Wendy Davis, MD FAAP - Senior Faculty, Vermont Child Health Improvement Program, UVM

Breena Holmes, MD FAAP – VCHIP Senior Faculty & Physician Advisor, MCH Division, VDH

July 28, 2021
Overview

- Closing out *Disability Pride Month*
  - *Americans with Disabilities Act* signed by President George H.W. Bush on July 26, 1990 (Boston held first Disability Pride Day).
  - Get ready for the Tokyo Paralympic Games (8/4-9/5/21)

- Reminder – weekly event schedule:
  - *Summer VCHIP-VDH call calendar* (next slide); Gov. Media Briefings *now Tuesdays only*; VMS calls w/Dr. Levine *select Thursdays only* (next VMS call 8/5/21)

- Situation, VDH, CDC, AAP updates; Tuesday media briefing

- Practice Issues – *Week in Review*

- Q & A/Discussion

*Please note: the COVID-19 situation continues to evolve – so the information we’re providing today may change*
VCHIP-VDH COVID-19 calls: Summer Calendar

- **July**: generally Wednesdays only – **NO CALL JULY 28**
- **August**: generally Wednesdays only (next call August 4) – subject to change as we approach fall school reopening
- **September forward** – TBD!
- Schedule **subject to change** at any time if circumstances warrant!
- Please continue to send your feedback re: schedule/topics to vchip.champ@med.uvm.edu
- VMS calls with VDH Commissioner Levine now select Thursdays only (see next slide)
NEW: VMS Commissioner Call Summer Schedule

**WHAT:** VMS weekly call with VDH Commissioner Dr. Mark Levine

**WHEN:** select **Thursdays** throughout the summer
12:30 – 1:00 p.m.

**HOW:** Zoom - virtual meeting address will remain constant.

Join Zoom Meeting - [https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVPqdlJ2ZG4yQT09](https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVPqdlJ2ZG4yQT09)

Meeting ID: 867 2625 3105
Password: 540684
Dial In: 1-646-876-9923

VMS Commissioner Call

Summer 2021: VMS will host Commissioner Mark Levine on these Thursdays from 12:30 – 1:00pm:

- 6/3
- 6/10
- 6/17 (No Commissioner) VMS Health Care Laws Webinar from 12-1pm: [Register](https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVPqdlJ2ZG4yQT09)
- 6/24
- 7/22
- 8/5
- 8/19
- 9/2
- 9/16

Zoom link: [https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVPqdlJ2ZG4yQT09](https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVPqdlJ2ZG4yQT09)
Meeting ID: 867 2625 3105 / Password: 540684
Dial In: 1 646 876 9923 / Meeting ID: 867 2625 3105 / Password: 540684
### Situation update

**U.S. 34.6 million+ cases; 611,128 deaths**
- Past week: av. 63,248 cases/day (14d. change +145%)
- 4.17 million+ deaths worldwide; 195.3 million+ cases (+5% & +21% 14-day change respectively)

### VDH Data Summary schedule:
- now every other week for the summer; then will likely move to monthly updates in the fall. Will only provide spotlight analyses as needed! (Latest: 7/16/21)

- Children (0-19) = 23% of VT COVID-19 cases; of those, 24% are 18-19 y.o. [Total 5,575 posted 7/16/21]
- Vaccine breakthrough cases = 276 since Jan. 2021 (~0.07% of fully vaccinated)

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**New Cases**

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<td>44</td>
<td>24,804 Total</td>
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**Currently Hospitalized**

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<td>5</td>
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**Hospitalized In ICU**

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**Hospitalized Under Investigation**

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**Percent Positive 7-day Avg.**

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<td>1.6%</td>
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**People Tested**

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<td>412,975</td>
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**Total Tests**

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**Recovered**

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97.5% of Cases

**Deaths**

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<tr>
<td>259</td>
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1% of Cases

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NOTE: VDH Dashboard now be updated Mon-Fri only (excl. holidays). Case info reflects counts as of end of the previous weekday. Data from Sat/Sun posted w/Monday's update. All data are compiled by the VDH; are preliminary & subject to change. Dashboard is updated by 12:00 p.m.

