VCHIP / CHAMP / VDH COVID-19 UPDATES

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Breena Holmes, MD FAAP – VCHIP Senior Faculty & Physician Advisor, MCH Division, VDH
November 17, 2021
1) All participants will be muted upon joining the call.

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

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

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

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

- National Take a Hike Day
- Also World Peace Day
- Reminder – weekly event schedule:
  - Nov. – Dec. VCHIP-VDH call calendar (next slide); Gov. Media Briefings generally Tuesdays only; VMS calls w/Dr. Levine select Thursdays only
- Situation, VDH, AAP updates
- Practice Issues: COVID-19 Vaccine & School Updates
- Q & A/Discussion

[Please note: the COVID-19 situation continues to evolve – so the information we’re providing today may change]
November-December generally Mon. & Wed. except as below:

- Next call Monday, November 22, 2021
- **NO CALL** Wednesday, November 24 – Happy Thanksgiving!
- November call dates: 11/1 (M), 11/10 (W), 11/17 (W), 11/22 (M)
- December call dates: 12/1 (W), 12/8 (W), 12/15 (W), 12/22 (W)
- **NO CALL** week of 12/27/21; calls will resume 1/5/22 (W)
- **ANNOUNCING**: we will switch to Zoom platform on 12/22/21
- 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 Comm. Levine now select Thursdays only (next 2 slides)
VMS Calls with Health Commissioner Levine: Fall Schedule

- **Generally** held *first Thursday of each month*
- A few exceptions when they will be held the *third Thursday of the month*:
  - next Commissioner call 12/2/21
- VMS also hosts “COVID-19 Clinical Conversations” call the *third Thursday of the month*
  - Next Clinical Conversation call **THIS WEEK**: 11/18/21
- Summary: VMS calls are held the first and third Thursdays of the month from 12:30 to 1:00 p.m.
  - Join Zoom Meeting: https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVdqdlJ2ZG4yQT09
  - **Meeting ID**: 867 2625 3105  **Password**: 540684  **Dial In**: 1-646-876-9923

November 17, 2021
5
VMS Commissioner Call
Fall/Winter 2021 Schedule

& COVID-19 Clinical Conversations

Join us this Fall/Winter 2021: VMS will host Commissioner Mark Levine on these specific Thursdays from 12:30 – 1:00pm. VMS will also host COVID-19 Clinical Conversations with local experts on relevant issues facing Vermont health care clinicians on the other listed Thursdays from 12:30 – 1:00pm:

- Sept 2, Commissioner
- Sept 16, COVID-19 Clinical Conversation
- Oct 7, COVID-19 Clinical Conversation
- Oct 21, Commissioner
- Nov 4, Commissioner
- Nov 18, COVID-19 Clinical Conversation
- Dec 2, Commissioner
- Dec 16, COVID-19 Clinical Conversation

Zoom link: https://us02web.zoom.us/j/86726253105?pwd=VkJVnuNTJ1ZFO2R3diSVdWfUZGyQQT09
Meeting ID: 867 2625 3105 / Password: 540684
Dial In: 1 646 876 9923 / Meeting ID: 867 2625 3105 / Password: 540684
Situation update

One year ago: 3104 VT total cases; 95 new/17 hosp.

U.S. 47.2 million+ cases; 764,592 deaths
- Past week: av. 85,861,834 cases/day (14d. change +14%)
- 5.1 million+ deaths worldwide; 254.2 million+ cases (-3% & +13% 14-day change respectively)

VDH Data Summary now q.o.week. 11/5/21: NO Weekly Spotlight topic

Rates/10K COVID-19 cases highest among 0-11 y.o. (45.6, 9/27-11/3/21)

Children (0-19) = 25% of VT COVID-19 cases; of those, 17% are 18-19 y.o. [Total 10,176 posted 11/5/21]

Vaccine breakthrough cases = 6,011 since Jan. 2021 (~1.3% of fully vaccinated). Find previous summaries at: https://www.healthvermont.gov/covid-19/current-activity/weekly-data-summary
Rates of COVID-19 are currently highest among 0-11 year olds.

Rate per 10,000 of COVID-19 Cases by Age Group (October 27 – November 3)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Rate per 10,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-11</td>
<td>45.6</td>
</tr>
<tr>
<td>12-19</td>
<td>29.2</td>
</tr>
<tr>
<td>20-59</td>
<td>36.0</td>
</tr>
<tr>
<td>60+</td>
<td>20.4</td>
</tr>
</tbody>
</table>

*November 2021 is a partial month of data. Rates currently shown are likely an under-representation.

Vermont Department of Health
Vermont Children and COVID-19

The percent of COVID-19 cases with no symptoms is higher among children. About one quarter (24%) of cases among children had no symptoms reported.

<table>
<thead>
<tr>
<th>Sign or Symptom</th>
<th>Percent of Children with Symptom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Runny Nose</td>
<td>56%</td>
</tr>
<tr>
<td>Cough</td>
<td>50%</td>
</tr>
<tr>
<td>Headache</td>
<td>41%</td>
</tr>
<tr>
<td>Fatigue</td>
<td>38%</td>
</tr>
<tr>
<td>Sore Throat</td>
<td>34%</td>
</tr>
<tr>
<td>Muscle Pain</td>
<td>22%</td>
</tr>
<tr>
<td>Loss of Smell/Taste</td>
<td>21%</td>
</tr>
<tr>
<td>Fever</td>
<td>20%</td>
</tr>
</tbody>
</table>

5 days
Average illness duration among children

Among Vermont's children with COVID-19, there are currently no reported cases of multi-system inflammatory syndrome or deaths, and 10 hospitalizations.

