VCHIP / CHAMP / VDH COVID-19 UPDATES

Wendy Davis, MD FAAP - Vermont Child Health Improvement Program, UVM
Breena Holmes, MD FAAP – Director of Maternal & Child Health, Vermont Department of Health
April 24, 2020
1) All participants will be muted upon joining the call.
   If you dialed in or out, unmute by pressing #6 to ask a question (and press *6 to mute).

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

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

- Situation update
  - Surveillance
  - Testing

- Other Updates

- Practice Issues:
  - NNEPQIN: L & D policies
  - Developmental screening

- Question and Answer

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

- VDH Public Health Lab: 295 tests (4/23/20)
- UVMMC (4/22/20): 44 rapid (45-minute), 56 (3-hour), 88 other in-house (not incl. home or other pvt.)
- Broad (MIT): 87 tests
- 2 patients in ICU*
- 3 patients on ventilators*
  - *Note: timing issue re: ICU vented number updated daily after 11a.m. and other numbers are updated earlier.

<table>
<thead>
<tr>
<th>Total Cases</th>
<th>827</th>
</tr>
</thead>
<tbody>
<tr>
<td>Currently Hospitalized</td>
<td>12</td>
</tr>
<tr>
<td>Hospitalized Under Investigation</td>
<td>20</td>
</tr>
<tr>
<td>Deaths</td>
<td>44</td>
</tr>
<tr>
<td>Total Tests</td>
<td>14,310</td>
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<tr>
<td>People Being Monitored</td>
<td>19</td>
</tr>
<tr>
<td>People Completed Monitoring</td>
<td>823</td>
</tr>
</tbody>
</table>

Last Updated (M/DD/YYYY): 4/24/2020, 09:46 EDT
Situation update (cont’d.)
COVID-19 Per Capita Tests by County

# tests submitted to VDH by county of submitting provider as of 4/22/2020*
188 tests have undefined locations

*preliminary data subject to change

AHS.VDHGIS@vermont.gov
Help Slow the Spread of COVID-19 By Wearing a Cloth Face Mask

- “Make wearing cloth face coverings a habit whenever we leave home,” & be sure to wear them the right way.
- How the virus can spread: droplets produced when you breathe, speak, or clear your throat - wearing a face covering helps protect people around you from exposure.
- We all still need to stay at least 6 feet away from people, even when wearing a mask, practice good hand hygiene and follow the state’s Stay Home, Stay Safe guidance.
- Commissioner Mark Levine: “Wearing a face covering . . . may be the new normal for some time.” [Note: NOT surgical masks or N-95 respirators]
- For businesses in operation now, employees must wear non-medical cloth face coverings (bandanna, scarf, or non-medical mask, etc.) over their nose and mouth when in the presence of others, according to new guidelines from the Agency of Commerce and Community Development.

Includes detailed instructions for proper use and construction

- Some people should never wear a mask, including children under the age of 2.
“I’ll protect you, you protect me.”

- **Stay home** as much as possible, go out only for essentials.
- **Wear a face covering** when you go out around others.
- **Keep 6 feet away** from others.

[Link to government website](https://www.healthvermont.gov/response/coronavirus-covid-19/resources)
The Business Impact of COVID-19 on Pediatric Practices (6th in a series)

Paulie Vanchiere (PMI) & Chip Hart (PCC, Vermont)

A few takeaways:

- IZ rates were dropping among PCC practices, but “popped up” last week: MMR down 29%, Dtap down 20%; HPV down 40%.
- Concern re: states relaxing school PE requirements: IZ, child abuse, etc.
- Payment data: some paying more for telehealth than FTF care – but it’s early in this story. Also: monitor variability across insurers for codes, etc. “Generally speaking, payment story looks relatively good.”
The Business Impact of COVID-19 on Pediatric Practices (6th in a series)
- Paulie Vanchiere (PMI) & Chip Hart (PCC, Vermont)

A few takeaways (cont’d.):
- **IF you have any “down time now”:** update your website, articles, AAP/Bright Futures handouts. Consider Facebook, “Google yourself,” clean up bills, clinical recall, social media/communication presence.
- Apply for EIDL (a good deal) and PPP (19% of PCC clients had not applied)
- Don’t focus on forgiveness issue (consider cash flow management first).
Five Principles:

- Keep our Eyes on the Data
- Maintain Health Care Readiness
- Increase testing and tracking (continue to make testing more widely available)
- Work Smarter & Work Safer
  - Businesses to develop (phased, methodical) COVID-19 operational plans
  - Continue telecommuting/teleworking
- Play Smarter & Play Safer
Updates: Today’s Media Briefing

- Data showing (strong) Stay Home, Stay Safe order is slowing the spread – “but not time to declare victory” (fewer cases, loss of life should mean better economic outlook in the long run).
- Can allow a few more people back to work
  - Maintain 6-foot distance, wear cloth face masks in public, employees stay home when ill.
  - Training required for employers & employees.
- Next steps:
  - Allow small crews of ≤ 5 outdoors or in unoccupied structures
  - Some businesses open w/max 5 employees
- Businesses w/current curbside/delivery, continue to operate w/minimal # employees.
- Outdoor retail (garden centers ctr., greenhouses but < 10 employees/customers
- AOA reopen NON-TRADITIONAL Farmers’ Markets
Today’s Media Briefing: Federal Role

Peter Welch update by phone

- Federal role: address economic crisis.
- $1200 checks
- Unemployment insurance
- PPP – fund had run out; yesterday passed additional funds. Very popular in VT: (7K businesses received authorization)
  - VT businesses that previously filed applications will hopefully now be approved.
  - Specific authorization to make funds available for VT agricultural industry
- 100b. for health care:
  - 75b. for hosps.
  - 25b. for testing
- Pressure on state revenues: Congress must address
Today’s Media Briefing: Modeling

