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 7, 2021









Technology Notes

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).
 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.

Chat (Everyone)	≣∗
Everyone	





Overview

National Public Health Week (NPHW) continues!

- Tuesday theme: Advancing Racial Equity. Today's theme: Strengthening Community.
- Also World Health Day (WHO) theme: Building a fairer, healthier world for everyone
- □ 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 updates; Tuesday media briefing
- Practice Issues: Vermont Forward: Roadmap to Reopening
- Q & A/Discussion

[Please note: the COVID-19 situation continues to evolve very rapidly – so the

information we're providing today may change quickly]

April 7, 2021



#ThankYouPublicHealth



http://www.nphw.org/NPHW-2021



https://www.who.int/westernpacific/news/events /detail/2021/04/07/western-pacificevents/world-health-day-2021



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Vermont: National Public Health Week



Governor Scott NPHW Proclamation (signed April 5, 2021)

- □ Select excerpts:
 - WHEREAS, Vermont's public health professionals and their colleagues have mounted a powerful and effective response to the threat of COVID-19 in order to protect the health and safety of all Vermonters; and
 - WHEREAS, the COVID-19 pandemic has illuminated and exacerbated racial inequities and a growing number of local, state governments and public health leaders have declared racism a public health crisis.
- NOW, THEREFORE, I, Philip B. Scott, Governor, hereby proclaim April 5-11, 2021 as NATIONAL PUBLIC HEALTH WEEK in Vermont.





Vermont: NPHW & Vermont Public Health Association



- Special membership offer in recognition of Sally Kerschner's upcoming retirement: one-time discounted general membership option, titled Sally Kerschner's Retirement Recognition Membership. When applying for general membership (\$40), may use one of the following discount codes, which will be <u>active until May 31, 2021</u>:
 - SALLY10 to receive \$10 off general membership; SALLY20 to receive \$20 off general membership; SALLY30 to receive \$30 off general membership
 - VtPHA Board President, Joyce Gallimore: "Sally (VtPHA immediate past president & current secretary) has always brought her clinical training, keen thought process and professional skills to the activities and challenges that VtPHA has addressed, consistent with its mission to support the health and well-being of all Vermonters. She shows her patience and compassion along with her passion to work with others to ensure that individuals and communities have the opportunity, tools, access to health care and information to live fully functional lives.







Situation update

Nov

2021

New Cases 42 20.442 Total Currently Hospitalized 26 Hospitalized In ICU 6 Hospitalized Under Investigation Percent Positive 7-day Avg. VT New Cases, Probables, Deaths 2.2% People Tested 362,117 Total Tests 1,392,722 Recovered 16,795 82.2% of Cases Deaths 230 1.1% of Cases Last Updated: 4/7/2021, 11:07:58 AM

Mar

VERMONT DEPARTMENT OF HEALTH

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

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April 7, 2021

U.S. 30.8 million+ cases; 556,016 deaths

- https://www.nytimes.com/interactive/2020/us/coronavirus-us-cases.html (updated 4/7/21)
- 4/6/21: 62,004 new cases; 907 d.; 41,672 hosp.
- Past week: average 64,847 cases/day (increase of 19%) from average 2 weeks earlier)
- 2.8 million+ deaths worldwide; 132.5 million+ cases)
- VDH Weekly Data Summary(4/2/21)
 - **No Weekly Spotlight Topic:** Find previous summaries at: https://www.healthvermont.gov/covid-19/currentactivity/weekly-data-summary

Situation update



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 4, 2021

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	109	1074

- □ VT College & University dashboards:
 - **UVM update** (week of 3/29-4/4/21): 54 new cases off campus; 40 on campus; 0 faculty; 3 staff
 - Middlebury College results (updated 4/6/21): 1 new case & 2 active cases.
 - **Norwich University**: 2 current positives



March 31, 2021

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	115	1006

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AOE School Staff Testing Dashboard

School Staff Testing: Weekly Summary





Data source: Vermont Testing/Vaccine Registration System. Updated 4/7/2021 7:15:55 AM



