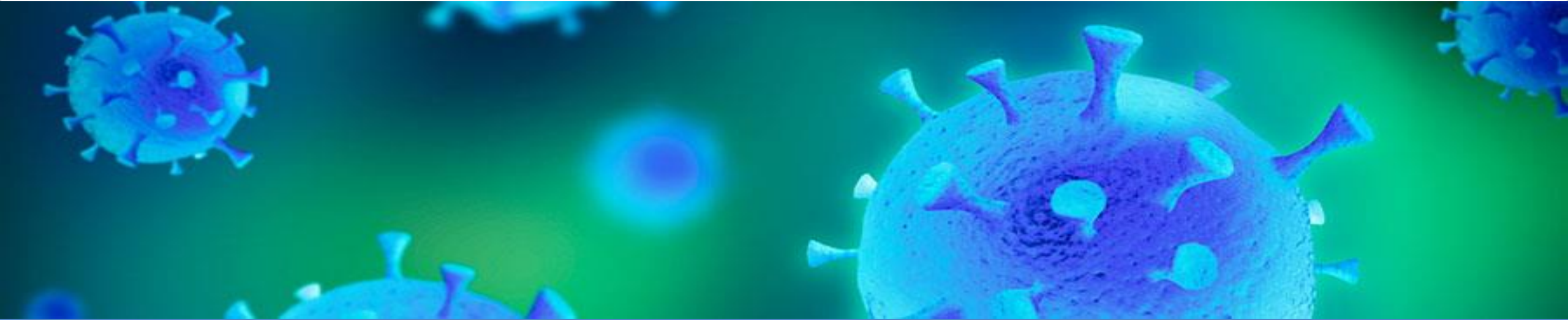


VCHIP / CHAMP / VDH COVID-19 UPDATES



Wendy Davis, MD FAAP - Senior Faculty, Vermont Child Health Improvement Program, UVM
Breena Holmes, MD FAAP – VCHIP Senior Faculty & Physician Advisor, MCH Division, VDH
January 5, 2022



Technology Notes

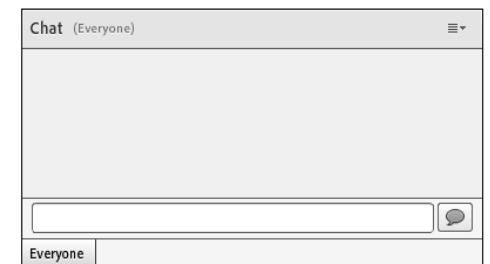
- 1) All participants will be muted upon joining the call.
- 2) If you dialed in or out, **unmute by pressing #6** to ask a question (and press *6 to mute).
If you are having audio difficulties and are using your computer speakers, you may wish to dial in:

Call in number – 1-866-814-9555

Participant Code – 6266787790

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

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



Overview

- ***Happy New Year!***
 - ▣ The days are getting longer!
 - ▣ Also ***National Bird Day*** (watch for the return of the Hermit Thrush, Vermont state bird!)
- Reminder – weekly event schedule:
 - ▣ **January VCHIP-VDH call calendar** (next slide); Gov. Media Briefings generally ***Tuesdays only***; VMS calls with Dr. Levine 1st & 3rd Thursdays
- Practice Issues: ***Shedding LIGHT on Recent COVID Guidance; VDH Immunization Program Updates***
- Q & A/Discussion *[Please note: the COVID-19 situation continues to evolve – so the information we’re providing today may change]*



Sunrise BTV, 1/5/22



<https://vtfishandwildlife.com/learn-more/vermont-critters/birds/hermit-thrush>

VCHIP-VDH COVID-19 calls: *Welcome 2022!*

- January calls generally Wednesdays except as below:
- Call dates: 1/5 (W), 1/12(W), 1/19 (W – 1st Zoom call), **1/24 (M)**
 - No call Wednesday, 1/26/22
- **COMING THIS MONTH:** switching to **Zoom** platform
 - **Anticipated date: January 19, 2022**
- 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 1st/3rd Thursdays (next 2 slides)



VMS *COVID Convos* with Health Commissioner Levine

- ***New Schedule January, 2022***
- **Calls with VDH Commissioner Levine now 1st and 3rd Thursdays**
- **Next VMS COVID Convo with VDH Commissioner Levine is 1/6/21**
- 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=VkVuNTJlZFQ2R3diSVdqdIJ2ZG4yQT09>
 - ▣ **Meeting ID: 867 2625 3105 Password: 540684 Dial In: 1-646-876-9923**



DR. MARK LEVINE
COMMISSIONER OF
HEALTH

VMS COVID Convos
1st and 3rd Thursday

→ Conversations will be designed
to cover the most pressing
COVID-related issues with time
for questions and answers

1st and 3rd Thursday of every month - 12:30pm to 1pm
Zoom Info: Click [here](#) to join

How's Your Week Going?

- Our team sincerely hopes you are **NOT** seeing this!
- We are extremely grateful for your engagement & all you are doing to care for VT's children & families!
- A reminder of **Reasons for HOPE** (Robert D. Sege, MD PhD; PEDIATRICS Volume 147, number 5, May 2021:e2020013987)
- *“Fine-tune all elements of the process of care to ensure that parents and families **[and your staff]** feel safe & supported from the moment they walk in the door & throughout the encounter [day]. This takes many forms – detailed attention to the family [staff] experience...recognize distress & engage in problem-solving.”*



<https://www.someecards.com/>

We bring you...

One minute of mindful breathing

- Get comfortable (you may lie on your back in bed, on the floor with a pillow under your head & knees, or sit in a chair with your shoulders, head, and neck supported against the back of the chair).
- Place one hand on your belly. Place the other hand on your chest.
- Breathe in through your nose. Let your belly fill with air.
- Breathe out through your nose.
- As you breathe in, feel your belly rise. As you breathe out, feel your belly lower. The hand on your belly should move more than the one that's on your chest.
- Take three more full, deep breaths. Breathe fully into your belly as it rises and falls with your breath.

Then, pass out chocolate!

Situation update

New Cases

887

69,762 Total

Currently Hospitalized

82

Hospitalized in ICU

15

Percent Positive 7-day Avg.

12.6%

New Tests

5,820

2,885,734 Total

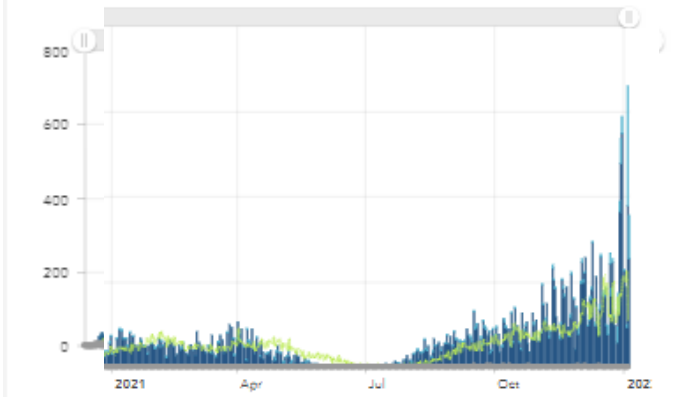
Deaths

482

0.7% of Cases

Last Updated: 1/5/2022, 11:24:51 AM

New Confirmed Cases, Probable Cases, Recoveries and Deaths **



DATE	NEW CASES
Dec. 30	1,471
Dec. 31	577
Jan. 1	473
Jan. 2	245

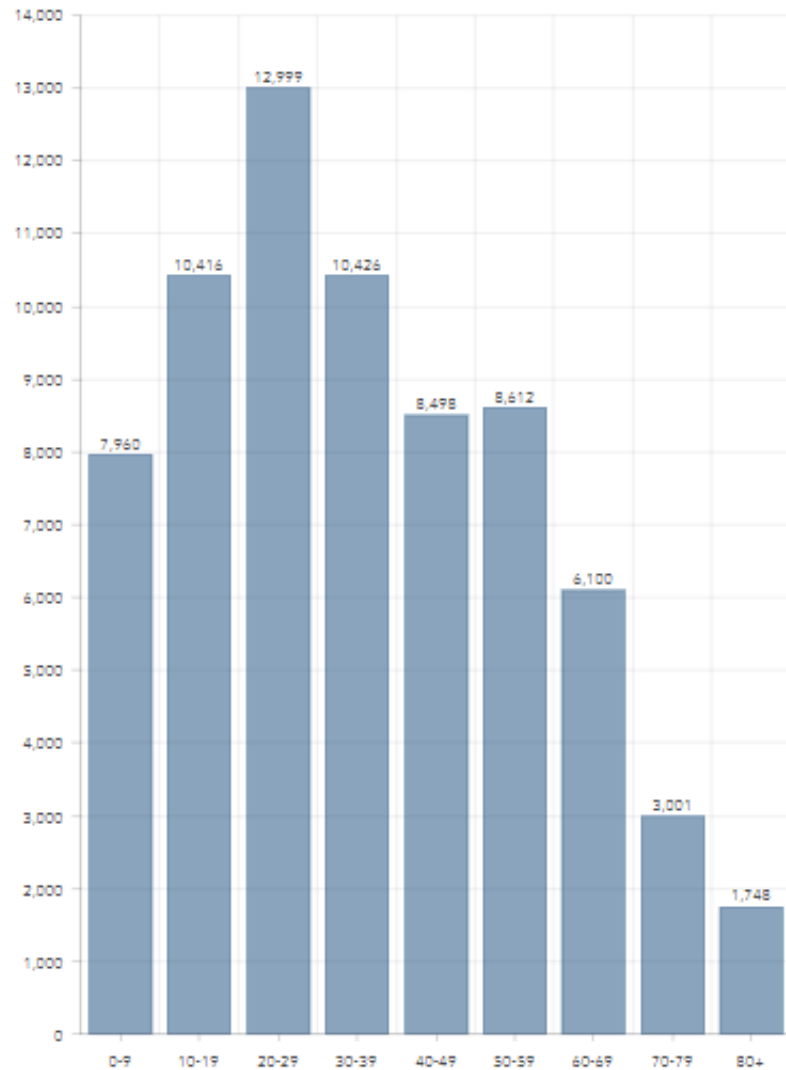
NOTE: VDH Dashboard updated EVERY DAY by 12:00 p.m. Case info reflects counts as of end of the previous weekday. All data are compiled by the VDH; are preliminary & subject to change.

