic (includes Kirundi & Maay Maay)





Friday Media Briefing (4/23/21)

Governor Phil Scott

DEPARTMENT OF HEALTH

- Will pay close attention to ACIP J & J vaccine discussion this afternoon; "VT preparing for resumption of use" if appropriate.
- On pace for 60% VT adults vaccinated by May 1.
- Continued summer planning by Scott & Sen. Sanders
- □ VT Afterschool web site: >400 offerings listed on interactive map
 - Goal: successful, affordable, impactful summer programs.
- Obstacle from administrators is staffing many full & PT positions summer available across VT.
- VT Afterschool also has web page w/summer employment openings including for HS & college students.
- D ACCD will issue full summer camp guidance in next 24-48 hrs.



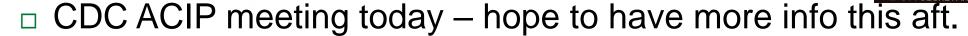
AOE Secretary Dan French

- □ PCR testing: 226 staff (20% usual #); no pos. to date (3rd week in a row) – 0% pos. rate for April.
- Ending surveillance testing for school staff after next week;
 working on pilot for students (incl. summer) w/CDC funding –
 expect updates in coming weeks.
- School meal program funding extended through June 2022.
- ESSER 3 fund guidance (primary federal K-12 relief; 90% to Districts and 10% for state)
- Graduations & proms will be permitted expect additional guidance this afternoon. These events "strongly encouraged."





AHS Deputy Secretary Jenney Samuelson – (Secretary Smith off this week)



- Could begin vax as early as Tues. in NEK.
- Reached another milestone this week: >300K have rec'd. at least one dose (56% of elig. Vermonters – close to step 2 milestone of Vermont Forward Plan).
- April 29: registration opens to out-of-state college students & part-time VT residents.
- BIPOC Vermonters: 52% have been vaccinated or made appt.





VDH Commissioner Levine

- Data continues to move in v. pos. direction: 36% decline in cases in past 2 weeks.
- Positivity rate "dramatically decreased" to 1.2%.
- Two powerful forces at play: virus variants & vaccination.
- □ B.1.1.7 increasing proportion circulating virus in U.S. CDC reports nearly 45% for the 2 weeks ending 3/27/21.
- □ VT #s: B.1.1.7 is well >50% specimens sent for genomic sequencing.
- B.1.429 in several VT cos.; P.1 recently in small # Rutland/Windham Cos.
- But not seeing increased viral transmission so "cautious optimism."





VDH Commissioner Levine

Substance misuse – referenced tomorrow as National Prescription
 Take Back Day

Q & A

- Reporter referenced an individual who developed Bell's palsy 5d. after receipt of vaccine.
- Long haul COVID: "we're aware of a number of patients in this situation" – met with a support group recently.
- Uptake (appointments) among younger age bands: 50% in16-18 y.o.;
 41% up to age 29 y.o.





Practice Issues

Revised Guidance: Child Care & Out-of-School Time

Breena Holmes, MD FAAP – VCHIP Sr. Faculty; physician advisor VDH









Please refer to vermont.gov for complete guidance and additional details. Education and health care retain specialized guidance.

Note: All dates are subject to change.



STEP 1

VACCINATION PROGRESS (FIRST DOSE): Vulnerable population substantially complete; 35-45% of all Vermonters; 45-55% of Vermonters 16+

Business Operations

Group A Sectors:

4/9 Move to required universal guidance

Cross State Travel

No quarantine required with 4/9 negative test within 3 days of arrival in or return to the state

Masks and Physical Distancing



APRIL

Required when in the presence of those outside your household.

STEP 2

VACCINATION PROGRESS (FIRST DOSE): 50-60% of all Vermonters: 60-70% of Vermonters 16+

Business Operations



Group B Sectors:

Move to required universal guidance

Gatherings and Events



Indoor: 1 unvaccinated person per 100 sq ft up to 150, plus any number of vaccinated people

Outdoor: 300, plus any

number of vaccinated people

Masks and Physical Distancing



MAY

Required when in the presence of those outside your household.

STEP 3

VACCINATION PROGRESS (FIRST DOSE): 60-70% of all Vermonters: 70-85% of Vermonters 16+

Cross State Travel

No quarantine or testing requirements

Gatherings and Events

Indoor: 1 unvaccinated person per 50 sq ft up to 300, plus any number of vaccinated people

Outdoor: 900, plus any number of vaccinated people

Masks and Physical Distancing



Required when in the presence of those outside your household.