Mar 28

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1,453

1 1,474

Week of March 28; updated 4/7/21

https://education.vermont.gov/news/covid-19-guidance-vermont-schools/school-staff-covid19surveillance-testing/school-staff-covid-19-surveillance-testing-weekly-summary



COVID-19 in Vermont Schools – One Superintendent's View

□ Letter to community from Caledonia Central SU Supt. Mark Tucker (4/6: excerpts)

- ...teetering on the edge of some major school shutdowns because of community spread of Covid-19...46 confirmed cases among staff & students for entire year; all but 12 since end of Feb. vacation period (March 3) & then another half-dozen cases just confirmed.
- Notably, with a few exceptions...NOT due to in-school transmission.
- General sense in healthcare & school communities that recent spread coming from people letting down their guard. Families are visiting other families, kids are visiting their friends, people are gathering in large groups outside, and in many cases not following distancing guidelines and/or wearing a mask. Why now?
- April vacation starting in two weeks; don't know if this will help us to settle things down in the communities, or if it will make things that much worse. If # of absences continues to go up, will reach critical breaking point that I outlined back in October the in-school instruction model will collapse completely under the weight of the remote-instruction demands, and we will be putting kids out of school who do not have the necessary family supports at home to be home.



April 7, 2021



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Summer Programming – Guidance **Preview** (Final TBA)

- VDH, AOE, DCF/CDD: anticipate releasing health/safety guidance for summer programming in mid-April. Although the COVID situation & state guidance are rapidly changing, anticipate that new guidance will cover:
 - Stay home if sick; be outside as much as possible; wear a mask; ensure physical distancing among students/staff, limit close contact activities; practice good hygiene; think before you travel.
 - C/w Governor's announcement: quarantine not req. for visitors to VT or for VTers back from OOS travel. Updated travel policy requires unvaccinated visitors to be tested for COVID-19 w/in 3 days of travel before arriving in VT. Unvaccinated Vermonters must get a test within three days of returning. Testing not req. for vaccinated guests/residents.
 - As of June 1st, indoor capacity limitations are: 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; as of July 4th, no capacity restrictions indoor/outdoor venues.
- VDH will continue to provide contact tracing for all cases in summer program settings, and are available to support programs as they set up for summer.



April 7, 2021





VDH COVID-19 Vaccine Dashboard

vaccine

- Daily updates Tuesday thru Saturday (note: due to technology updates, next update 4/8/21)
- Data = counts reported by end previous day; subject to change.
- https://www.healthvermont.gov/ covid-19/ vaccine/ covid-19vaccine-dashboard
- **NOTE (2/17/21):** to align w/CDC reporting, # of doses rec'd. for VA & VNG were removed from # doses rec'd.; accounted for ~8,300 doses.



Updated 4/6/2021 8:43:26 AM

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VDH COVID-19 Vaccine Dashboard

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 Saturday (note: due to technology updates, next update 4/8/21)
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Vermont	Vaccination	Data
Select	County	

recei

By Age - Statewide

The percent of the statewide population of each age group that has

ed at least one dose of the vaccine				
Age	%*			
16 - 17	5.9%			
18 - 29	16.5%			
30 - 39	26.8%			
40 - 49	28.8%			
50 - 59	3 <mark>6.1%</mark>			
60 - 64	49.5%			
65 - 69	80.0%			
70 - 74	90.3%			
75+	87.5%			
Vermont	42.2%			

By Sex - Statewide

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



Sex information is missing for 0% of people vaccinated.

Sun	nmary		By Age, Si	ex, Race, B

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

By Race - Statewide

Clear filters

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

Race	%*
Asian	27.1%
Black or African American	22.6%
Native American, Indigenous, or First Nation	10.4%
Pacific Islander	4.4%
Two or more races	26.3%
White	41.9%
Vermont	41.0%

Race information is missing for 6% of people vaccinated.