Last Updated: 7/28/2021, 10:37:39 AM

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Same report as the School Aged Children report renamed to COVID-19 Pediatric Cases to clarify that the age groupings for the summer incorporates all children.
COVID-19 Pediatric Cases

Rates by Week by Age Category

All rates are calculated per 10,000 people. Data is preliminary and subject to change.

July 28, 2021
ELIGIBILITY

Anyone age 12 and older is eligible to be vaccinated, regardless of residency. Learn about vaccines for people 12-15 years old.

GET YOUR FREE VACCINE WITHOUT AN APPOINTMENT!

- Find a walk-in clinic here
- People 12 - 17 years old
- When to talk to your health care provider

APPOINTMENTS ARE ALSO AVAILABLE

- Make an appointment for a free vaccine

COVID-19 Vaccination Scheduling at Kinney Drugs in Rutland

Currently, the State of Vermont allows Kinney Drugs Pharmacists to administer COVID-19 vaccines to the following:

- Vermont residents age 65+
- K-12 teachers and onsite staff
- child care workers

Schedule your COVID-19 vaccination today.

Now offering the FREE* COVID-19 vaccine in select stores

We’re administering the vaccine by appointment only based on local eligibility guidelines. No cost with insurance or through federal program for the uninsured.
Daily updates Tuesday thru Saturday

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

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

Notes: See our progress toward the Vermont Forward target of 80%...percentages draw on state-level data from CDC; incl. some data not reported to VDH (CDC data more inclusive/less detailed than VDH & may differ from VDH dashboard).
VDH COVID-19 Vaccine Dashboard (Age/Sex/Race/Ethnicity)

- Daily updates Tuesday thru Saturday
- Data = counts reported by end prev. day; subject to change.

By Age – Statewide (> 1 dose):
- 12-15 = 63.9% (62.8% on 7/21/21)
- 16-17 = 72.0% (71.4% on 7/21)
- 18-29 = 57.7% (57.3% on 7/21)
- VT Age 12+ = 79.6% (79.2% on 7/21)
Cumulative Number of US COVID-19 Vaccine Recipients Under Age 18

4.07.21 to 7.21.21

Fully Vaccinated
At Least One Dose^$

^Includes those having received only 1 of 2 doses and those fully-vaccinated.

Source: AAP analysis of data series published by the CDC titled “Demographic Trends of People Receiving COVID-19 Vaccinations in the United States.”
Cumulative Number of US COVID-19 Vaccine Recipients Under Age 18 by Age Group

4.07.21 to 7.21.21

**At Least One Dose^**

- **Age 16-17**
- **Age 12-15**
- **Age 0-11#**

**Fully Vaccinated**

- **Age 16-17**
- **Age 12-15**
- **Age 0-11#**

^Includes those having received only 1 of 2 doses and those fully-vaccinated. Vaccinated children as percentage of all children within age group. # According to the CDC Coronavirus Disease Response Team, children under age 12 may be included as vaccinated due to (1) birthdate entered incorrectly, or (2) ongoing COVID-19 vaccine clinical trials involving children under age 12. * CDC-calculated vaccinated children as percentage of all children within age group.

Source: AAP analysis of data series published by the CDC titled “Demographic Trends of People Receiving COVID-19 Vaccinations in the United States.”
As of July 21, 2021:

Proportion of US Children Ages 12 to 17 Who Received At Least One Dose of the COVID-19 Vaccine by State of Residence

[Map showing the proportion of children ages 12 to 17 who received at least one dose of the COVID-19 vaccine by state.]


New addition: Weekly updates will be posted Fridays on AAP.org
Map of COVID-19 Vaccine Rates by (VT) Town

- Map shows overall % of VTers age 12+ vaccinated with ≥ one dose of COVID-19 vaccine.
- Map updated weekly (Thurs.) & includes data reported to VT Immunization Registry thru Wed. [Note: last reviewed 6/29/21]
- Please use caution when interpreting town data – several scenarios where vaccinations are not attributed to the correct town. [See web site notes for details.]

[Map]

https://www.healthvermont.gov/covid-19/vaccine/map-vaccine-rates-town
From the CDC Vaccine Tracker

Total Doses Administered Reported to the CDC by State/Territory and for Select Federal Entities per 100,000 of the Total Population

7-Day moving average

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


July 28, 2021
Note striking preponderance of Delta variant (dark orange) in far right column, two weeks ending 7/17/21.
Again note striking preponderance of Delta variant (dark orange) across all HHS Regions (two weeks ending 7/17/21).