Please note the number of children hospitalized decreased on September 9, 2021 due to new information gathered as part of routine data cleaning.

Vermont Department of Health

60% of children with COVID-19 had known contact with somebody else who had COVID-19.

21% of children with COVID-19 were part of an outbreak.

This brief reflects data as of November 13, 2021 at 5 pm (the last complete MMWR week). All rates are calculated per 10,000 people. Data is preliminary and subject to change.

Number of Cases by Week

3000

![Bar chart showing the number of COVID-19 pediatric cases by week from January 9, 2021 to October 30, 2021. The chart includes two bars for each week, one for total pediatric cases and one for total non-children cases. The data shows an increase in cases over time.](chart_url)
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.
COVID-19 Cases in VT K-12 Learning Communities (While Infectious)


- VT College & University dashboards:
  - **UVM update** (week of 11/8-14/21): 12 pos. tests off campus; 9 on campus; 0 faculty; 1 staff.
  - **Bennington College** (as of 11/16/21): 9 total active/0 new active cases.
  - **St. Michael’s College** (week of 11/8): 651 tests; 35 student pos.; 1 employee pos.
United States: Number of Child COVID-19 Cases Added in Past Week

4.23.20 to 11.11.21

Note: this week marks 14 straight weeks with >100K child cases added

Source: AAP analysis of publicly available data from state/local health departments
Note: 5 states changed definition of child cases: AL as of 8/13/20, HI as of 8/27/20, RI as of 9/10/20, MO as of 10/1/20, WV as of 8/12/21
TX reported age for only a small proportion of total cases each week (eg, 3-20%); TX cumulative cases through 8/26/21
As of 8/30/21, NE COVID-19 dashboard is no longer available; NE cumulative cases through 6/24/21
Due to available data and changes made to dashboard, AL cumulative cases through 7/29/21
Due to available data and calculations required to obtain MA child cases, weekly estimates fluctuate (eg, on 11/1/21, 5,437 cases were added)
**GETTING THE COVID-19 VACCINE**

**NEW!** Find out about vaccines for children ages 5 to 11.

Make an appointment for your first, second or booster dose through a [pharmacy](https://www.healthvermont.gov/covid-19/vaccine/getting-covid-19-vaccine) | the Health Department | your health care provider.

**GET EXTRA PROTECTION WITH A BOOSTER SHOT!**

You should get a booster if you are 18 or older and you received:

- your Johnson & Johnson vaccine [at least two months ago](https://www.healthvermont.gov/covid-19/vaccine/getting-covid-19-vaccine) or
- your second dose of Pfizer or Moderna vaccine [at least six months ago](https://www.healthvermont.gov/covid-19/vaccine/getting-covid-19-vaccine)

See [Frequently Asked Questions about boosters](https://www.healthvermont.gov/covid-19/vaccine/getting-covid-19-vaccine)

**GETTING A BOOSTER VACCINE TYPE DIFFERENT FROM YOUR ORIGINAL VACCINE**

Once you are eligible for a booster shot, no matter which vaccine you got originally, your booster can be the vaccine type of your choice: Pfizer, Moderna or Johnson & Johnson.

**WHERE TO GET YOUR BOOSTER SHOT, FIRST OR SECOND DOSE**

Anyone age 5 and older is eligible to be vaccinated regardless of residency. Please make an appointment for your shot.

[Use the map](https://www.healthvermont.gov/covid-19/vaccine/getting-covid-19-vaccine) to find a site near you! Prefer a text listing? See Vaccine Clinics listing.

› [Vaccine clinics](https://www.healthvermont.gov/covid-19/vaccine/getting-covid-19-vaccine)
VDH COVID-19 Vaccine Dashboard: a NEW LOOK!

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

**Notes:** Vermont Forward percentages use data from CDC, which includes some data not reported to VDH; these estimates may differ from those reported elsewhere in the dashboard.
VDH COVID-19 Vaccine Dashboard (“Statewide” view)

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

- By Age – Statewide (> 1 dose):
  - 5-11 = 18% (incr. from 3% 11/10/21)
  - 12-17 = 78/5 (78% on 11/10/21)
  - 18-29 = 65% (64% on 11/10/21)
  - VT Age 5+ = 81% (79% on 11/10)
Cumulative Number of US COVID-19 Vaccine Recipients Ages 12-17

Fully Vaccinated
At Least One Dose^ 

Fully Vaccinated: 14.7M
At Least One Dose: 12.4M

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

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

VT: 81%
CT: 80%
MA: 82%
NH: 64%
NJ: 72%
DC: 80%
RI: 79%
MD: 75%
81%

Source: AAP analysis of data series titled “COVID-19 Vaccinations in the United States, Jurisdiction”, CDC COVID-19 Data Tracker (URL: https://data.cdc.gov/Vaccinations/COVID-19-Vaccinations-in-the-United-States-Jurisdiction). Idaho information not available. Check state’s web sites for additional or more recent information as of 11.10.21

DE: 60%
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

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

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

United States: 8/6/2021 – 11/13/2021

**US**

<table>
<thead>
<tr>
<th>WHO label</th>
<th>Lineage #</th>
<th>US Class</th>
<th>%Total</th>
<th>%..</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delta</td>
<td>B.1.617.2</td>
<td>VOC</td>
<td>99.9%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>AY.1</td>
<td>VOC</td>
<td>0.3%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>AY.2</td>
<td>VOC</td>
<td>0.0%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>Other*</td>
<td></td>
<td>0.0%</td>
<td></td>
</tr>
</tbody>
</table>

* Enumerated lineages are US VOC and lineages circulating above 1% nationally in at least one week period. "Other" represents the aggregate of lineages which are circulating <1% nationally during all weeks displayed.