By Race/Ethnicity and Age

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	21.1%	69.1%	26.3%
Non-Hispanic White	25.4%	78.5%	38.6%
Vermont	25.1%	78.2%	37.8%

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

BIPOC refers to Black, Indigenous, and people of color. Updated 4/6/2021 8:43:26 AM

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VDH COVID-19 Vaccine Registration & Sites

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

MAKE AN APPOINTMENT

Use the blue button above to make an appointment through the Health Department website, which includes many partner clinics.

You can also get an appointment at Kinney Drugs, CVS or Walgreens.

See information on appointments, or set up an account now.

ELIGIBILITY

- > People 40 years and older
- People 16 years or older with high-risk health conditions
- > Parents and primary caregivers of children with high-risk health conditions
- Black, Indigenous and people of color (BIPOC)
- > English language learners and people in immigrant/refugee communities
- > Health care personnel and residents of long-term care facilities
- People who work in the public safety system
- School staff and child care workers









Home Pharmacy + Savings + Shop + About Us + Conta

COVID-19 Vaccination Scheduling at Kinney Drugs in Ve



Vermont Vaccine Eligibility (updated 4/5/21)







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

□ Appointments from **4/7/21 – 6/2/21**

- 297,266 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.





VDH Health Update/HAN

- Monoclonal Antibody Treatment for COVID-19 (April 5, 2021; update to Health Update on this topic dated March 3, 2021) – SEE HAN for full details
- □ National guidelines continuously updated/require regular review, as follows:
 - NIH COVID-19 Treatment Guidelines & COVID-19 Treatment Guidelines Panel's statement on FDA EUA of bamlanivimab + etesevimab combination
 - E.g., "insufficient pediatric data to recommend for/against use of these/other monoclonal antibody products for children not hospitalized but w/risk factors for severe disease"
 - FDA EUA statement allows for use of combination in non-hosp. adults & children >12yo (weighing >40 kg) at high risk (per criteria specified) of progression to severe dz/hosp.)
 - Infectious Diseases Society of America (IDSA) treatment guidelines: limited data on efficacy of combination in high-risk patients 12-18 years of age.
- Monoclonal antibodies no longer being allocated by the state; circulating SARS-CoV-2 variants may be resistant to monoclonal Abs.



April 7, 2021



VDH Immunization Program Data Brief (March 2021)

[Note: this slide added after today's call]

also provided

DEPARTMENT OF HEALTH

COVID-19 Impact: Fewer Doses of Routine Childhood Vaccines

- Examines changes in immunizations reported for young VTers from 2019 – 2020 (time period most likely to be impacted by COVID-19)
- □ Infants/toddlers (0-36 mos.): (statewide) decrease of 5.6%
- □ Young Children (4-6 years): decrease of 7.1%
- □ Pre-teens (11-12 years): decrease of 7.3%
- □ Teenagers (13-17 years): decrease of 13.1%
- □ All percentages also shown by county (wide variation)
- □ Comparison of actual doses administered (statewide & by county)



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From the CDC Vaccine Tracker



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/coviddata/covidview/index.html



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

April 7, 2021



From the CDC: U.S. COVID-19 Cases Caused by Variants

Variant	Reported Cases in US	Number of Jurisdictions Reporting		
B.1.1.7	16,275	52		
B.1.351	386	36		
P.1	356	Cases of Variants of Concern in the	United States*†	
				Number of Cases 0 to 0 1 to 150 151 to 300 301 to 450 451 to 600 601 to 750 751+ Filters
VERMONT <u>https://ww</u>	ww.cdc.gov/coronavirus/2019	Territories AS GU MH FM MF -ncov/transmission/vari	ant-cases.btml	Variant B.1.1.7

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

Figure 1. SARS-CoV-2 Variants Circulating in the United States, January 2 – March 13, 2021[†]