VDH detects variants of concern through genetic sequencing of certain viral specimens (people who already tested pos. in various parts of VT); only a small percentage of samples are sequenced.

Table: cumulative # variants identified & co. of residence (NOT actual # variants circulating).

Absence of a county in table does NOT mean variant is not present (table updated Wednesdays).

CDC Health Advisory Network (HAN)

- CDC Issued a Health Advisory Network Advisory 7/27/21
  - Urgent need to increase COVID-19 vaccine coverage
  - 300% increase in COVID-19 cases over the last month
  - Ongoing disparities in vaccination coverage across population groups and geographic areas
  - Delta variant account for >80% of cases and is more infectious
From the AAP:
Upcoming New/Revised Interim Guidance

• Supporting the Emotional and Behavioral Health Needs of Children *(revised)*
• Post-COVID Conditions in Children and Adolescents *(new)*
From the AAP: Preventing Childhood Toxic Stress

- Revision of 2012 policy
- Toxic stress = ACEs – SSNRs (safe, stable & nurturing relationships)
- Promotion of relational health
  - Prevents adversity & toxic stress
  - Builds resilience, or ability to adapt to adversity
Question raised re: coverage on 7/14 call (thank you, Colleen Moran!)

NICU team supportive (informal polling) of extending Synagis coverage for NICU at risk patients & even considering initiating treatment for eligible infants recently or to be discharged. Question of payment issue?

HHS Region 1 trend notable:
https://www.cdc.gov/surveillance/nrevss/rsv/hhsregion.html#hhs1

NY DOH extended the 2020/2021 RSV season until 8/15/21
(https://newyork fhsc.com/providers/CDRP_synagis.asp)

VDH declared RSV season over in March – need to request reopen/extend it if the case rate is going up.

DVHA Policy Team was to discuss 7/20/21 – will f/u
Governor Phil Scott

- Approaching 84% (12+ who’ve started) & 75% (fully vaccinated) Vermonters.
- We’re not letting up – what we’re seeing across the country explains why. Low vax = increased cases/hosps, driven by Delta variant.
- Vaccine effective against all variants so far, incl. Delta.
- As CDC Director put it, this is becoming a pandemic of the unvaccinated – on a much smaller scale, here in VT also.
- Cases in VT increased slightly; still w/very low hosps. & 1 (July) death.
- Lots of attn. to so-called breakthrough cases.
- To avoid getting/spreading…we hope you’ll get vaccinated today or at least talk to your health care provider.
Governor Phil Scott

- 16 months ago, we didn’t think we would have vaccines by now. We have multiple highly effective & safe vaccines that can put this pandemic to an end.

- Still ~90K Vermonters not vaccinated – younger people are lagging:
  - 22 – 29 year-olds: 66% vaccinated
  - 18 – 21 year-olds: 50% vaccinated.
  - 16 – 17 year-olds: 71% vaccinated.
  - 12 – 15 year-olds: 63% vaccinated.

- With school just 5 weeks away, now is time to protect youth. If you haven’t gotten around to it, never too late to protect self & others.
Modeling – Commissioner Pieciak:

- ~5 weeks ago, cases began to rise in U.S. 4 weeks ago, cases rose in Northeast. 3 weeks ago, cases rose in Vermont. Vermont is not an island – our vaccination rates have kept cases lower.

- 171 new cases this week – most among those not fully vaccinated.

- New analysis: average case rate in fully vax vs. not fully vax – shows how stable case rates among fully vax X last 4 mos. (SEE next slide)

- Forecast: cases to remain elevated near future due to Delta variant.

- Cont’d. VT vax progress: 2,153 VTers past week (83.6% of 12+).

- U.S. seeing increased vax, esp. in MO, AR, LA, and FL.