** These data include VeroCell estimates, which are modeled projections that may differ from weighted estimates generated at later dates.

Collection date, last ending:


November 17, 2021
From the CDC: SARS-CoV-2 Variants in the U.S.


November 17, 2021
From the **AAP-VT Chapter:**

**Grants to Support Flu & COVID-19 Vax by HCPs**

Offered in collaboration with VDH Immunization Program

- Health care professionals (HCPs) encouraged to offer expanded services to increase influenza and/or COVID vaccine coverage, including, but not limited to, longer or designated hours, off-site clinics, or additional staffing

- **Scope of Grant - Providing Support for Vaccination Clinics**
  - Assess barriers to pediatric COVID-19 and/or seasonal influenza vaccinations in communities served & in collaboration with community organizations.
  - Implement COVID-19 and/or seasonal influenza vaccination clinics in communities to address identified barriers, emphasizing outreach to high-risk populations or those with limited access (e.g. assisting living communities, senior housing, schools, children under the age of 18 and their care givers).
  - Expand access to these vaccines at primary care practices through patient outreach, vaccine promotion, and expansion of vaccination services.
Scope of Grant (cont’d.)

- Offer off-site, weekend, and after-hours COVID-19 and/or seasonal influenza vaccination clinics at selected locations to meet the need(s) of the community served (e.g. schools, shelters, meal sites, etc.)

- Health Care Practices/Organizations may receive $1000 per clinic held (up to a maximum of $5000 total).
  - Applications may include clinics held retrospectively starting Sept. 1, 2021.
  - Applications will be reviewed on receipt and funds will be distributed upon receipt of final project report.
  - **Applications must be received by November 19, 2021.** Immunization clinics that are part of this grant must be held and reported on by March 31, 2022.

- If interested, please complete application & email to swinters@vtmd.org
☐ Happening **NOW**: Round 2 of Family Forums!


☐ Thank you to colleagues who have stepped up to participate!


*Thank you Becca Bell, Stephanie Winters!*
AAP-VT Family Forums (cont’d.)

Join Us for a conversation about COVID-19 vaccine for children

All events held from 7-8:00 pm

Monday, November 22, 2021
with Colleen Moran, M.D.
(Lamoille)
Join Zoom Meeting

Tuesday, November 30, 2021
with Alex Bannach, M.D.
(Newport)
Join Zoom Meeting

Thursday, December 2, 2021
with Tracy Tyson, M.D.
(St. Albans)
Join Zoom Meeting

Monday, December 6, 2021
with Monica Benjamin, M.D.
(Middlebury)
Join Zoom Meeting

Wednesday, December 8, 2021
with Judy Orton, M.D.
(Bennington)
Join Zoom Meeting

Monday, December 13, 2021
with Stanley Weinberger, M.D.
(Burlington)
Join Zoom Meeting

Wednesday, December 15, 2021
with Sarah Weidhaas, M.D.
(Springfield)
Join Zoom Meeting
FDA aiming to authorize booster doses of Pfizer-BioNTech’s COVID-19 vaccine for all adults as early as tomorrow (11/18/22) – would expand number of Americans eligible for additional shots by tens of millions, according to people familiar with the agency’s plans.

CDC’s ACIP has scheduled a meeting for Friday (11/19/22) to discuss data on booster dose efficacy and safety.

If both FDA & ACIP/CDC sign off this week, will have acted a little more than a week after Pfizer asked for authorization of boosters for everyone 18+.

FDA is expected to rule without consulting its own expert panel. Broad booster authorization has been viewed as something of a fait accompli for weeks.

Recent Sesame Street/CNN town hall on COVID-19 vaccines for younger children. Pediatrician Edith Bracho-Sanchez is featured toward the end.

https://wdrv.it/65de5631c
Slides 33 – 40 are courtesy of the American Academy of Pediatrics
(From 11/17/21 Chapter Chat)
Reminder: AAP COVID-19 Town Halls

• Next Town Hall **Thursday, November 18, 8 pm Eastern**: session will begin with brief presentation on *pediatric COVID-19 research* by National Institute for Child Health and Human Development (NICHD) pediatric leader, Dr Robert Tamburro. Presentation followed by *facilitated Q&A*.