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

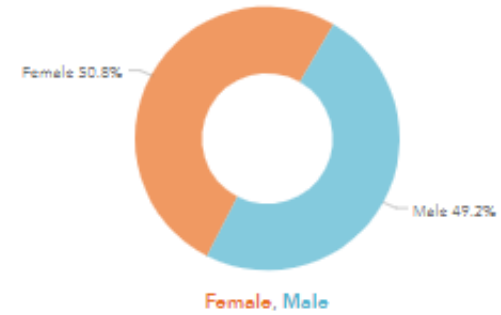
- One year ago: 8038 VT total cases; 165 new/38 hosp.
- U.S. **57.0 million+** cases; **828,436 deaths**
 - <https://www.nytimes.com/interactive/2021/us/covid-cases.html> (updated 1/5/22)
 - Past week: av. 547,613 cases/day (14d. change **+254%**)
 - **5.45 million+ deaths worldwide; 295.2 million+ cases** (-11% & +156% 14-day change respectively)
- **VDH Data Summary** now q.o.week. **12/17/21: NO Weekly Spotlight topic – next summary 1/7/22**
 - **Table of Contents** now limited to Overview of COVID-19 in Vermont; Clinical Course; Vaccine Breakthrough.
 - **Vaccine breakthrough cases = 11,379** since Jan. 2021 (~2.4% of fully vaccinated). Find previous summaries at: <https://www.healthvermont.gov/covid-19/current-activity/weekly-data-summary>

Situation update

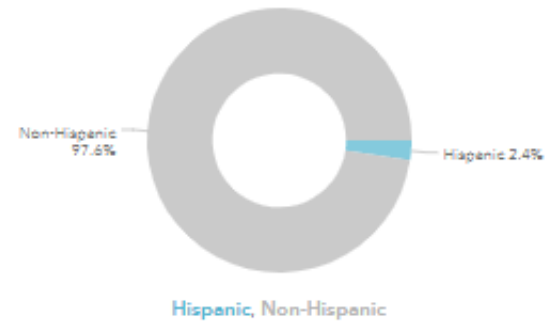
Cases by Age Group if Known *



Cases by Sex *



Cases by Ethnicity if Known *



Cases by Race if Known *



Black or African American, Asian, Other Race, American Indian or Alaska Native, White

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

Changes to VDH COVID-19 Case Dashboard

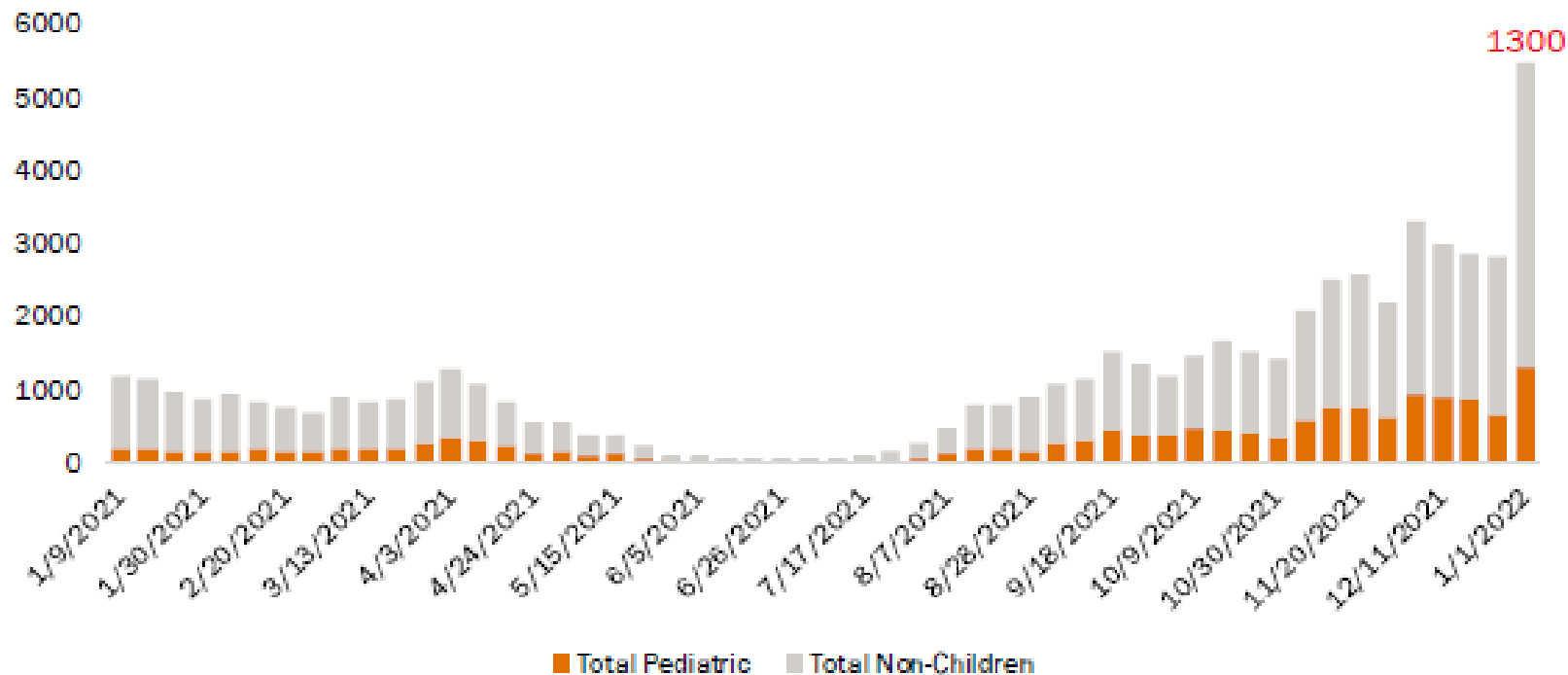
- First page simplified:
 - # recovered moved to Cases/Recoveries/Deaths tab
 - County-level 14d. case rates per 100,000 added to first page
 - “New Tests” added to sidebar
 - “Hospitalized Under Investigation” and “People Tested” no longer shown
- Cases/hospitalizations/death rates for past 90 days broken down by age group & will be updated weekly
- Rates are shown as number per 100,000, instead of number per 10,000.
- You can now select a view by 2020, 2021 or All for some graphics.
- An asterisk (*) means you can filter by year.

Changes to VDH COVID-19 Case Dashboard (cont'd.)

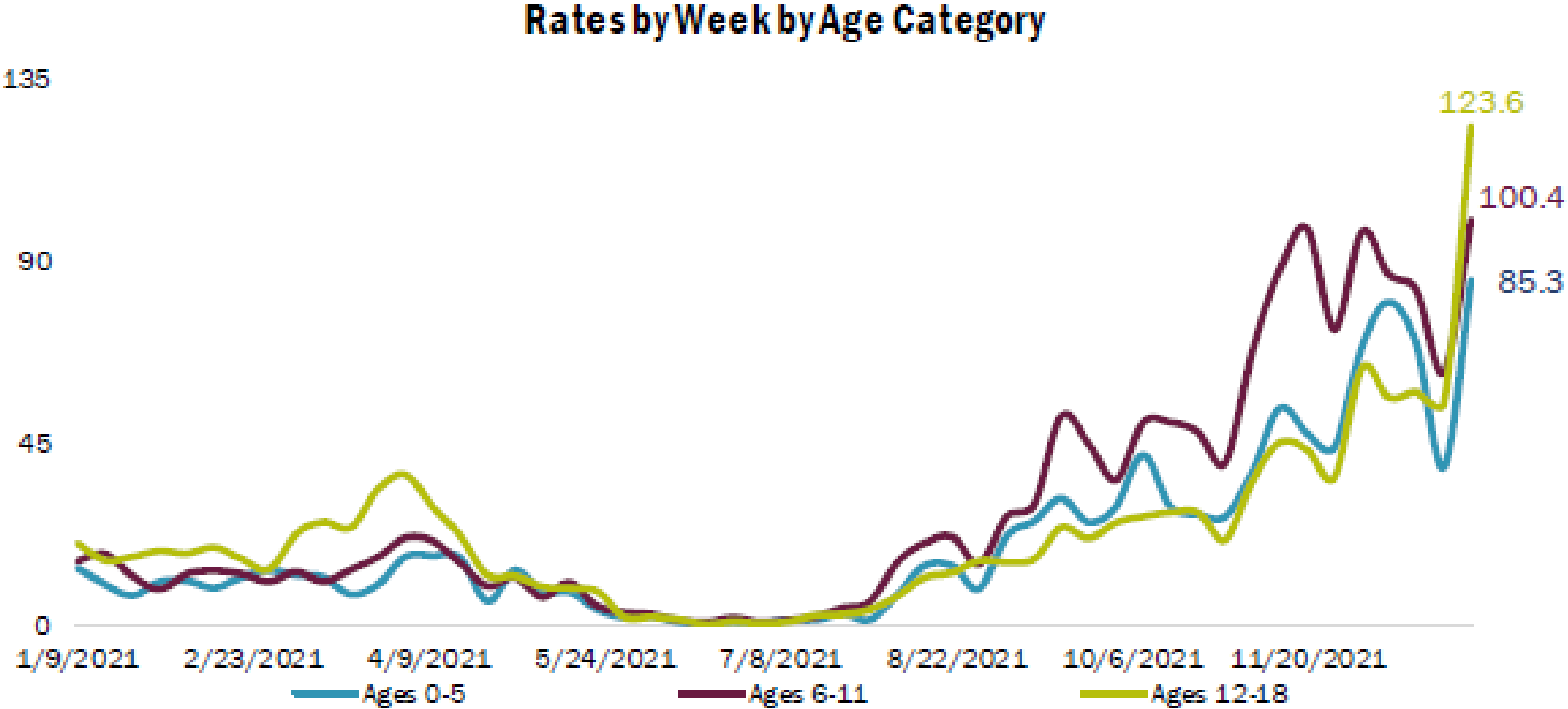
- ❑ On the full-screen version (not mobile), you can filter the “New Confirmed Cases, Probable Cases, Recoveries and Deaths” by month, in addition to year.
- ❑ There are new displays that show cases, hospitalizations and deaths by vaccination status. These will be updated weekly.
- ❑ A new tab with “Weekly Demographics” has been added, and will be updated weekly.
- ❑ The “Population Tested” tab has been removed.