	Lineage	% Total	95% CI	Type
Most	B.1.2	15.5	12.3 - 19.3	1
common	B.1.429	8.2	5.9 - 11.4	voc 🛛
lineages	B.1.1.7	32.0	27.7 - 36.6	voc
	B.1.596	3.7	2.7 - 5.1	
	B.1	4.7	3.3 - 6.6	
	B.1.427	4.2	2.9 - 6.1	voc 📕
	B.1.526	6.2	3.5 - 10.6	VOI I
	B.1.1.519	3.4	2.5 - 4.8	
	B.1.243	1.2	0.8 - 1.8	
	B.1.234	1.6	1-2.6	
Additional	P.2	0.5	0.3 - 0.9	VOI
VOI/VOC lineages	B.1.351	0.7	0.4 - 1.3	voc
	B.1.525	0.1	0-0.4	VOI
	P.1	0.4	0.2 0 - 0.8	voc I
Other*	Other	17.6	13.8 - 22.1	

Percentages represent the proportion of viruses belonging to the indicated lineage, based on two weeks of data with collection dates ending March 13. *Other represents >200 additional lineages, which are each circulating at <2% of viruses.

** Most recent data (shaded) are subject to change as samples from that period are still being processed.



https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/variant-proportions.html



In case you missed it... Pediatric Grand Rounds Today (4/7/21)

- Variants, Vaccines, and Vistas: An Update on SARS-CoV-2 William Raszka, MD FAAP, UVM LCOM Professor of Pediatrics; Division Chief Pediatric Infectious Diseases, UVM Children's Hospital
 - Chat Monitor & Provider of Real-Time Responses: Benjamin Lee, MD

□ Outline:

- Defining mutation/variant/lineage/strain
- Variants: emerging faster than expected & not stable; may lead to increased infectivity or reduced susceptibility to vax-generated response/previous infection
- Vaccines: development (beyond mRNA); landscape of prevention against variants; prev. of asympto infection; effectiveness (mRNA); boosters
- Predicting the future for VT learning communities this fall
- Request a link to view the recording: <u>Penelope.Marchessault@med.uvm.edu</u>





#Call Your Pediatrician Campaign

- New PSA to launch April 6
- Depicts parent bringing child to pediatrician for vaccine; parent transforms into superhero
- English and Spanish
- Digital ads on Facebook, Google
- TV and radio
- Toolkit of materials: AAP.org/CallYourPediatrician
- Chapter toolkit





AAP COVID-19 Town Hall Series

- Topic: Ask the Red Book About COVID-19 Part 2
 - Thursday, April 8 at 8:00 pm ET
 - Topic requests/suggestions welcomed
- <u>Town Hall Web Page</u> AAP COVID-19 homepage
 - Access past session recordings with time stamps and register for future sessions



Tuesday Media Briefing (4/6/21)

Governor Phil Scott

- Vermont Forward plan
- Guidance changing as more VTers vaccinated
- Doing more testing & contact tracing (one of the top states) which supports case containment.
- Goal: "give VTers transparent look at how we'll move out of the pandemic."
 - Allow non-profits, community organizations, families to plan events.
 - Help us prepare budget.
 - "We're in the last laps of this very long & difficult race vaccine is the key to getting there."







Governor Phil Scott

- Vaccine progress: # 1 in older age group deaths/hosps. have declined in this age group.
- □ W/in 2 weeks, all VTers will be eligible.
- Vermont Forward: Roadmap to Reopening dates subject to change based on circumstance. Steps defined by quantified vaccine progress. Under Step 1:
 - April 9: Group A, businesses that have little or no contact and are mostly outdoors will move to universal guidance.
- Step 1 also includes a change to travel policy: beginning April 9, we use testing instead of quarantining as a mitigation strategy.







- Travel policy changes (cont'd): unvaccinated VTers returning to VT required to be tested w/in 3 days of return; do NOT need to quarantine.
- Out of state visitors may come to VT & must be tested within 3 days of arrival.
- Vaccinated people can travel without restrictions.
 - Steps: defined by vaccination progress (quantified)
 - Sectors: Group A (low contact, short duration, outdoor, controlled env.) and Group B (longer duration or close contact environments)
- □ By May will have majority of VTers vaccinated; by June, all VTers elig.
- Step 2 (5/1/21): all sectors move to universal guidance except education and health care; expand gathering sizes.