• **Expert Panelists:**
  – James Campbell, MD MS FAAP - AAP COID, Professor, U. of MD School of Medicine
  – Karen Puopolo, MD PhD FAAP – Chief Section on Newborn Medicine, Assoc. Professor, U. of PA Perelman School of Medicine
  – Robert F. Tamburro, MD, MSc FAAP – Sr. Advisor for Clinical Research, NICHD

• **Find previous recordings on AAP COVID-19 Town Hall webpage:**
COVID-19 Interim Guidance Updates

• Recently Revised and Posted
  – Testing
  – MIS-C
  – Face Masks

• Currently in Revision
  – Outpatient Treatment
  – Post-COVID conditions
  – PPE
  – Emotional-Behavioral Health
  – Children and Youth with Special Health Care Needs
  – Newborn Care
  – Breastfeeding
  – Family Presence
COVID-19 Vaccine: Latest FAQs

• What if the wrong dose or formulation is given?
  The CDC Interim Clinical Considerations (Appendix A) includes a table that outlines interim recommendations for COVID-19 vaccine administration errors and deviations.

• Can I use the "extra dose" in the 5-11 product vial?
  No, current CDC guidance is to discard the vial after withdrawing 10 doses from the Pfizer-BioNTech COVID-19 vaccine vial for 5-11 year olds (orange cap). Partial doses from different vials should never be combined to make up a full dose.

• How long is the 5-11 product good for following dilution?
  Vials should be discarded 12 hours after dilution. Vial labels and cartons may state 6 hours after the first puncture. The updated 12-hour timeline from the FDA Fact Sheet supersedes the information printed on the vial labels and cartons.
Federal Rules: Employer Vaccine Mandates

OSHA Employer Mandate
- Employers 100+ must implement a mandatory COVID-19 vaccination or weekly testing policy
- Effective January 4, 2022
- Exempted employees: remote work, work without any other individuals present, exclusively outdoor work
- Exceptions: health care settings subject to the Health Care ETS (ie, most pediatric practices)

Current status:
- 34 lawsuits filed and 5th Circuit Court of Appeals issued emergency injunction halting implementation
- 6th Circuit will hear the case, likely appeal to Supreme Court

CMS Facility Requirement
- Both clinical and non-clinical employees at health care facilities that participate in Medicare or Medicaid must be vaccinated (no testing alternative option, exemptions for valid medical or religious reasons, or 100% telework)
- Includes independent contractors who provide services regularly (eg physicians with hospital privileges)
- Applies to FQHCs, RHCs, hospitals, nursing facilities, etc.
- Effective January 4, 2022

Current status:
- 12 states filed a lawsuit but no emergency injunction in place
MOVEMENT IN CONGRESS: INFRASTRUCTURE INVESTMENT AND JOBS ACT AND BUILD BACK BETTER ACT

- President signs the Infrastructure Investment and Jobs Act (aka Bipartisan Infrastructure bill) after House vote of 228-206
- Key highlights of the $1 trillion bill:
  - $15 billion to replace lead service lines
  - $30 billion in other clean drinking water investments
  - $11 billion in infrastructure investments for Native communities
  - $11 billion for transportation safety programs
  - $65 billion in broadband investments
- Build Back Better Act awaiting CBO score
- Looming deadlines for fiscal year 2022 appropriations and debt ceiling limit
BUILD BACK BETTER ACT HIGHLIGHTS

- Paid Medical and Family Leave
- Child Care and Universal Pre-K
- Climate Change
- Children’s Coverage: CHIP PERMANENT!
- Child Tax Credit
- Child Nutrition
- Immigration
COVID-19 Vaccine Administration and Counseling

- New CPT codes for ages 5-11
- Payment at CMS-established level ($40/administration)
- Payment for counseling even if administration is not also provided
Information for Families

New animated videos for families
• How mRNA COVID-19 Vaccines Were Developed
• COVID-19 and Kids: How mRNA Vaccines Work

New articles on HealthyChildren.org
• Getting Your Child Ready for the COVID-19 Vaccine
• Ask the Pediatrician: My child is about to turn 12. Which COVID-19 vaccine should they get?
• Ask the Pediatrician: Was the COVID-19 vaccine rushed?
• Ask the Pediatrician: If my child had COVID already, do they need the vaccine?
• When All Four of Our Kids Got COVID

HealthyChildren Facebook Live today at 12:00 p.m. ET, AAP President Lee Savio Beers, MD, FAAP, answers parents’ questions about the COVID-19 vaccine for 5- to 11-year-olds.
Hey Parents!
Make-a-Plan!

EASE THE ANXIETY
YOUR CHILD
EXPERIENCES
WHEN GETTING A
COVID-19 VACCINE

Get a social story and more resources at:
vermontfamilynetwork.org/ccfk

CONFIDENT CARE FOR KIDS
VAX VISITS WITH LESS STRESS

VAX VISITS WITH LESS STRESS

Getting a vaccination can cause fear, frustration, and isolation for children and their caregivers who are trying their best to protect them from harm.

CONFIDENT CARE FOR KIDS IS HERE TO HELP!

For a social story and more resources, go to:
vermontfamilynetwork.org/ccfk
Governor Phil Scott

- Important for VTers to use common sense & take precautions as we approach holidays.
  - Get vaccinated! ¾ hospitalizations & 70% new cases are among unvax.
  - VT leads U.S. in boosters for >65 yo. Past 30d. case rate for >65 yo declined ~2.5%

- “Given where we are right now, VTers should wear a mask indoors.”

Be smart about indoor events; use testing as a tool.