- UK cases trending down past 6d. – 1st positive sign. We’re ~4-5 weeks behind the UK in terms of case growth.
Vermont COVID-19 Cases per 100K (14-Day Average)

- **April 1st**
  - 14-Day Average: 2.6
  - Fully Vaccinated: ~127,000
  - Case Rate: 2.09

- **July 26th**
  - 14-Day Average: 5.3
  - Fully Vaccinated: ~420,000
  - Case Rate: 1.24

*Source: VT Dept. of Health – July 26, 2021; “fully vaccinated” defined as 14 days following final dose*
Tuesday Media Briefing (cont’d.)

AHS Secretary Mike Smith

- Thank you VTers for stepping up to get vax: 74.7% of all eligible fully vax.
- Various opportunities to get tested – esp. if you’ve traveled to place w/spike, may wish to test upon return to VT (and esp. if unvaccinated).
- Testing at >23 locations thruout VT (SEE VDH web site). Will soon transition to COVID Resource Centers (will offer both testing & vax).
- Many sites for **walk-in vaccine**: pharmacies, incl. hospital-based; urgent care clinics; pop-ups (markets, skate park, EMS, flea markets, farmers markets, VT Distillers, Ascutney Outdoor Club, Bellows Falls Old Home Days, Stowe Community Church, Thunder Road).

July 28, 2021
VDH Commissioner Levine

- As a country, we’re in an unfortunate stage of the pandemic.
  - Positive trends reversing where vaccination is low.
  - Picture still hopeful in VT – hospitalizations & deaths remain low.

- Focus on emerging questions, new studies, boosters, variants. We cont. to follow science & monitor new info. What we DO know:
  - Best way to protect yourself is to get vaccinated. If vaccinated, you’re highly protected against severe illness, hospitalization, and death.

- Not being vaccinated leaves you vulnerable and risks spreading the virus; also risking more dangerous variants.

- We are here to help along with your doctor, family, and friends. Don’t become part of the pandemic of the unvaccinated.
Breakthrough cases are not at an epidemic level.

Data continues to show that vaccinated are less likely to experience serious illness, hospitalization, or death.

If you’ve already had COVID, we don’t know how strong your protection is. Get vaccinated. You can get vaccinated as soon as you’ve completed the 10-day quarantine period. Wait 90 days if you’ve received monoclonal antibodies.

Consider getting tested, regardless of vaccination status, if you have traveled or have symptoms.

ACIP mtg. last week: not currently recommending additional or booster dose.

Testing: w/positivity rates around U.S. & world, get tested if you travel to places w/more virus circulating.
Select Q & A:

- **Q:** VA mandating vaccine for front-line health care workers (also some states) – thoughts? Scott: Not in VT – we’re in much better position than other states & that’s not necessary.

- **Q:** CDC will announce guidelines for masking indoors where there are high infection rates – thoughts? Scott: CDC reported having new data that supports in some places infection rates are high enough to warrant mitigation tactics. VT should not see much of an impact; could possibly impact travel guidance.

- **Q:** Thoughts about masks indoors in schools? Levine: meeting about that now and will have guidance soon (possibly next week).
Select Q & A:

- **Q:** Do you expect to see some restrictions return, such as for people entering the state? Levine: we don’t have data that warrants that right now. We’ve been stable – not a reason to take alarmist stance or make major changes. Scott: we have to reflect on how far we’ve come – think back to a year ago. Now we have people moving freely including going to fairs.

- **Q:** Have fully vaccinated Vermonters been hospitalized or died? Levine: in total, 5 hospitalized and 1 death.

- **Q:** Should Vermonters consider behavioral modifications?

  - We have guidance and a webpage on how to protect yourself. People with compromised immune systems should be more cautious.

  https://www.healthvermont.gov/covid-19/protect-yourself-others
Select Q & A:

- **Q:** Gov. Sununu signed a medical freedom bill – should VT have that?
  - No. We have 84% vaccinated and climbing. We’re in a better position than NH. We don’t need that, we have allowed people to make their own position. We try to educate.

- **Q:** Do you have an update on your request to meet with northern governors about the boarder?
  - We’re still waiting – brought it through the channels with Natl. Governors’ Association; waiting for other Governors to sign on.
Select Q & A:

- **Q:** Smoky skies yesterday/poor air quality – any thought impact on those w/long COVID being outside all day? Levine: more of an issue for those w/chronic respiratory disease. Wish we knew enough about long COVID – under real time study now. Some pts. have SOB & poor exercise tolerance; others w/just fatigue or brain fog syndrome. No good data re: irreversible lung damage w/long COVID.