Business Operations

Universal guidance encouraged for all sectors

Gatherings and Events

No capacity restrictions

Masks and **Physical Distancing**

Encourage

JUNE



Please refer to **vermont.gov** for complete guidance and additional details. Education and health care retain specialized guidance.

VERMONT

Note: All dates are subject to change.

JULY 4

Business Operations

Universal guidance encouraged for all sectors

Gatherings and Events

No capacity restrictions

Masks and Physical Distancing

Encouraged

Childcare and Out of School Time Revised Sections

- Health Screenings and Travel
- Return to Work/Care Post-Vaccine
- Transportation
- Drop off/Pick Up
- Hand Hygiene
- Masks
- Cleaning
- Physical Distancing and Pods
- Volunteers/Visitors

Health Screenings

- All children, their families and staff must comply with and ensure daily monitoring of COVID-19 exposure and COVID-19 symptoms
- Staff and children and/or their families should complete an exposure and symptom screening before arriving at the care. Anyone who has been exposed to COVID-19 (unless <u>vaccinated</u>) or who has COVID-19 symptoms (regardless of vaccine status) should remain home, and should follow <u>Department of Health guidance</u> regarding quarantine and testing.
- Temperature checks should be performed at home before departing for child care/recreational programs. Individuals with a fever (100.4 or greater) should not come to care.
- Children arriving visibly sick to care should be screened (including a temperature check) and sent home if symptomatic.

Travel and Return to work/care after vaccine

- As part of Vermont's phased reopening plan, there is new travel guidance, effective April 9, 2021.
 Except for <u>international travel</u>, no quarantine after travel and test required within 72 hours of return.
- Individuals experiencing symptoms potentially related to receipt of the COVID-19 vaccine may not come to work if they do not pass the health screening. There are some signs and symptoms that could be attributable to receipt of the COVID-19 vaccination, SARS-CoV-2 infection or another infection like influenza. These include fever, chills, fatigue and muscle aches. Students/teachers/staff experiencing these symptoms, regardless of vaccination history, should not attend work and should consult with their health care provider to determine if symptoms are attributable to the vaccine or to infection. If symptoms are determined to be associated with the COVID-19 vaccine, an individual may return to work if they feel well enough to do so.

Bus, Van and Car Transportation

Bus Guidance

- Opening all the bus roof hatches to exhaust bus indoor air unless rain is actively coming inside. Hatches should be partially opened on the rearward side.
- Opening windows to increase outdoor air ventilation
 - Even an inch of opening with at least four windows open can help:
 - Two windows in the front of the bus (each of the front passenger seats)
 - Two windows in the rear of the bus (the very last windows on each side of the bus)
 - Preferably the windows should remain fully open. For modifications for inclement weather, see <u>inclement weather</u> considerations.
 - o If feasible, leave the seat or two behind the bus driver empty. To reduce the number of children riding the bus:.

Transport Considerations for private car and vans

Space out passengers for the available space in the vehicle. Operate the ventilation blowers at full power and 100% outside air, keeping windows open to maximize fresh air and the usual cleaning guidance and asking ill or symptomatic persons to stay home.

The use of masks on buses, vans and private car must follow the Vermont Forward Plan

Drop off and Pick up

• Programs shall structure arrival and departure in a manner that ensures the health and safety of children, staff and families. Signs must be posted at all entrances clearly indicating that no one may enter if they have symptoms of respiratory illness or fever. Staggered drop off is an optional strategy.

• Individuals who show symptoms of COVID-19, are quarantining or are in isolation should not do drop-off or pick-up.

Hygiene, Masks and Cleaning

Hand hygiene

- Basic infection control practices

Masks- follow Vermont Forward

- Required in Step 1, 2 and 3
- Encouraged after Step 3

Cleaning and disinfecting

- Basic infection control practices
- Less attention to surfaces

Cleaning and Disinfecting

- Based on available epidemiological data and studies of environmental transmission factors, surface transmission is not the main route by which SARS-CoV-2 spreads, and the risk from surfaces is considered to be low. The principal mode by which people are infected with SARS-CoV-2 is through exposure to respiratory droplets carrying infectious virus.
- Cleaning surfaces, including high touch using soap or detergent, and not disinfecting, is enough to reduce risk in most situations.

Distancing

Physical distancing in order to reduce the frequency of close contact between individuals is still one of the most effective ways to slow the spread of the SARS-CoV-2.

Physical distancing guidance should follow the Vermont Forward plan.