- Take a test pre-gathering – esp. if planning to be w/elderly at Thanksgiving.
- Working to increase access to treatments like monoclonal Abs: FL & TX have had success w/this strategy.
- Perpetual State of Emergency & unilateral executive authority not healthy for us/our democracy.

- 44 others states, incl. 17/23 w/Democratic Governors, do not have mandates.
Governor Phil Scott

- Legislative leaders made clear they believe statewide mask mandate & further mandates needed right now. I disagree & proposed a compromise – call back for special session with sole purpose to give municipalities the authority institute mask mandates.
- Would end 4/30/22, & municipalities must revote q. 30d.
- VT League of Cities & Towns asked for this last week – I see it as a compromise. “I’ve been clear w/them: this is as far as I’m willing to go & will veto anything else.”
- From news today it appears Legislature is planning to come back. We’ll move forward on our end. Taking steps to protect vulnerable VTers & health care system. “Don’t mistake lack of mandates for lack of actions.”

Tuesday Media Briefing (cont’d.)
Modeling – Commissioner Pieciak

- VT’s case #s: ~2500 over past wk. (increase ~260). 7d. Average up by ~16% over last 7d. & up 42% over last 14d. Slight slowing past 3d.
- Positivity rate remains high.
- Case rate for unvax 3.9x > fully vax rate; hosp. rate for unvax 2.2x > fully vax; 79% ICU patients not fully vax.
- Testing stable: VT currently doing most testing per capita in U.S.
- 5-11 yo has highest case rate among all age groups – almost double any other age groups.
- Signif diff cases by age last mo: those <25 incr 74%, 25-49, 65+ rate steady/decr ~2% over that time. Most vuln age grp. Entire pop case rates 64%, hosp 28% last 30d., ICU rates ~same. Impcte of keeping most vuln protected. Booster doses are making a diff: VT vs. other states. SEE BAR CHART: INSERT
Vermont ranks 1st with 55.2% of fully vaccinated people 65+ with a booster dose.
Modeling – Commissioner Pieciak

- Most cases in unvax: rate ~3.9X higher than fully vax. Former incr more quickly than latter. Hosps: more adm not fully vax by ~2.2X rate of fully vax. Those curr hosp: ~1/4 not vax – esp in ICU (79% in ICU not fully vax.). Fully vax spending less time in hsop. Fully 12% less time; over 65 ~22% less time.

- Cases by region: NEK cont to have hi case cts; fr Co. elev; 2 cos now on radar Rut & Benn. Rates comparable to NEK. Rest of VT holding pretty steady.

- Higher ed: campus calmed down: 60 cases own from 103. 60 in line w/seeing much of fall sem.

- LTC: 15 active Obs. up from ~7 last wk: 103 cases vs. 218 this week. This wk signif # of cases are among staff.

- Fatalities: 19 in Nov. adding 6d. From last wk.

What lies aghaed: forecast & TG.
Modeling – Commissioner Pieciak

- Post Hall last & this yr – incr. cases. Last TG: not nec incr cases. Decr due to decr testing. But in following wks, cases decl. After Xmas & NY, went up again. Last yr at TG asked mitig. Saw in mobility data: 2019-2020 close to 65% reduction in TG travel. We enc again this yr. We know we can do it.

- Forecast: trended on higher end this spast wk. This wk cont to show elvation: not antic. cases to go down. Uncer w/TG holiday. Don’t expect cases to go down.

- Vax: 1\textsuperscript{st}/2\textsuperscript{nd} doses at or near top on most vax measerues. Same for boosters. ~26.5% of those fully vax have rec’d booster. #1 in US but room for improvement. 65+: really high uptake in boosters.
VT AOE Secretary Dan French

- Test to Stay (TTS – daily Ag tests X 7d.) is part of larger response testing strategy – strikes a better balance between risk mgt. & student exclusion.

- To date: ~35 Sus/SDs enrolled in TTS, 17 independent schools. 51K kits ordered. 81 schools have conducted testing; 2600 administered last wk. 13K parental consent forms logged into system.

- Logistical aspects: staffing = key challenge; SDs are using non-clinical staff.
  - E.g., Maple Run (Franklin NE): 150 close contacts last wk. – implemented TTS w/in 48 hrs. Enrolled ~50 students – avoided loss of ~220 school days for those students.

- Lower rates will mean more closure, fatigue among staff. Staff efforts heroic but not sustainable.
VT AHS Secretary Mike Smith

- 15,991 5-11 yo have had 1st dose or have appt. Just >36% of this age group. VT rec’d 7K addtl. doses pedi vax above orig allocation. Allows to begin distribution of >3K doses to 42 pedi & family medicine practices.

- Boosters: ~131K of have rec’d. – 65+ rec’d. the most & cases among that group going down.

- Monoclonal Abs: working w/hospitals & EMS to assure availability – now available at most hospitals.

- Hospital capacity update: 80 addtl. subacute care beds open – frees up needed hospital capacity. Last week we asked hospitals to open 10 addtl. ICU beds – we will provide financial support to help staff.
VDH Commissioner Mark Levine:

- Start w/sidebar: appreciation to Sen Patrick Leahy. Has been/remains natl. leader for public health: land mines, steadfast support for WIC program, funds for fighting opioid use crisis. His efforts have saved many lives.

- Announcement of my own about all of us: “the pandemic is not over.” Many people simply done thinking about COVID. Virus continues to evolve & fight back every step of the way. Getting closer to virus being endemic – but VT not there yet. Virus spreading at hi levels in our communities; threatens our health care system.