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Governor Phil Scott

Step 3 (6/1/21): no quarantine/testing for cross-state travel.
 Increase gathering size.



- Mask/physical distancing still required; best way to limit spread.
- □ Step 4 (7/4/21): July 4 / Independence Day ("may even vax <16 yo")
- After that, "guidance" only, not mandates recommendations, not requirements. Roughly 90d. to go – stay united so can get back to nl.
 - State motto Freedom & Unity comes to mind these principles are how we'll get through this. Incredibly long hard journey – once in a century pandemic – longer than any of us expected. Dig deep, persevere.
 - Hope each of you see road map as reason for optimism & to make smart choices to do your part for common good – esp. get vaccinated when you can. [stepped away for WH/Governors call]





Tuesday Media Briefing

VT ACCD Secretary Lindsay Kurrle

- □ VT Forward Plan bring economy back
- Thanked Vermont's business community



- Plan involves moving away from sector specific mitigation; focuses on 5 main tenets:
 - Stay home if you are sick
 - Wear a mask
 - Ensure 6' spaces & uncrowded places
 - Practice good hygiene
 - Know the travel restrictions

Mandatory masking/distancing will remain in place





VT ACCD Secretary Lindsay Kurrle

- If we stay on track w/vax, hope will allow for some form of HS & college gatherings. Also, hope to allow event planners to book.
- "Spring is here, the mountains will soon turn green, summer will arrive, and we will keep moving forward."





Modeling – Commissioner Pieciak:

- Continuation of 5 main data trends: elevated case counts driven by younger people; geographical differences in VT case rates; strong vax uptake among eligible; hospitalizations continue to be stable; deaths low/trending down.
- □ 1231 new cases this week; up 41 vs. last week (highest weekly total to date).
- \square Median case age = 27 yo (also seen across the US)
- Vaccine age band coverage & case rates: cases stable/decreased in older; vs. cases trending upward in younger (still awaiting vax); increased the most in 16-29 yo age group.
- Vermont ranks #1 in 65+ vaccination; #4 in total doses administered; #8 in % of population fully vaccinated.



Modeling – Commissioner Pieciak:

- 88% of not yet vax def/prob will get vax. LTCF resident cases low; retired 4 outbreaks but added 2 ("very small").
- VT county per capita case rate variation: higher in Orleans, Caledonia, Chittenden, Rutland.
- Hosps. 7d. trend stable X 6 wks.: this wk. up 12%, but critical care down 28%; expect this as more vulnerable Vters vaccinated. Weekly death trend down.
- □ Forecast from last wk: trend line followed 1st 5d., then dipped.
- □ Even w/recent rise in VT cases, forecast deaths will decrease in April.
- □ Region: Northeast cases flat (1% increase in new cases)

Some U.S. regions seeing cases rise but natl. 7d. rate slowed X last few d.; will monitor re: poss. delayed reporting/lack of testing over Easter weekend rep



AHS Secretary Mike Smith

- □ 42% of Vermonters have rec'd. at least one dose.
- □ Yesterday opened reg. to 40+: 19,500 made appts. as of Tuesday a.m.
- 4600 BIPOC & HH members "starting to see the needle move a little to see vax rates increase & close this gap – much more work to do."
- Good news re: Essex Co. mobile clinics 4/10-11 filled quickly, so increasing # appts. at each of 9 locations.
- □ Upper Valley CT River hospital may help vax VTers
- 30+ registration will begin 4/12 at 8:15 am. As always, encouraged to set up online account ahead of time.

April 7, 2021





VDH Commissioner Levine

- Still concerned re: what we're seeing virus has not gone away.
 Vermont & rest of U.S. seeing more B.1.1.7 & B.1.429
- 4/5/21: Broad Institute found P1 in one Vermont specimen; may be 2X transmissible & assoc. w/reduced susceptibility to monoclonal Ab tx.

Don't yet know county nor travel hx – will share more Friday

 Variants in general spreading throughout VT. Not unexpected but is a concern. Spread more quickly person to person so all need to continue personal mitigation strategies.