While physical distancing is still in effect, programs should follow the following guidance:

- Staff and adult visitors or volunteers: 6 feet of distance from other adults and children
- Children and youth: 3 feet of distance from other children, as much as possible

Best practice guidance:

- Be outside as much as possible.
- Plan activities that do not require close physical contact between multiple children.
- When eating, work to maintain as much distance as possible.
- Space out children when waiting in line.
- Avoid opportunities where staff or children are likely to congregate.
- Ensure distance between children when participating in singing and music that involves woodwind or brass instruments.

Rearrange furniture to avoid clustering in common areas.

Volunteers and Visitors

- Outside visitors are discouraged during Step 1 and 2 of Vermont Forward Plan with the exception of
 employees or contracted service providers for the purpose of special education or required support
 services, as authorized by the program or district. Individuals who ensure the health and safety of the
 program, such as STARS assessors, licensors, fire inspectors, maintenance, etc. are allowed when following
 proper procedures and do not count in the group size.
- Volunteers are now allowed if they are considered protected against COVID-19 according to CDC criteria (vaccination or natural infection).
- Student teachers, interns and other learners from established educational programs are allowed. These individuals must follow all precautions outlined in this guidance.
- Field trips are allowed if the program can maintain all health guidance in this document.
- After Step 3 of **Vermont Forward** plan, programs are encouraged to work with their communities and/or families to re-establish practices for visitors, volunteers, field trips, and community activities. This includes regulated programs following child care licensing regulatory requirement for parents to have free access to their child, their child's teacher, and their child's classroom.

Overnight Camps

- Prearrival Protocols
 - Lists of low risk activities to minimize exposure (not quarantine)
- Arrival and travel to camp
 - Evidence of negative test 72 hours before arrival
- Start of season precautions
 - Masks required until end of Step 3 Vermont Forward, then encouraged
- Limited Off-Campus Activity
- Additional considerations
 - Health Screening/Surveillance for Campers
 - Illness Management
 - High Risk Populations
 - Communication with State and Local Public Health Authorities

COVID-19 Vaccine for Adolescents

- Clinical question: patient in need of MCV#2 but also needed COVID-19 #2 how to address timing?
 - (from Bill Raszka, MD): my bias is that the COVID timing should take priority. Unless the vaccine is needed for urgent care (such as a tetanus shot after a deep wound), would schedule routine vaccinations so that they are given either at least two weeks before a COVID vaccine or at least two weeks after a COVID vaccine.
 - May result in additional visits, but if counseling for the vaccination has already been done during the health supervision visit, the patient could simply return for the routine vaccination without a physician visit at that particular time.
 - There is always the risk that we will have some difficulty getting the patient back for the vaccine – but these vaccines are not required for school entry and we have ample time to catch up.





Vermont Afterschool Webinar (with VDH, DMH) Summer Opportunities (4/27/21)



- Focus on: summertime engagement and how to support youth and families to connect this summer.
 - Updated summer health guidance for summer camps & programs
 - Information on language & strategies for parents to reduce anxiety & trepidation as children begin to re-engage w/schools, peers & communities
 - Highlights from new Summer Matters website & interactive map for families to identify summer programs and camps.
- Agenda: Welcome; Health Guidance Updates for Summer Programs; Family Engagement; Vermont After School Website and Maps; Q & A
- □ Register at:

https://www.cognitoforms.com/VermontAfterschool/SummerAmbassadorEngagementWebinar; will receive Zoom link (email) when registration complete.





COVID-19 Vaccine for Adolescents

- Requesting your feedback: are you eager to provide COVID-19 vaccine in your office?
- Are you aware of storage and handling requirements and, if so, is your practice prepared to follow these?
- What resources would you need to administer COVID vaccine in your practice?
- □ Note: AAP COVID-19 web site has many current resources: https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/covid-19-vaccine-for-children/
 - Implementation in pediatric practices; FAQs; what pediatricians can do now; getting paid.