- We know from many Halloween gatherings & one college campus outbreak – gathering indoors maskless is a recipe for not just new cases but for those cases potentially coming into contact w/more vulnerable. VTers. Transition from pandemic to endemic not far off.
VDH Commissioner Mark Levine:

- Starts w/Thanksgiving: all looking forward to reconnecting w/family & friends but can be risky. Vaccine is best layer of protection – but still need your help.
- Have the talk before you go: once called the COVID talk – but now focus is on vax. All fully vax or extra precautions for hi-risk: mask when not eating. As a host, you have the right to inquire & set the rules.
- Keep it small: more people & households, higher chance of spread.
- Get tested: before you gather – free PCR no later than 11/22 to make sure results in time. Extra w/rapid Ag closer to gathering. Good tool if you have access. Use one Tues-Wed and other TG day to assure negative result accurate.
- If any (even mild) sx$s, pls make hard/right choice to skip dinner & stay home.
- Stay outdoors when poss.; get tested 5-7 days after even if fully vax & no sx$s.
VDH Commissioner Mark Levine:

- COVID booster & flu vax take 2 wks. to be fully effective.
- Update on contact tracing (CT) work flow: w/Delta so contagious, & hi # of tests, we need a much faster system to enable VTers to do the right things. If you test pos: immediately begin isolation at home away from others; immediately start reaching out to close contacts to let them know. May not get call from CT as quickly as you can do these actions. Use VDH web site tools to help stop further spread: infectious period, close contact defs. & guidance; timeline to end isolation, when to seek medical care; translated materials for those in need.
- VDH is still CT but focus on people at highest risk: LTC, health care settings, schools, correctional facilities, other hi-risk settings. Expect when cases decrease CT will continue to be a successful strategy.
Practice Issues

COVID-19 Vaccine & School Updates

From North Country Pediatrics: immunized 125 pts. 11/13/21 (NCH/VDH)

Question re: breaking quarantine to attend vaccine clinic? Concerns: admin. challenges in younger age group / risk to vaccinators; if pt. in quar. becomes pos., risk to other families; effect of concurrent illness & vaccine effects.

VDH response: getting vax during quar. is OK except if symptomatic. Children w/appts. at school-located clinic can come to appt. even if in home quar. so as not to miss appt.

From the CDC (NOTE: differs from VDH recommendation):

- Unvaccinated people in the community or in outpatient settings who have had a known COVID-19 exposure should not seek vaccination until their quarantine period has ended to avoid potentially exposing healthcare personnel and others during the vaccination visit; also avoids diagnostic confusion between possible adverse effects of vaccination and symptoms of a new COVID-19 diagnosis.

Happy Pedi Vaccine News & Pics!

Vermont

Proud To Be Vaccinated

Colorado

AAP BOD Member and Peds ID physician Dr. Meg Fisher (Halloween 2021)
From VDH: NEW Marketing/Materials for Pediatric Vaccine

https://www.healthvermont.gov/covid-19/vaccine/vaccines-children

**COVID-19 VACCINES FOR CHILDREN**

A vaccine made for kids  
Answers for parents  
Talking to kids about vaccines  
Where to get vaccinated

#LittleArms

KIDS AGE 5 TO 11 CAN GET PROTECTED WITH A COVID-19 VACCINE JUST FOR THEM!

A VACCINE MADE FOR KIDS

Getting our children vaccinated will keep them safe and healthy, and help stop the spread of COVID-19 in our communities. It also means more freedom so Vermont kids can be kids. They can see friends and family, travel and stay in school — all with less worry.

Same vaccine, smaller dose

Children 5 to 11 will receive the Pfizer BioNTech COVID-19 vaccine. The dose is specially made for this age group - one-third the size of the dose for people 12 and older. This provides enough protection with the least potential for side effects. Just like adolescents and adults, children will receive two doses of the vaccine given three weeks apart.

Vermont pediatricians are hosting online conversations about COVID-19 vaccines for children! See how you can join in.

How we know the vaccine is safe and effective for younger children

COVID-19 vaccines were developed after decades of research. While the COVID-19 virus itself is relatively new, scientists have been studying these types of viruses, known as coronaviruses, for decades. Children's immune systems are different at different ages. They are also different from adults. This means that the vaccine studies done for adults and older children needed to be repeated with younger children. A recent study found:

- **Effectiveness:** The vaccine was found to be 90.7% effective in preventing COVID-19 in children age 5 to 11. Immune responses of children age 5 to 11 were comparable to those of teens and young adults.
- **Safety:** The vaccine's safety was studied in approximately 3,100 children age 5 to 11 who received the vaccine and no serious side effects have been detected in the ongoing study. Millions of people have been safely vaccinated against COVID-19, including over 100 million people fully vaccinated with the Pfizer vaccine. That includes 12.6 million fully vaccinated 12- to 17-year-olds, and 31,000 12- to 17-year-olds here in Vermont.

Find more answers in these FAQs about children's vaccines 🙌

**Vaccine Education Sessions**

Vaccine Education Sessions are open to members of the public!

- **In-person tomorrow, Wednesday, Nov 17, 5:00 P.M.** at the Alburgh Community Education Center.
- **Online Dec 1, 5:00 P.M.** Register to attend.