This brief reflects data as of January 1, 2022 (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



COVID-19 Pediatric Cases



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

January 5, 2022

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

- <https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID19-Transmission-Schools.pdf> (Updated **Tuesdays** w/data through previous Sunday)



COVID-19 Cases in Vermont K-12 Learning Communities While Infectious

January 3, 2022

Cases in Vermont K-12 Learning Communities While Infectious

Learning Community	Cases Reported in the Past 7 Days	Total Cases
Schools with less than 25 students are reported in the "Total for all Suppressed Schools" row at the end of the table.		
TOTAL FOR ALL SCHOOLS	75	3286



COVID-19 Cases in Vermont K-12 Learning Communities While Infectious

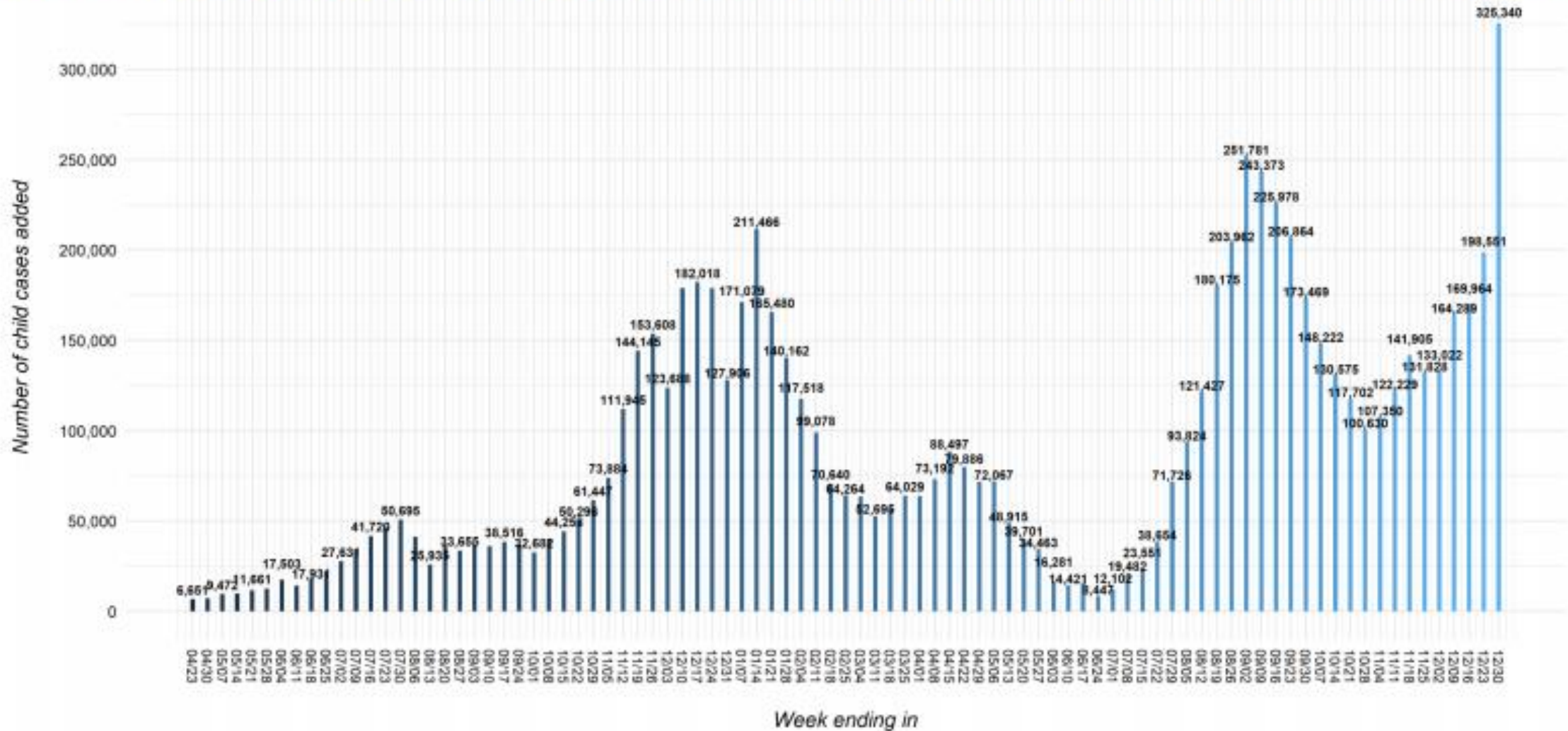
December 20, 2021

Cases in Vermont K-12 Learning Communities While Infectious

Learning Community	Cases Reported in the Past 7 Days	Total Cases
Schools with less than 25 students are reported in the "Total for all Suppressed Schools" row at the end of the table.		
TOTAL FOR ALL SCHOOLS	278	3003

- VT College & University dashboards:
 - ▣ **UVM update** (week of 12/13-12/19/21): 34 pos. tests off campus; 4 on campus; 0 fac; 9 staff.
 - ▣ **Bennington College** (as of 12/15/21): 3 total active/0 new active cases.
 - ▣ **Middlebury College** (as of 12/21/21): 1 new case; 13 total active (10 students/3 employees)

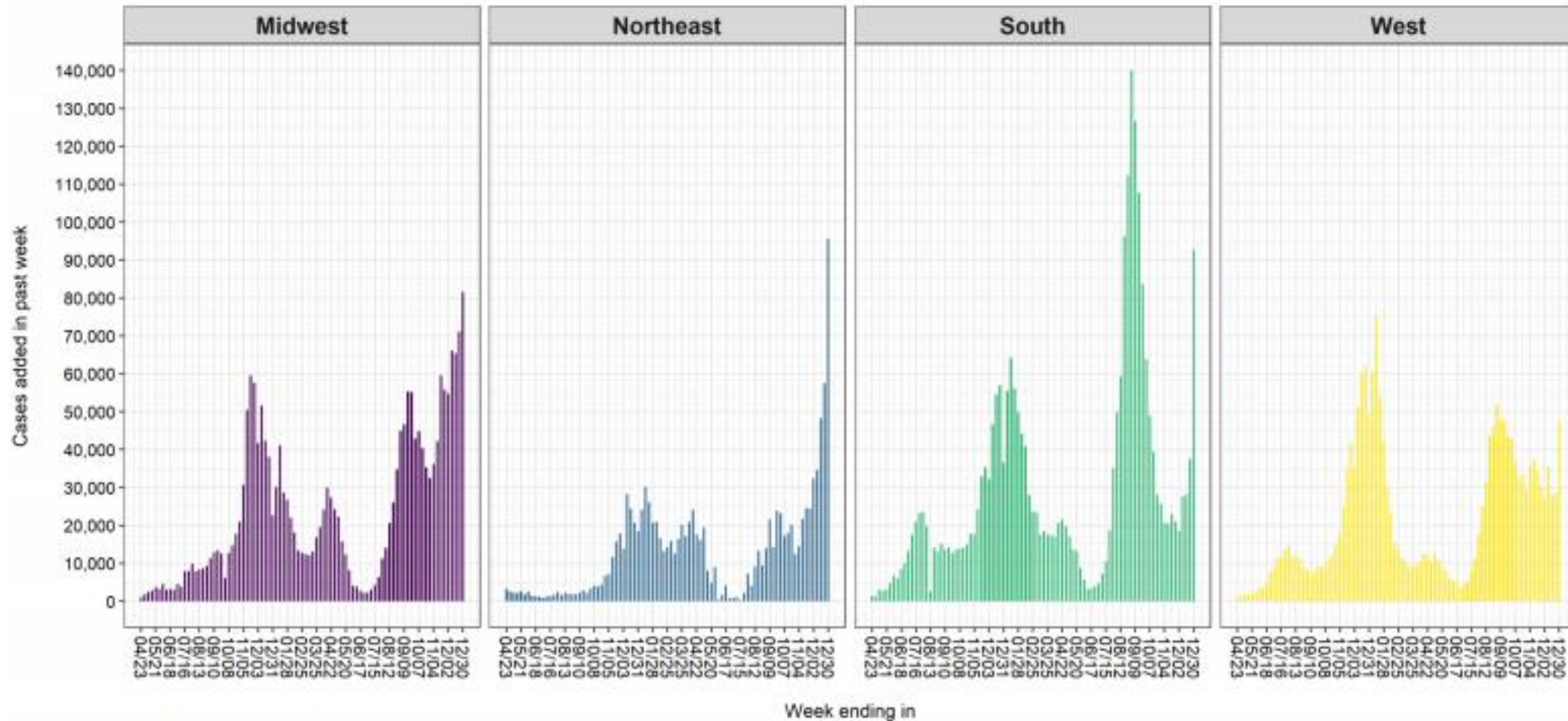
Fig 6. United States: Number of Child COVID-19 Cases Added in Past Week*