From the AAP

DEPARTMENT OF HEALTH

- □ **President-elect candidates** for 2021 election just announced:
 - Sandy Chung, MD FAAP (Fairfax Pediatric Associates, Fairfax, VA; immediate past-president Virginia chapter)
 - Joseph Wright, MD FAAP (Pediatric Emergency Medicine; Sr. VP & CMO, U. of Maryland Capital Region Health. AAP at-large Board member)
- Now live A AP "course" on Fighting Racism to Advance Child Health Equity available at:
 - From the Peds 21 Symposium, NCE 2020: FREE/register at http://shop.aap.org/fighting-racism-to-advance-child-health-equity; Bitly: http://bit.ly/childhealth-racism (available 4/15-2021 thru 4/14/2024)
- □ In case you missed it: COVID-19 Town Hall (4/23/21) Ask the Red Book Committee, part 3 https://services.aap.org/en/pages/2019-novel-





Vaccine Myth-Busting Video in 11 Languages

Result of collaboration among many partners! (thank you, Melissa Kaulfold)

- Nepali: सारा सोध्नुहुन्छ: साराले कोभिड-१९ खोपको बारेमा डाक्टरबाट धेरै जानकारीहरु सिक्नुहुन्छ। https://www.youtube.com/watch?v=bNkA0K6Euik
- Arabic: COVID-19 ساره تسأل الدكتور لتعرف المزيد عن لقاح https://www.youtube.com/watch?v=3HXu8Fdng7l&t=8s
- Somali: Sara waxay wax ka weydiineysaa tallaalka COVID-19: https://www.youtube.com/watch?v=9BPGUduQNsI&t=7s.
- Spanish: Sara pregunta sobre la vacuna contra el COVID-19: https://www.youtube.com/watch?v=ESHDb_XiCPc&t=17s
- Swahili: Sara Auliza: Sara Anajifunza Zaidi kuhusu Chanjo ya COVID-19
 https://www.youtube.com/watch?v=ICUqTiNhFsw&t=35s





Vaccine Myth-Busting Video in 11 Languages (cont'd.)

- Kirundi: Sara arabaza kugira atahure neza urucanjo rwa COVID19 https://www.youtube.com/watch?v=rprKNl20g9M
- □ **Burmese:** ဆာရာသည်ကိုဗစ်-၁၉ ကာကွယ်ဆေးအကြောင်းကိုပိုမိုလေ့လာခြင်း။ https://www.youtube.com/watch?v=8BSVV_vCFFo
- Maay Maay: Sidi talaalk COVID-19: https://www.youtube.com/watch?v=Fsb-BtG1smU
- Vietnamese: Sara hỏi: Sara tìm hiểu thêm về vắc-xin ngừa COVID-19: https://www.youtube.com/watch?v=FLOG6Dd2Jl4
- French: Sara en apprend davantage sur le vaccin contre la COVID-19: https://www.youtube.com/watch?v=24AlCle6M2w
- English: Sara Asks About the COVID 19 Vaccine: https://www.youtube.com/watch?v=ldq1kyVwZHk





Save the Date!

- What? Child maltreatment conference
- Who? James Metz, MD MPH & other expert speakers
- □ When? April 29, 8 am 12:15 pm via live stream
- □ How? Register at:

http://campaign.r20.constantcontact.com/render?ca=3cdb8290-cfe5-4dbb-b73b-29ecabed13f0&preview=true&m=1130384660698&id=preview



Recognizing and Responding to Child Maltreatment Promoting Child Abuse Awareness in VT Conference

> Thursday, April 29, 2021 8:00am -12:15pm LIVE STREAM

This conference will help the professional to recognize sentinel injuries, sexual abuse and neglect. Participants will learn about the mental health implications of trauma and abuse and will learn strategies for effective reporting.



James Metz, MD, MPH - Course Director
Assistant Professor, Pediatrics
Division Chief, Child Abuse Medicine

Division Chief, Child Abuse Medicine
UVM Larner College of Medicine

"Recognizing Sentinel Injuries" and "Child Neglect"





Save the Date: Friday, June 4, 2021



Course Director David C. Rettew, M.D.

Join us virtually for the 14th Annual Child Psychiatry in Primary Care Conference, featuring faculty from UVM and the community.

Topics this year include:

- Assessing Risks After School Violence Threats
- Mental Health Care Needs in Primary Care
- Child Psychiatry in the Emergency Department
- Integrated Care Forum
- Praising and Overpraising
- Post COVID Mental Health
- Anxiety Disorders
- Motivational Interviewing Techniques
- Social Media Use and Mental Health





Questions/Discussion

- 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 <u>you</u> 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, April 26, 2021 12:15 12:45 pm
- Generally back to Monday/Wednesday/Friday schedule
- Please tune in to VMS call with VDH Commissioner Levine:

Thursday, April 29, 2021 – 12:30-1:00 p.m. – Zoom platform & call information:

- □ Join *Zoom* Meeting:
 - https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVdqdlJ2ZG4yQT09
 - Meeting ID: 867 2625 3105 / Password: 540684
- □ One tap mobile +1 646 876 9923,,86726253105#,,,,0#,,540684#