All are welcome! Special thanks to our partners and health professionals from The University of Vermont Health Network and Northwestern Medical Center.

Learn about vaccines for 5-11 years olds in this video from Dr. Andrea Green: 😁阿拉伯 | 🇨🇻Soomalee | Français French | Kriuldi | हिन्दी Nepal | Soomaalii Somali | Español Spanish | سوامالي Swahili | Tiếng Việt Vietnamese

TALKING TO KIDS ABOUT VACCINES

November 17, 2021
Clinical Scenario

- Clinical question: 4 y.o. h/o COVID-19 positive early Sept. after identified as close contact. Parent now reaches out with this update:
  - Over the weekend, pt. had cold sx (stuffy runny nose & slight cough); stayed home Monday – acted fine all day but said that everything eaten tasted bad (same thing they said when had Covid at beg. of September. Could they have it again already? As far as I know we haven’t been in contact with anyone. Should they get tested just in case? I might be over reacting could very well just be a cold but I just don’t want to risk it and spread it. I will keep them home again today but if you could just reach out when you can it would be greatly appreciated!

- If managing as COVID re-infection, they cannot return until at least 10 days following symptom onset. The advantage of testing is that if negative, they could return once symptoms resolve (if earlier than 10d.). If positive, then they would not be excluded for any longer than they would have been without a test, if your practice has been to just exclude.
We are hearing from schools about families that are sending knowingly symptomatic students to school of late. We realize this is most likely done out of necessity, but with such high case counts the risk that symptoms are actually COVID is higher than it has been in the past.

We need your help to message this – schools are doing so at the local level, but would be great to *amplify the message*.

What are YOU hearing – what messages do you find to be most effective?
Concern about transmission among vaccinated individuals and wondering about a policy change regarding quarantining of vaccinated people.

From Ilisa Stalberg, MCH Director: At this point, the state is not considering making quarantine recommendations for this group. We will continue to recommend testing for vaccinated close contacts AND boosters for everyone eligible, especially school personnel.

Concerns about availability of Health Department contact tracing staff (and AMTrace contractor) to schools.

The Health Department does not have enough staff to keep up with the current caseload. The Health Department uses a prioritization matrix to determine who should be contacted; school age children are among the highest priority.
Vermont Department of Health – Immunization Program

Monica Ogelby, MSN, RN – Immunization Program Manager
Merideth Plumpton, RN - Nurse Program Coordinator
5 through 11 registration and allocation

• 42 Pediatric and Family practices ordered Pediatric Pfizer last week, to be delivered today!

• Due to efforts to obtain more vaccine across several avenues, we were able to order 12,100 doses to be distributed across all lanes. Every office who requested vaccine, got some in proportion to their population.

• Approximately 15 primary care offices who see kids have not yet ordered. The Immunization Program is here to help.

• There are 22,900 registered appointments (both first and second doses), through the state system. This number does not include pharmacies.
Pediatric Pfizer orders today (11/17)

• Ordering occurs only on Wednesdays
• Today, order what you think you can use through 12/02
• There will be no ordering next week for the Thanksgiving holiday
• Next orders will be placed 12/01, for delivery the week of 12/06

• Do not promise doses until delivery date and supply is confirmed
  • You will receive an e-mail from AHS.VDHCovidVaxDistribution@vermont.gov no later than Thursday evening confirming delivery method and quantity.
  • VIMS orders may need to be reduced due to limited allocation.
  • If you are planning clinics in your community outside of your direct patient population and outside of TVRS, please indicate that in the practice comments with your order or reach out to the Distribution team.
IZ trainings

Training Slides

IZ Program COVID-19 Pediatric Pfizer Training for 5 through 11-year approval:
Video: https://youtu.be/VoNx6kdVxSI
Slides: IZ Program Pediatric Pfizer Training 11.09.2021 (healthvermont.gov)

IZ Program COVID-19 Booster Dose Training:
Video: https://youtu.be/Fm21pH8PX5Q
Slides: IZ Program Booster Dose Training 10.28.2021 (healthvermont.gov)

Biweekly Office Hours tomorrow (11/18) at 1pm. E-mail AHS.VDHImmunizationProgram@vermont.gov for an invitation.
VDH IZ Program: links to Pfizer trainings

- Training Slides
- IZ Program COVID-19 Pediatric Pfizer Training for 5 through 11-year approval:
  - Video: https://youtu.be/VoNx6kdVxSI
Volunteering at Vermont’s School-Located Vaccine Clinics

Any and all volunteers must complete the registration process for the Vermont Medical Reserve Corp (MRC) prior to staffing these clinics.

To sign up to assist at a vaccine clinic, MRC volunteers are needed as vaccinators & for non-clinical roles. Volunteers will be needed for the entire clinic shift (typical range = 4 – 8 hrs.).

To get involved w/clinics complete the relevant training below & then complete survey confirming you have reviewed materials. Your info will then be loaded into scheduling platform (WHEN I WORK) for the clinics that will be posted.