* Note: 5 states changed their definition of child cases: AL as of 8/13/20, HI as of 8/27/20, RI as of 9/10/20, MD 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 8/25/21
 As of 6/30/21, 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
 On 12/30/21, due to lag in reporting, MD experienced a very large increase in child cases (eg. 30,764 cases added)
 See detail in Appendix: Data from 49 states, NYC, DC, PR and GU
 All data reported by state/local health departments are preliminary and subject to change; Analysis by American Academy of Pediatrics and Children's Hospital Association

<https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/children-and-covid-19-state-level-data-report/>

Fig 7. United States: Child COVID-19 Cases Added in Past Week, by Region*



* Note: Regions are the US Census Regions

5 states changed their 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 6/30/21, 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

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<https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/children-and-covid-19-state-level-data-report/>

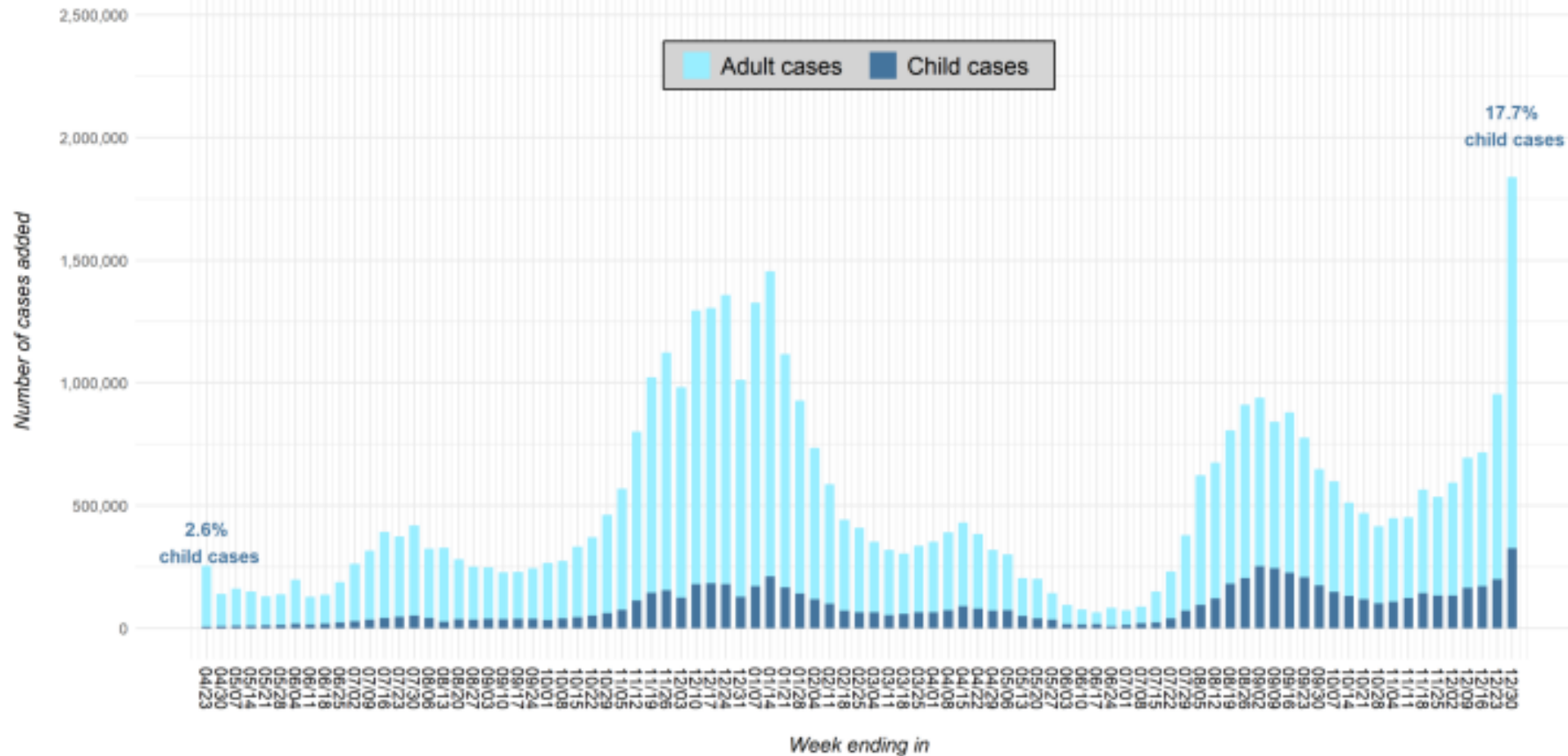


CHILDREN'S
HOSPITAL
ASSOCIATION

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN



Fig 8. United States: Number of COVID-19 Cases Added in Past Week for Children and Adults*



* Note: 5 states changed their 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 6/30/21, 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
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<https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/children-and-covid-19-state-level-data-report/>

VDH COVID-19 Vaccine Registration & Sites

HOME / COVID-19 / VACCINE /

GETTING THE COVID-19 VACCINE

[Find out about vaccines for children ages 5 to 11](#) ⓘ

GET THE MOST PROTECTION WITH A BOOSTER SHOT!

You should get a booster if you are 16 or older and you received:

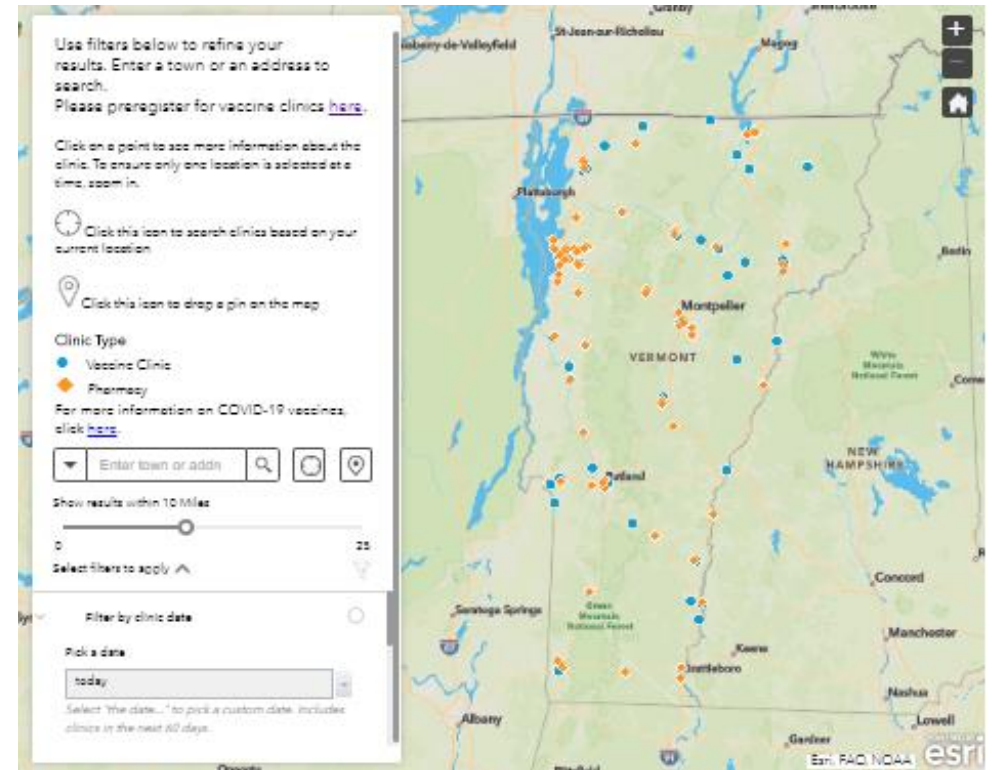
- your Johnson & Johnson vaccine **at least two months ago** or
- your second dose of Moderna vaccine **at least six months ago** or
- your second dose of Pfizer vaccine **at least five months ago**

NOTE: the change to five months for Pfizer was approved by the CDC on 1/4/22. The Health Department is working now to accommodate booster registration for people in that group, and we will announce here when that change is ready.

Your booster can be the vaccine type of your choice: Pfizer, Moderna or Johnson & Johnson, no matter which vaccine you got originally.