- Data trends positive: anticipate soon reaching peak of Vermonters w/active virus
  - Confirmed positive case rate <10% is good trend.
- Expected case rate doubling rate = 37d. (27d. last week)
- Supply far above projected needs (PPE, hospital beds)
- Vermonters have shown high compliance with decreasing geographic mobility.
- IHME: VT-specific data expected next week (also included Vermont in small group of states best-positioned to open at appropriate time).
Today’s Media Briefing: VDH

- As byproduct of COVID-era, health care institutions are reporting marked decrease in patients seeking care for heart attack, stroke, etc.
- Research ongoing to understand why – but likely that patients are reluctant to present, worried re: possible exposure to COVID.
- If you have symptoms c/w COVID call your health care professional
- If more serious condition, seek higher level medical care (telephone call, 9-1-1, ED).
Practice Issues

Developmental Screening: On-line ASQ

Breena Holmes, MD, FAAP - Director, Division of Maternal & Child Health, VT Department of Health
HMG uses the ASQ online system. This is a way for parents to complete the screen online either at home or on a tablet in the medical office.

- The **age appropriate interval** is automatically calculated, and the screen is identical to the paper version.

- The screen is **automatically scored**, and the program can see both the entire screen and a summary sheet.

- Programs have **control over their screens and process**. They can set notifications that new screens have been completed, reminders to rescreen and indicate any referrals or follow ups needed.

- HMG is here to create each program a landing page and offer support.
Engage Families in Completing Screening by Offering the ASQ Online Service

HMG offers both the ASQ-3 and the ASQ:SE-2 online.
Family/ Caregiver Experience with ASQ Online

- Landing page can be customized with practice logo and has their own URL for families to access.
- In addition to a welcome and family friendly explanation of what the ASQ is and the importance of developmental screening, it asks for the child’s DOB and weeks premature to calculate which screen to be completed.
Consent and Vermont’s UDS Registry Interface for Improved Coordination and Communication

- All online screens are entered into the UDS registry. The landing page has an online consent and link to the Authorization for Release and Disclosure.

- Parents who do not want their child’s information in the registry complete a paper copy instead.

- Parents will complete a demographic page after providing consent and then they will start the screen.

- The screen takes about 10 minutes to complete.
Screening Date

- I am screening my child today (2020-04-02)
- I screened my child and am entering in the responses to a previous screening

By proceeding with this questionnaire, you agree to allow Help Me Grow Vermont (HMGVT) to review your answers and follow up with you directly. Help Me Grow Vermont will communicate screening results and other basic information about your family with your child’s health care provider and other service providers. When appropriate, a copy of the scored questionnaire in full will be shared with your child’s health care or other service provider to improve support for your family.

Additionally, HMGVT shares developmental screening information with others to provide an overall view of how Vermont’s children are doing and to coordinate support. By clicking “Submit” you are agreeing to share your child’s information and screening results as outlined in the Authorization for Release and Disclosure of Developmental Screening Results. This authorization is voluntary.

For more details, or if you do NOT wish to participate in this online developmental screening program, please contact us.

Note: By clicking “Submit”, you are agreeing to both our Family Access End User License Agreement and any other consent or authorization information outlined on this page.

Submit
VCHIP and ASQ Online Enterprise System

Universal Development Screening Support for Medical Practices

The Vermont Department of Health, Help Me Grow Vermont, and the Vermont Child Health Improvement Program are working together to support universal developmental screening (UDS) in medical practices. See how we can support your work.

Practice not currently screening
Limited capacity to implement screening
- Help Me Grow Vermont facilitates ASQ-3 completion for patients at 3 recommended screening intervals.
  - Practice refers family to HMG
  - HMG sends family ASQ-3
  - Family completes ASQ-3
  - HMG sends practice ASQ-3 results

Practice not currently screening
Want to implement ASQ
- Free ASQ-3 and ASQ- SE2 kits for practice
- Staff ASQ training
- Staff training on operationalizing UDS with office flow
- Staff training on UDS Registry use

Practice currently screening
Interested in electronic ASQ
- Free use of Help Me Grow Vermont’s online ASQ-3 and ASQ-SE2
- Includes system access and staff training
- Data automatically uploaded to UDS Registry

Vermont’s Developmental Screening Registry

Screening results for ASQ-3, ASQ-SE2, and MCHAT
- Review screenings completed by community partners to fulfill the ACO developmental screening quality measure.
- Venue for sharing information across settings
- Physicians, early care and education providers, CCHS, HMG VT, Head Start, Home Health Nursing Services, etc.

Built-in reports for patient and panel management
- Individual patient screening history
- Patients due for screening
- Patients in need of follow-up
- Developmental screening activity (practice screening rates)

https://www.healthvermont.gov/family/babies/vermonts-developmental-screening-registry

For more information, please contact:
Rachel.Wallace-Brodeur@med.uvm.edu
Upcoming topics

☐ Continue to follow telehealth, telephone coverage, other financial relief.

☐ Summer camps/other recreational activities

☐ OneCare Vermont all-payer model adjustments

☐ Dr. Tim Lahey, UVMMC – ethical considerations (May 1, 2020)
Q & A Goal: monitor/respond in real time – record/ disseminate later as needed (and/or revisit next day).

For additional questions, please e-mail:
- vchip.champ@med.uvm.edu
- What do you need – how can we be helpful (specific guidance)?


Next CHAMP call: Monday, April 27, 12:15-12:45 (same webinar/call information – invitation to follow)

Please tune in to VMS call with Commissioner Levine:

Tuesday, April 28, 12:15-12:45
Phone: 1-802-552-8456
Conference ID: 993815551