Medical Reserve Corp: http://www.oncallforvt.org/medical-reserve-corps/ (continued next slide)
Volunteering at Vermont’s School-Located Vaccine Clinics

How to Join - MRC (oncallforvt.org)

- **Register in the Responder Management System** (volunteer database): system verifies licenses & credentials, tracks trainings & contacts volunteers during emergencies. Recommend reviewing help with registration document, before begin registration. Trainings are self-review, please read all sections.
From the VDH Immunization Program:

- **Booster Doses**
  - Pfizer
  - Janssen
  - Moderna
  - Advising Patients
  - Mix and Match

- 5 Through 11-year-old Approval

- COVID-19 Vaccine and Pregnancy
VT Vaccine Program Update

From the VDH Immunization Program:

- **VVP Updates**
  - 2021/2022 Flu/COVID-19 Grant information
  - Spotlight: Essex Pediatrics Drive Through Clinics
  - 2020/2021 IMR Annual Report
  - Routine Vaccine Ordering
  - Welcome New Program Members

- **Additional Resources**
Promoting Vaccine Confidence
Covid 19 and beyond

Course Description
We can all help end the COVID-19 pandemic by increasing vaccine acceptance. Being a trusted source for information can play an important role in promoting vaccination. Less than half of the Northern New England population is fully vaccinated, far below levels needed to end the pandemic. Public and private agencies are working to remove logistical barriers for people seeking vaccination but still more than 25% of people currently decline vaccination despite strong public health recommendations. This course will explore diverse drivers of vaccine uptake and will provide strategies to overcome concerns and increase vaccine acceptance.

Who Should Attend
All are welcome!
- Community Members
- Primary Care teams:
  - Physician, APRNs, PAs,
  - Nurses, Medical Assistants,
  - Community Health Workers,
  - Psychologists, Counselors,
  - Social Workers
- Others with interest

Schedule
Thursdays from 12:00-1:00pm EST.

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
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<tbody>
<tr>
<td>September 30</td>
<td>The Scientific Basis of COVID-19 Vaccination</td>
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<tr>
<td>October 14</td>
<td>Emerging issues in COVID-19 Vaccination: Boosters, Breakthroughs, Variants</td>
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<tr>
<td>October 28</td>
<td>Understanding the Drivers for Increasing Vaccine Uptake</td>
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<td>November 11</td>
<td>Effective Communications to Increase Vaccine Confidence and Uptake</td>
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<tr>
<td>December 2</td>
<td>Misinformation, Disinformation and the Media</td>
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<td>December 9</td>
<td>Promoting Vaccine Uptake in Young Families, including Pregnant and Breastfeeding Women and Children</td>
</tr>
<tr>
<td>December 16</td>
<td>Organizational Strategies to Increase Vaccine Uptake: Using Carrots &amp; Sticks</td>
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Questions?
Email: ECHO@hitchcock.org
Website: https://go.dh.org/project-echo

Registration Information
To register, visit: https://concarehodartmouth.hitchcock.org/Series/Registration/1423

Sessions are Free of Charge
In case you missed it:
VMS Annual Mtg. Nov. 5-6 (incl. AAP-VT & VAFP)

- AAP-Vermont Chapter received the **VMS Founders Award**
- Alex Bannach, MD FAAP received the **Green Mountain Pediatrician Award**
- Christine Finley, APRN MPH received the **Citizen of the Year Award**
CHAMP Learning Session: Thank You for Attending!

- **WHAT:** Strengthening Vermont’s System of High-Performing Medical Homes (Part 2)
- **WHEN:** Tuesday, October 26, 2021 – 7:45 AM – 12:00 PM via Zoom
- Conference was recorded & link will be available soon!

### Key Characteristics of High-Performing Medical Homes:

- Focusing on delivery of comprehensive well-child/adolescent care
- Providing care coordination to meet the needs of the individual child/family
- Connecting families to needed support programs, including integrated behavioral health in the primary care setting

### Focus Areas

Focus areas for the 2021-2022 (2) project:

- Supporting the mental health of children & youth in elementary, middle, and high school by improving screening for social/emotional health concerns
- Maximizing the use of practice-based care coordination resources
- Addressing racial equity and providing trauma-informed care
- Clinician wellness

Additional learning session topics will include:

- Screening for anxiety
- Social-emotional health
- Narrative medicine

For questions contact Christine Pelligrino and Allison Konczynski at VCHIP.CHAMP@med.uvm.edu.

More details including registration information to follow!
VCHIP-VDH COVID-19 calls: Closing Out 2021!

- November-December generally Mon. & Wed. except as below:
  - Next call Monday, November 22, 2021
  - NO CALL Wednesday, November 24 – Happy Thanksgiving!
- November call dates: 11/1 (M), 11/10 (W), 11/17 (W), 11/22 (M)
- December call dates: 12/1 (W), 12/8 (W), 12/15 (W), 12/22 (W)
- NO CALL week of 12/27/21; calls will resume 1/5/22 (W)
- ANNOUNCING: we will switch to Zoom platform on 12/22/21
- 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 Comm. Levine now select Thursdays only (next 2 slides)
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)?
- VCHIP CHAMP VDH COVID-19 website:
  https://www.med.uvm.edu/vchip/projects/vchip_champ_vdh_covid-19_updates
- Next CHAMP call – Monday, November 22, 12:15 – 1:00 pm
- Please tune in to VMS call with VDH Commissioner Levine:
  Thursday, December 2, 2021 – 12:30-1:00 p.m. – Zoom platform & call information
- VMS COVID-19 Clinical Conversations call: Thursday, November 18 – 12:30-1:00 p.m.
- 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#