- **Q:** Vaccine uptake by primary care? Levine: # fully enrolled/trained is v. high. People who will benefit most are those who want comfort of that site. Seeing increases – not dramatic. Part of a multi-pronged strategy.

- **Q:** anticipate ins. cos. charging higher premiums for unvaccinated? Pieciak: no – regs. require coverage for prevention, inpt. & outpt. treatment.
Select Q & A:

Q: Is AOE asking school dist to prepare for both hybrid & IP? French: at this point, full IP instr. No instru. For both remote & IP.

Any change in amt. of genomic sequencing? Levine: CDC has 50-state approach – random sample state to state; Broad partnership; VT Public Health lab performs on some samples. CDC v. small #, less predictable timing (weekly). Broad = batch, so can take several weeks. PH lab much quicker but still # of days to a wk. & only sm # samples at that lab. VT seeing more Delta variant for sure. CDC also looks at 15 states (not VT): Delta is leading variant, B.117 is second.
Practice Issues

The Week in Review (July 21 – 28, 2021)

https://www.burlingtonfreepress.com/
From the CDC: Interim Public Health Recommendations for Fully Vaccinated People

Summary of Recent Changes (Updated as of July 27, 2021 given new evidence on the B.1.617.2/Delta variant currently circulating in the U.S.):

- Added a recommendation for fully vaccinated people to wear a mask in public indoor settings in areas of substantial or high transmission.
- Added information that fully vaccinated people might choose to wear a mask regardless of the level of transmission, particularly if they are immunocompromised or at increased risk for severe disease from COVID-19, or if they have someone in their household who is immunocompromised, at increased risk of severe disease or not fully vaccinated.
- Added a recommendation for fully vaccinated people who have a known exposure to someone with suspected or confirmed COVID-19 to be tested 3-5 days after exposure, and to wear a mask in public indoor settings for 14 days or until they receive a negative test result.

Summary of Recent Changes (cont’d.):

- CDC recommends universal indoor masking for all teachers, staff, students, and visitors to schools, regardless of vaccination status.

Key Points:


- Fully vaccinated people can:
  - Participate in many of the activities that they did before the pandemic; for some of these activities, they may choose to wear a mask.
  - Resume domestic travel and refrain from testing before or after travel and from self-quarantine after travel.

Key Points (cont’d.):

- Fully vaccinated people can:
  - Refrain from testing before leaving the United States for international travel (unless required by the destination) and refrain from self-quarantine after arriving back in the United States.
  - Refrain from routine screening testing if feasible.

- Infections happen in only a small proportion of people who are fully vaccinated, even with the Delta variant. However, preliminary evidence suggests that fully vaccinated people who do become infected with the Delta variant can spread the virus to others. To reduce their risk of becoming infected with the Delta variant and potentially spreading it to others: CDC recommends that fully vaccinated people (see next slide):

From the CDC:
Interim Public Health Recommendations for Fully Vaccinated People

Key Points (cont’d.):

- CDC recommends that fully vaccinated people:
  - Wear a mask in public indoor settings if they are in an area of substantial or high transmission.
  - Fully vaccinated people might choose to mask regardless of the level of transmission, particularly if they or someone in their household is immunocompromised or at increased risk for severe disease, or if someone in their household is unvaccinated. People who are at increased risk for severe disease include older adults and those who have certain medical conditions, such as diabetes, overweight or obesity, and heart conditions.
  - Get tested if experiencing COVID-19 symptoms.
  - Get tested 3-5 days following a known exposure to someone with suspected or confirmed COVID-19 and wear a mask in public indoor settings for 14 days after exposure or until a negative test result.


July 28, 2021
From the CDC: Interim Public Health Recommendations for Fully Vaccinated People

Key Points (cont’d.):

- CDC recommends that fully vaccinated people:
  - Isolate if they have tested positive for COVID-19 in the prior 10 days or are experiencing COVID-19 symptoms.
  - Follow any applicable federal, state, local, tribal, or territorial laws, rules, and regulations.