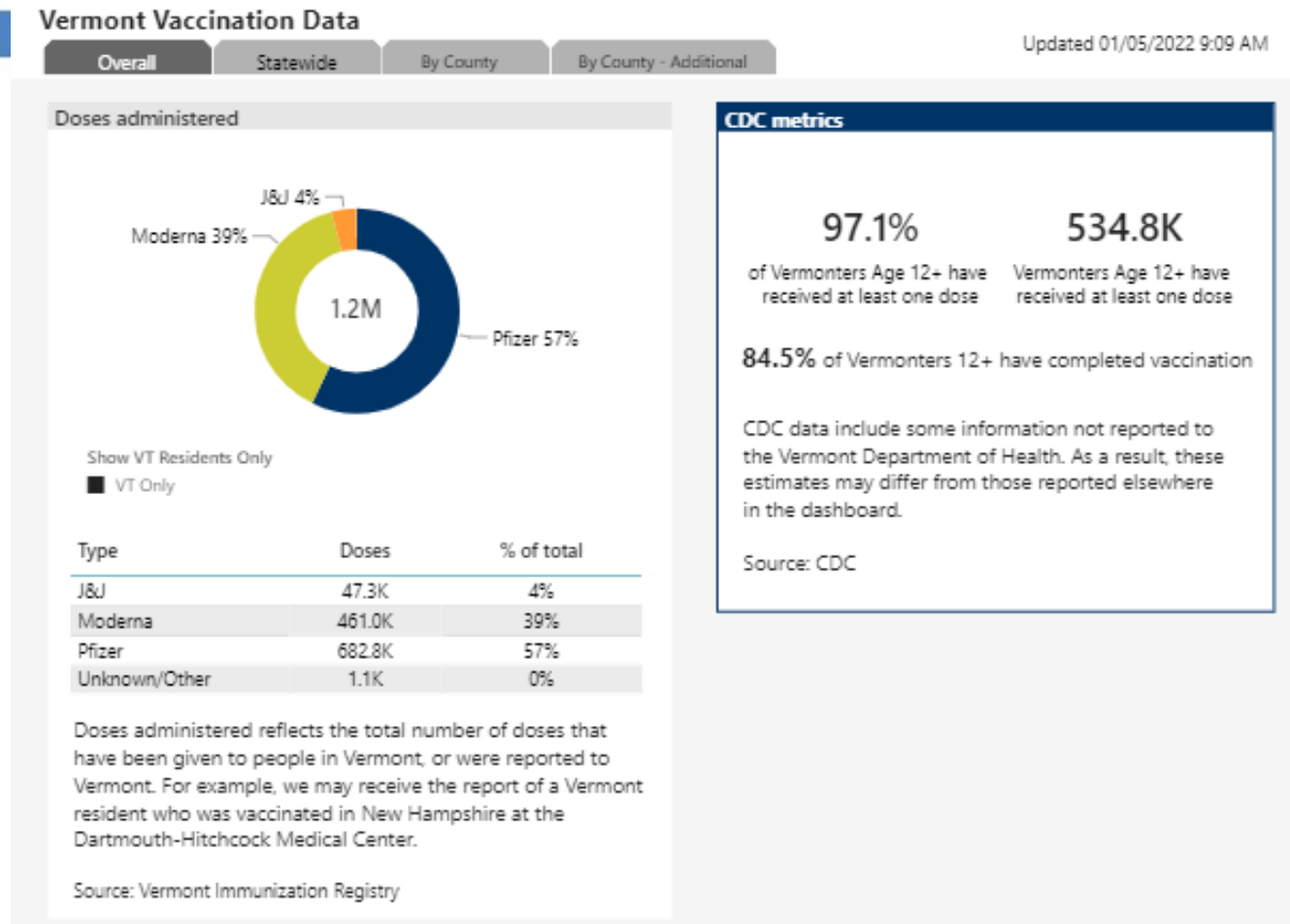
[See Frequently Asked Questions about boosters](#) ⓘ

WHERE TO GET YOUR BOOSTER SHOT, FIRST OR SECOND DOSE



VDH COVID-19 Vaccine Dashboard (“Overall” view: 1/5/22)

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

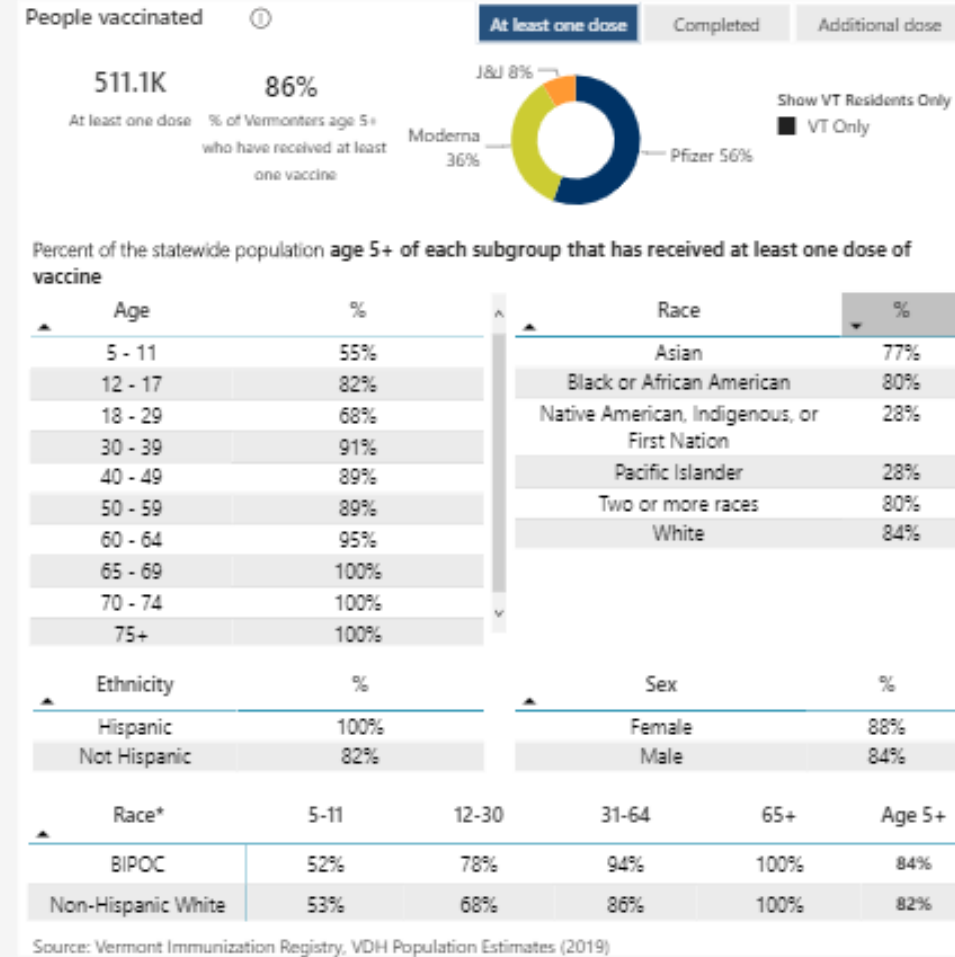


VDH COVID-19 Vaccine Dashboard (“Statewide” view)

Vermont Vaccination Data

Updated 01/05/2022 9:09 AM

Overall **Statewide** By County By County - Additional



Data notes

Statewide numbers and percentages are capped at 100%. To protect the identity of individuals, data is suppressed when there are fewer than six people vaccinated in a subgroup.

Race information is not reported for 2% of people vaccinated.

Race/ethnicity information is not reported for 4% of people vaccinated.

Ethnicity information is not reported for 4% of people vaccinated.

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

Sex information is not reported for 554 people vaccinated. The categorization of male/female for some people is based on sex assignment at birth, while for others, it is based on gender. This is due to the varying sources and ways the information is reported.

Sex not reported may mean the provider did not collect that information, the patient did not provide it, or the provider or the patient selected a category other than male or female.

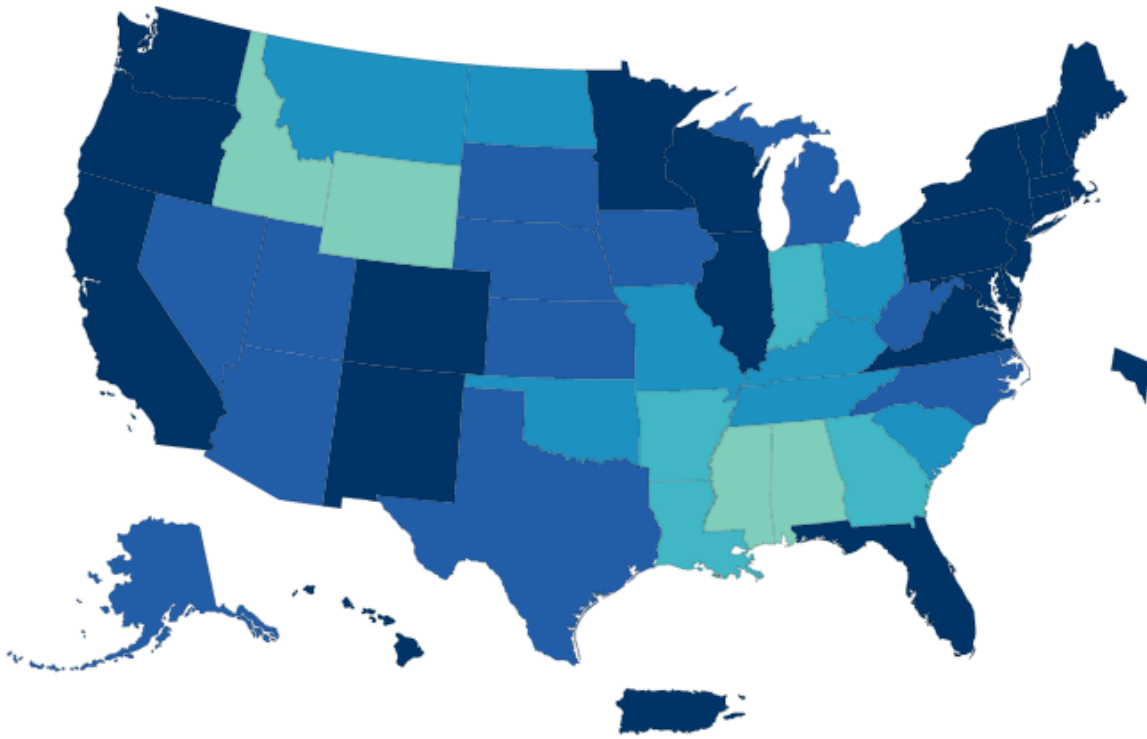
Data on this page is sourced from the Vermont Immunization Registry and therefore may differ from data reported