VDH Commissioner Levine

- If not vax for now, travel still means quar/testing. Keep in mind if holiday travel or multi-HH gatherings; if you traveled, Friday (4/9) is perfect day to be tested.
- □ Travel: CDC speaking more clearly/sensibly on this topic.
- If fully vax can travel safely w/in U.S. Don't need to test pre-/postunless destination requires. Don't need to self-quar. Wear mask, stay 6' apart, avoid crowds, wash hands often/use hand sanitizer.
- Intl. travel: if vaccinated, don't need test pre-dep. unless destination requires. BUT **should** test before board intl. flight back to U.S. test 5d. after arrival. CDC recs against travel at this time due to rising cases.

Reminder: just 2 weeks till all eligible VTers can make vax appts.
 VERMONT
 April 7, 2021
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VDH Commissioner Levine

- □ My **Top 10 Reasons** for why the vaccines are good:
 - Great stats in published studies & similar effectiveness/safety in real world settings.
 - Safety profile has held up of many months of experience.
 - Work in older people and those in high-risk conditions.
 - Ability to transmit virus to others is substantially reduced.
 - Most of the vaccine stains seem to be handled well.
 - New data is emerging for use in adolescents.
 - Safe/effective in pregnancy; immunity can be passed thru placenta & breast feeding.
 - Duration is at least 6 months and might be much longer.
 - Other countries: case counts steeply dropped after 50% of population vaccinated.
 - In Vermont, since almost 90% vaccination in older population we have seen dramatic

drops in cases, hospitalization, and fatalities.


Q & A

- Q: (for Governor Scott) re: statement released 4/5 evening responding to (social media comments) critical of BIPOC vaccine program. Not the first time – why respond now? Gov. Scott: seeing across the country – I didn't feel people had the right data. Wanted people to be able base arguments on facts & not social media.
 - SEE Governor Scott statement (4/5/21): <u>https://governor.vermont.gov/press-release/statement-governor-phil-scott-about-racist-response-efforts-vaccinate-vermont%E2%80%99s-bipoc</u>
- Q: Are #s of school-aged children w/pos. tests available? Pieciak: weekly # cases in school are in data pres. Good proxy for K-12 aged students. 10-24 yo seeing highest increase; esp. 18-24 yo. Levine: weekly update on web site always a "child slide" w/slice of how it looks over time. Still seeing cases at a decent level in that age group significant proportion are in higher teen range. SEE VDH web site.





Practice Issues

Vermont Forward: Roadmap to Reopening





April 7, 2021



VERMONT FORWARD **ROADMAP TO REOPENING**

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

APRIL

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

Masks and Physical Distancing

Required when in the presence of those outside your household.

Business Operations

STEP 2

VACCINATION PROGRESS (FIRST DOSE):

50-60% of all Vermonters:

60-70% of Vermonters 16+



Gatherings and Events



Masks and Physical Distancing



MAY

STEP 3

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

Cross State Travel

No guarantine or 6/1 testing requirements

Gatherings and Events

Indoor: 1 unvaccinated person per 50 sq ft up to 300, plus any number of 6/1 vaccinated people

> Outdoor: 900, plus any number of vaccinated people

Masks and Physical Distancing

JUNE

Required when in the presence of those outside your household.

JUL

-VERMONT

Business Operations

Universal guidance encouraged for all sectors

Gatherings and Events

No capacity restrictions

Masks and **Physical Distancing**

JUL

Encourage





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

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

Masks and Physical Distancing

Required when in the presence of those outside your household.





Note: All dates are subject to change.

STEP 1 Group A Sectors

- Outdoor Businesses
- Outdoor Recreation and Fitness
- Low or No Contact Professional Services
- **Farmers Markets**
- Retail Operations
- Lodging, Campgrounds, and Other Accommodations

Effective April 9





Note: All dates are subject to change.