- People who are immunocompromised should be counseled about the potential for reduced immune responses to COVID-19 vaccines & to follow current prevention measures (including wearing a mask, staying 6 feet apart from others they don’t live with, and avoiding crowds & poorly ventilated indoor spaces) regardless of their vaccination status to protect themselves against COVID-19 until advised otherwise by their healthcare provider.

Pfizer: 3rd dose can “strongly” boost protection against Delta variant (data by company, 7/28/21; not peer-reviewed).

CDC considering a potential 3rd dose for immunocompromised individuals.


Joint Statement in Support of COVID-19 Vaccine Mandates for All Workers in Health and Long-Term Care (almost 60 orgs., including AAP)
  - “Our health care organizations and societies advocate that all health care and long-term care employers require their workers to receive the COVID-19 vaccine.”
In Other News

- COVID-19 Outbreaks at summer camps across the U.S.

- VT Digger commentary by Sosin, Winterbauer & Hoen: “Vermont should reopen schools cautiously”

- CNN: “How residents are living in America's most vaccinated state” (7/28/21)
From the CDC: Health Advisory – July 6, 2021

- Magellan Diagnostics, Inc. & U.S FDA issued recall notice concerning use of some LeadCare® Blood Lead Tests (certain LeadCare II, LeadCare Plus, and LeadCare Ultra test kit lots).
  - Lots were distributed between October 27, 2020, and June 15, 2021. Use of these devices may cause serious injuries because – might underestimate blood lead levels. **The FDA has identified this as a Class I recall, the most serious type of recall.**

- Recommendations:
  - Discontinue use of all affected test kit lots identified as part of the recall.
  - Retest children tested w/ recalled LeadCare test kits whose results were less than 5 µg/dL, the current CDC-recommended blood lead reference value. Retesting should be done with a venous blood sample analyzed with higher complexity testing.
  - Retest children who were previously tested with a LeadCare test kit if the lot number of the initial test kit is unknown and the test was done after October 27, 2020 and July 6, 2021, the date of this health advisory.
In case you missed it… (6/21/21)

Update: Blood Lead Screening in Vermont – Matt Saia, MD

- Content included: current data for pediatric screening and elevated blood lead levels (opportunity for improvement!)
- VCHIP-AAPVT-VDH outreach activities to improve screening and reporting performance
  - Opportunity to obtain point-of-care screening technology/supplies for free!
- VDH recommendations and materials
- Recommendations for practice improvement – e.g., nominate a Lead Champion to:
  - Identify patients who require screening; perform outreach; establish screening & reporting work flows
- Contact: Matthew.Saia@uvmhealth.org & Jill.Davis@med.uvm.edu
Annual State of the Department!

- Preview: this year’s book is **Upstream** by Dan Heath
  - Subtitle: *The Quest to Solve Problems Before They Happen*

- Please contact: Penelope.Marchessault@med.uvm.edu for a link to view asynchronously.
AAP-VT Resources

Available for your use!
• PowerPoint presentation
• Video message from AAP-VT Chapter President Rebecca Bell: “We are so excited that the COVID Vaccine is available for young people…."
• Posters for your office
• SEE ALSO AAPVT press release 6/10/21:
VCHIP-VDH COVID-19 calls: Summer Calendar

- **July**: generally **Wednesdays only** – **NO CALL JULY 28**
- **August**: generally **Wednesdays only** – subject to change as we approach fall school reopening
- **September forward** – **TBD!**
- Schedule **subject to change** at any time if circumstances warrant!
- Please continue to send your feedback re: schedule/topics to vchip.champ@med.uvm.edu
- VMS calls with VDH Commissioner Levine now select Thursdays only (see next slide)
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 you need – how can we be helpful (specific guidance)?
- Next CHAMP call – **Wednesday, August 4, 12:15 – 12:45 pm (YIKES!)**
- SEE VCHIP-VDH COVID-19 Call **Summer Calendar** for our new schedule!
- Please tune in to VMS call with VDH Commissioner Levine: **Thursday, August 5, 2021 – 12:30-1:00 p.m. – Zoom platform & call information**
  - Join Zoom Meeting: https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVdqdIj2ZG4yQT09
    - Meeting ID: 867 2625 3105 / Password: 540684
    - One tap mobile - +1 646 876 9923,,86726253105#,,,,,0#,540684#