- Daily updates Tuesday thru Saturday
- Data = counts reported by end prev. day; subject to change.
- <https://www.healthvermont.gov/covid-19/vaccine/covid-19-vaccine-dashboard>
- By Age – Statewide (≥ 1 dose):
 - ▣ 5-11 = 55% (incr. from 52% 12/22/21)
 - ▣ 12-17 = 82% (81% on 12/22/21)
 - ▣ 18-29 = 68% (67% on 12/22/21)
 - ▣ **VT Age 5+ = 86%** (85% on 12/22)

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

○ No Data ○ 0 ○ 1 - 120,000 ○ 120,001 - 130,000 ○ 130,001 - 140,000 ○ 140,001 - 150,000 ○ 150,001 +

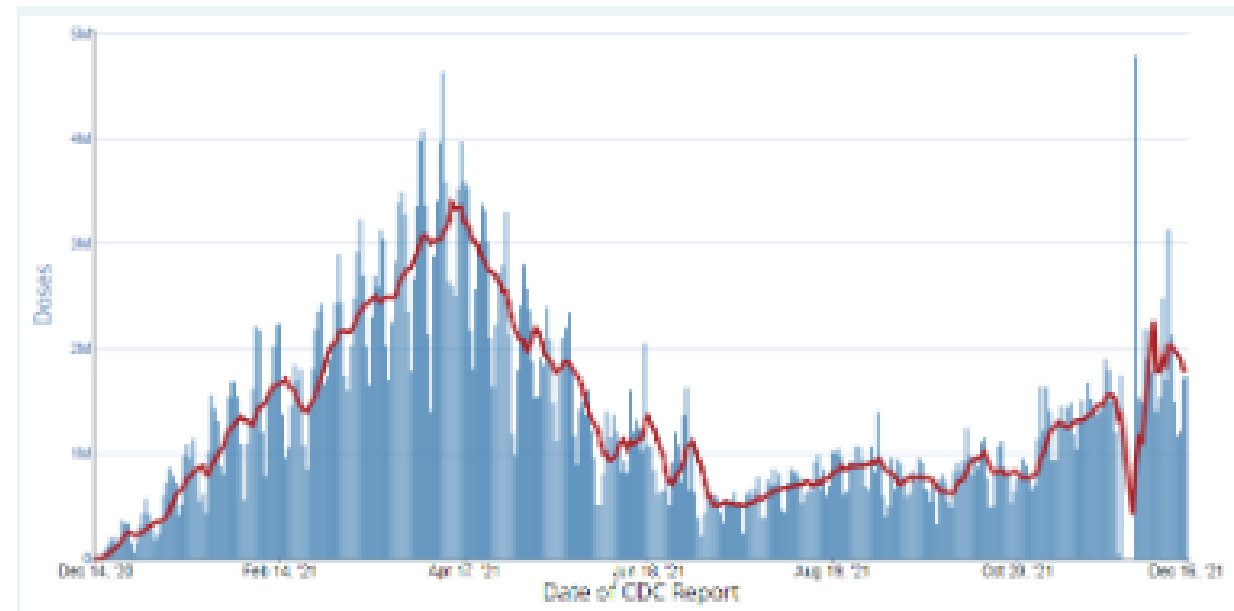


Total Doses Administered per 100,000

○ No Data ○ 0 ○ 1 - 120,000 ○ 120,001 - 130,000 ○ 130,001 - 140,000 ○ 140,001 - 150,000 ○ 150,001 +

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

— 7-Day moving average

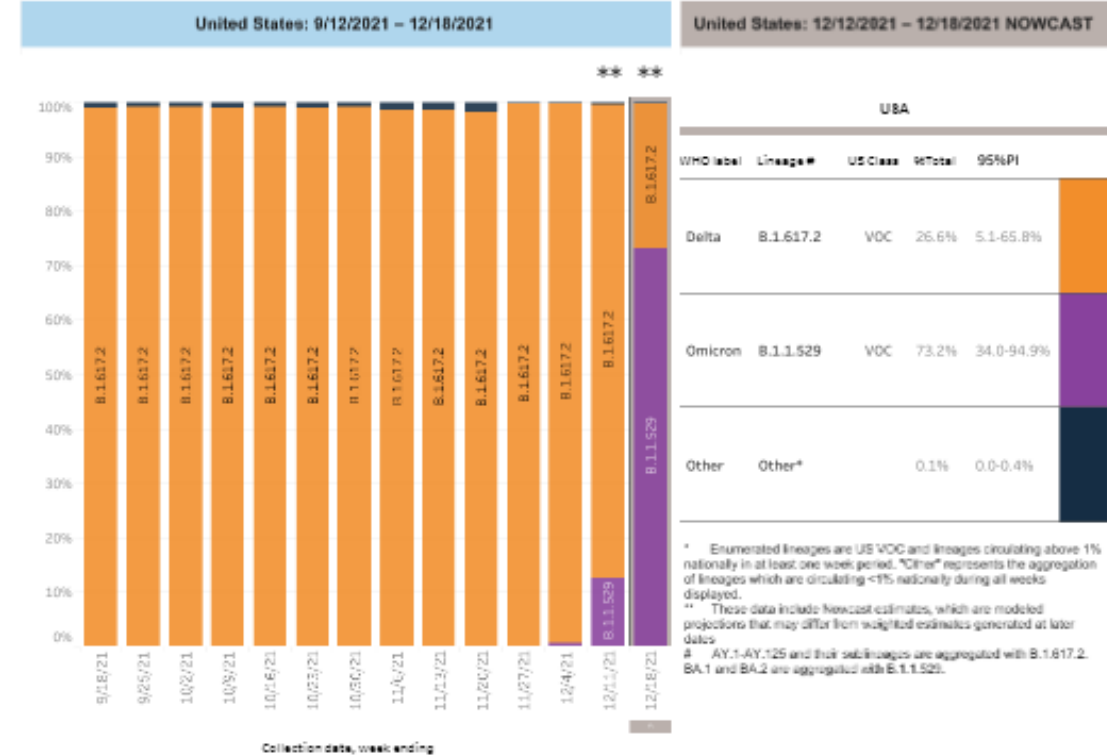
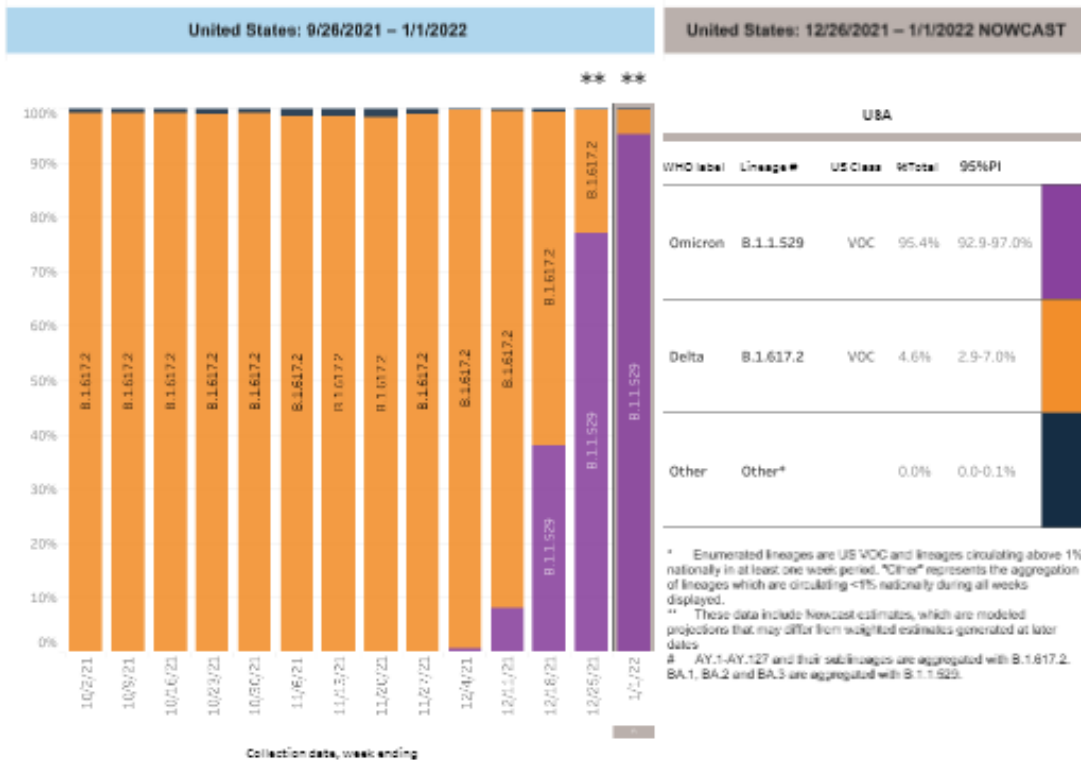