STEP 2 Group B Sectors

- Restaurants, Catering, Food Service, Social Clubs and Bars
- Hair Salons and Barber Shops

Effective May 1

- Religious Facilities and Places of Worship
- Close Contact Business like gyms and fitness centers
- Indoor Arts, Culture and Entertainment
- Meetings of Public Bodies
- Manufacturing and Distribution

Clarification re: Travel Policy Changes

\square The new travel policy (4/9/21) is:

- No quarantine is required for unvaccinated visitors with a negative test within 3 days prior to arrival. Unvaccinated Vermonters must be tested within 3 days upon return to the state.
- People who have tested positive for COVID-19 within the past 3 months and recovered do not have to quarantine or get tested as long as they do not develop new symptoms. So:
- Visitors who have tested positive for COVID-19 within the past 3 months do not need a negative test within 3 days before coming to Vermont.
- Vermonters who have tested positive for COVID-19 within the past 3 months do not need to be tested within 3 days of returning to the state.











Note: All dates are subject to change.

STEP 2 VACCINATION PROGRESS (FIRST DOSE): 50–60% of all Vermonters; 60–70% of Vermonters 16+

Business Operations

Group B Sectors:

5/1 Move to required universal guidance

Gathering and Events

5/1 **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

Required when in the presence of those outside your household.





Note: All dates are subject to change.

STEP 3 VACCINATION PROGRESS (FIRST DOSE): 60–70% of all Vermonters; 70–85% of Vermonters 16+

Cross State Travel

6/1

No quarantine or testing requirements

Gathering and Events

6/1 **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.





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

Save the Date: Health Equity Interactive Session

- Program of Northern Vermont
 Area Health Education Center
 (AHEC)
- Stacie L. Walton, MD, MPH, clinical/ academic pediatrician; medical consultant for HCPs/institutions for >25 years; recently retired from Kaiser Permanente (Diversity Champion)
- Details in tonight's email

====== SAVE THE DATE =======



THURSDAY, APRIL 8, 2021 • 1:00 to 3:15 PM

SESSION THREE- Reducing Implicit Bias in Health Care: Moving Toward Equal Treatment

(Thank you, Melissa Kaufold)





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VCHIP ICON Statewide Teleconference

- What: Adaptations and Innovations: Providing Care for Opioid-Exposed Newborns and Their Families in a Pandemic
 - Agenda topics include: Updates on Care; Healing for Healers; Building Resilience to Navigate Through Stressful Times; UVM Center on Rural Addiction; Providers' Experience; Supporting Families – Adapting Home Health Services in Lamoille County
- □ *When:* April 13, 2021, 8:00 a.m. 12 noon
- □ *How:* register at <u>https://qualtrics.uvm.edu/jfe/form/SV_cTK9jFgdHNkXwVM</u>
- More: VCHIP's ICON project partners with the Vermont Department of Health and the University of Vermont Children's Hospital to improve health outcomes for opioid-exposed newborns.
- □ To learn more about our project, visit: <u>https://www.med.uvm.edu/vchip/icon</u>





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=1130384 660698&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 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





Opportunity to Benefit Camp Ta-Kum-Ta

- Who: Mount Mansfield Maple Products, Generosity Brings Joy, & Jen Ellis (crafter, who made Bernie Sanders' Inauguration Day Mittens)
- What: commemorative bottle of pure Vermont maple syrup to benefit Camp Ta-Kum-Ta.
 - Limited-edition bottle featuring custom label inspired by Bernie's mittens to celebrate the movement spurred by Jen Ellis' creation of Generosity Brings Joy – bringing awareness/funding for VT nonprofits (100% profits to Generosity Brings Joy)

□ **How:** visit <u>https://vermontpuremaple.com/</u>

Thank you, Chelsea Cordner!









Questions/Discussion

- □ Q & A Goal: monitor/respond in real time; record/disseminate/revisit later as needed.
- □ For additional questions, please e-mail: <u>vchip.champ@med.uvm.edu</u>
 - What do <u>you</u> need how can we be helpful (specific guidance)?
- VCHIP CHAMP VDH COVID-19 website: <u>https://www.med.uvm.edu/vchip/projects/vchip_champ_vdh_covid-19_updates</u>
- Next CHAMP call Friday, April 9, 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 8, 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#