<https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html>

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

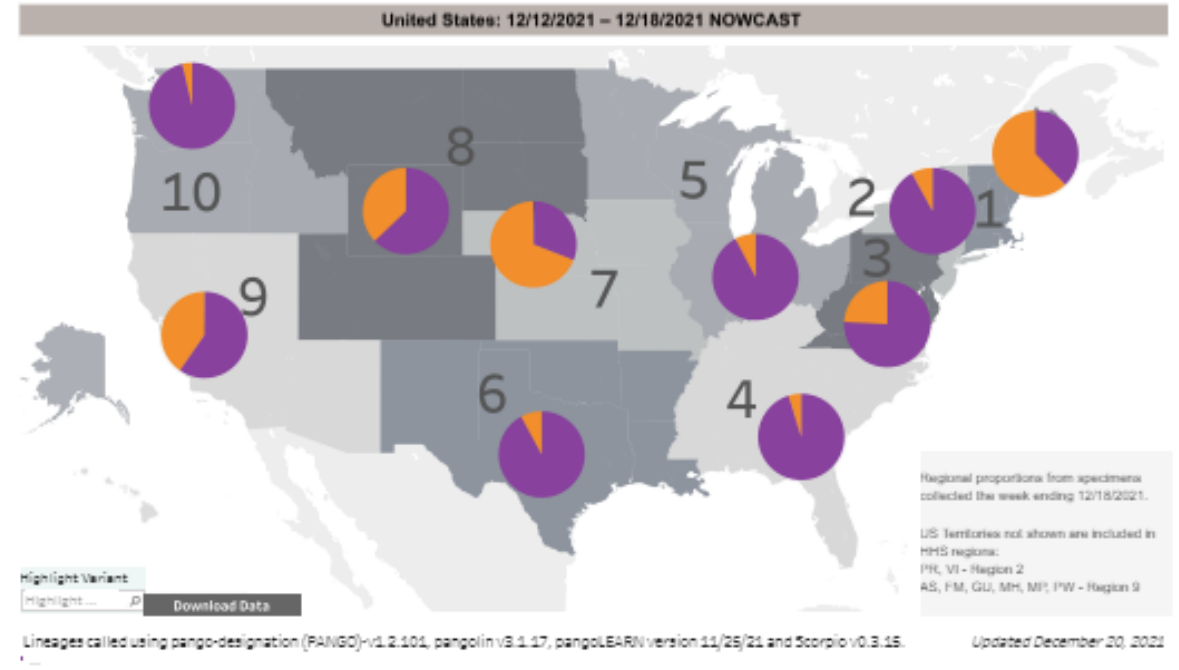
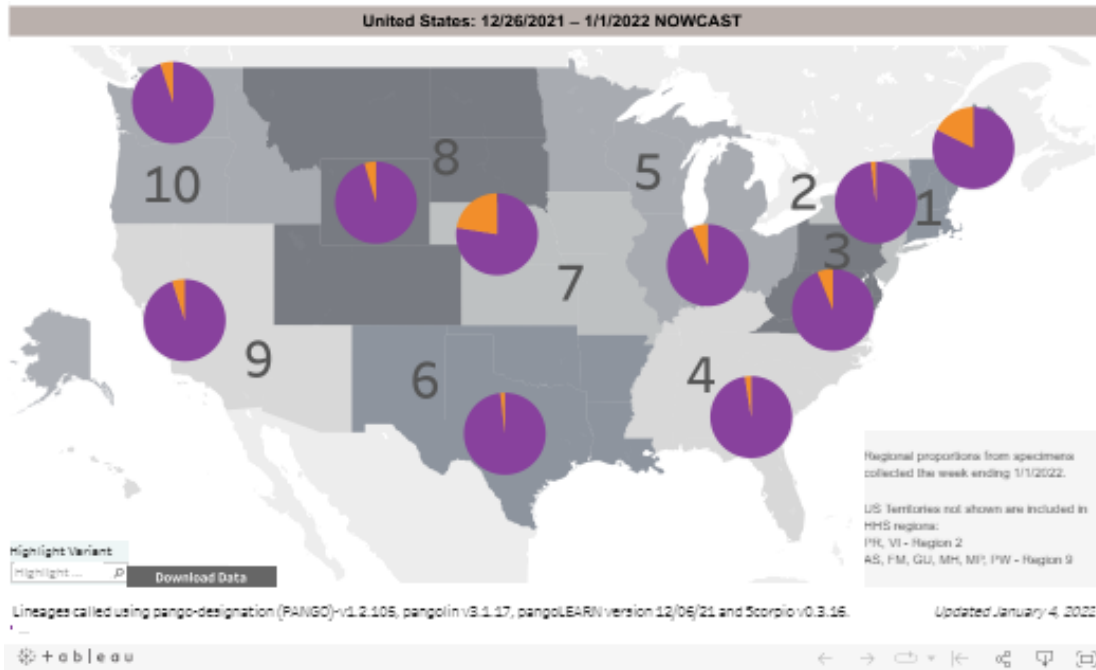
January 5, 2022

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



Note: week-to-week comparison in Omicron variant proportion (purple): far right bar in graph on left is week ending 1/1/22.

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



Note: week-to-week comparison in Omicron variant proportion (purple). Map on left is week ending 1/1/22.

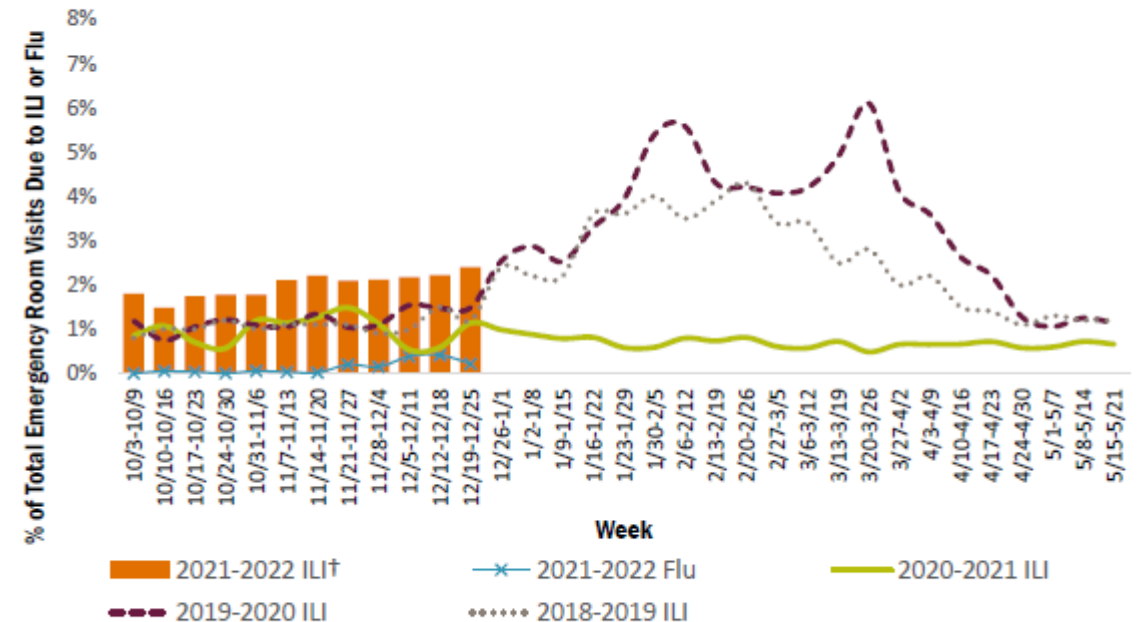
<https://covid.cdc.gov/covid-data-tracker/#variant-proportions>

Don't Forget Influenza!

- Current Influenza-like Illness (ILI) activity level remains **MINIMAL** in Vermont
- Two pediatric flu **deaths** in Dec.
 - ▣ U.S. flu activity continues to increase.
 - ▣ Majority = influenza A(H3N2)
- Link to weekly surveillance:
<https://www.healthvermont.gov/sites/default/files/documents/pdf/2021-2022-Flu-WeeklyReport-Week-51.pdf>

Syndromic Surveillance

Vermont Emergency Room and Urgent Care Visits for Influenza-like Illness or Diagnosed Influenza



†The definition of Influenza-like Illness (ILI) was updated in September 2021 to no longer exclude patients with another diagnosed non-influenza illness. The 2021-22 season's ILI data are not directly comparable to previous seasons due to this change.

AAP (National) Updates

Slides 26 – 31 courtesy of the American Academy of Pediatrics – from today's
Chapter Chat (1/5/22)

Reminder: AAP COVID-19 Town Halls

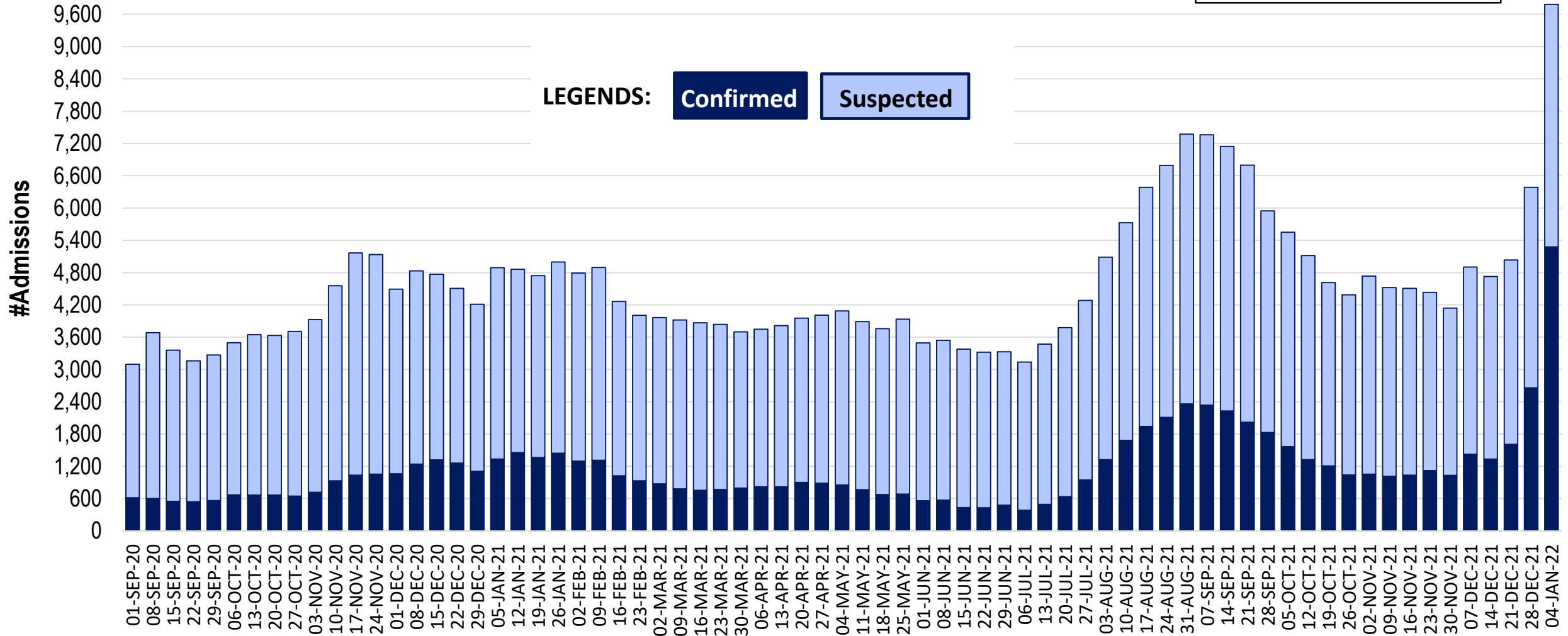
- Next Town Hall **Thursday, January 6, 2022 – 8 pm Eastern**
- Session will address the latest related to the COVID-19 pandemic and its impact on children, adolescents, and families – hear from leading experts and connect with your peers
- Panel: James Campbell, MD MS FAAP (AAP Committee on Infectious Diseases); Bonnie Maldonado, MD FAAP (Chairperson, AAP Committee on Infectious Diseases); Sonja O’Leary, MD FAAP (Chairperson, AAP Council on School Health)
- Find previous recordings on AAP COVID-19 Town Hall webpage:

<https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/connecting-with-the-experts/>



Number of Past-week Confirmed and Suspected COVID-19 Pediatric Hospital Admissions, 50 States and District of Columbia, by Week

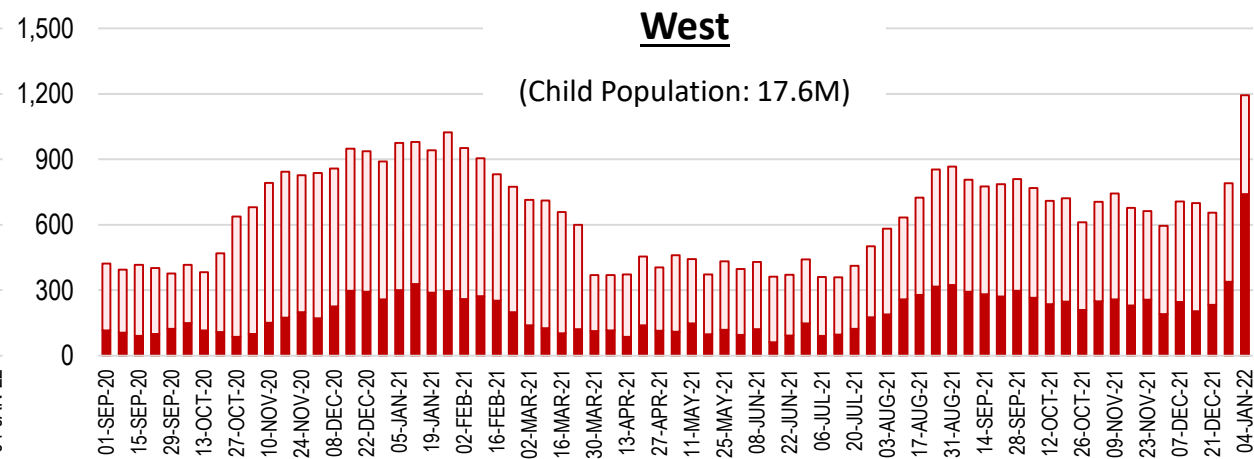
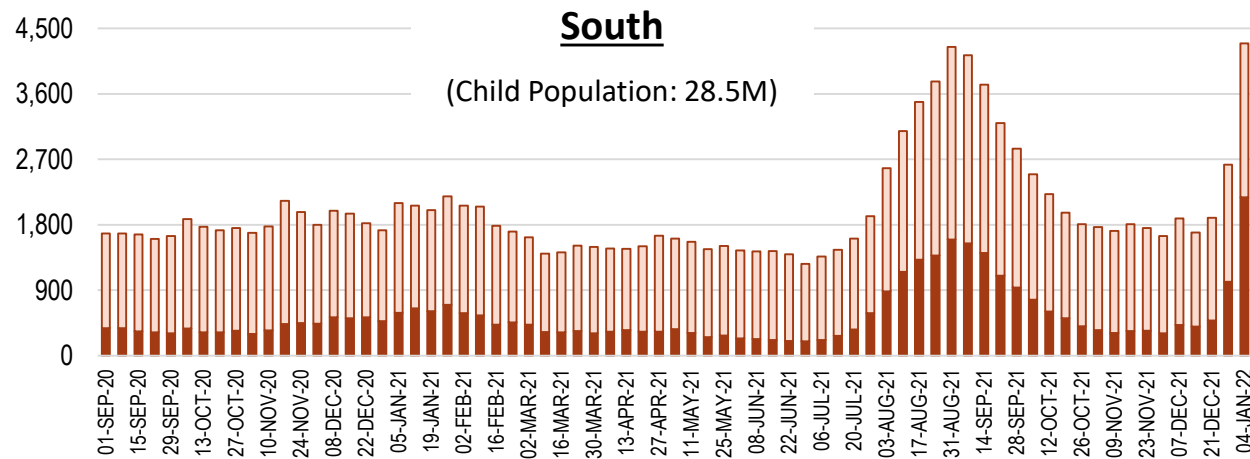
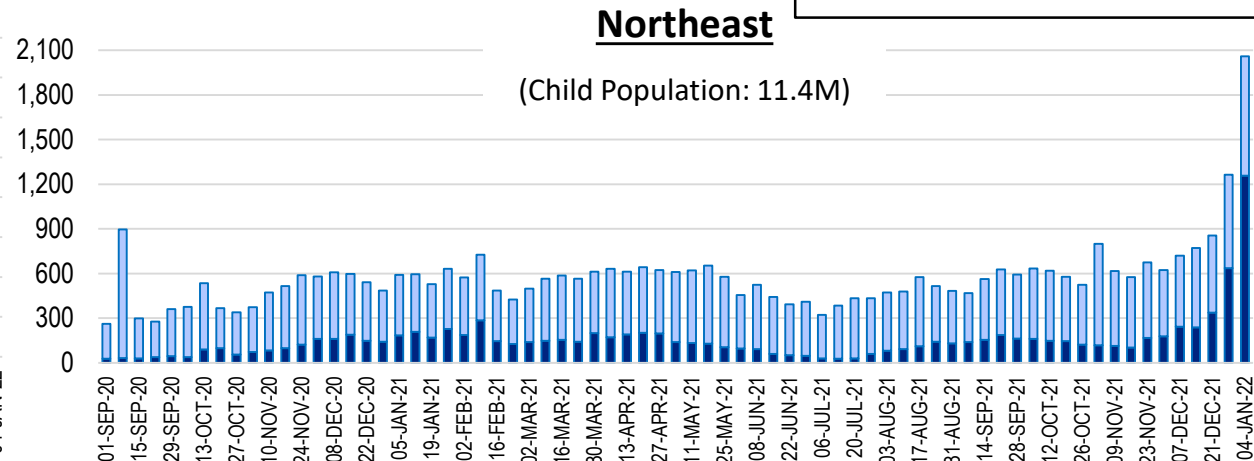
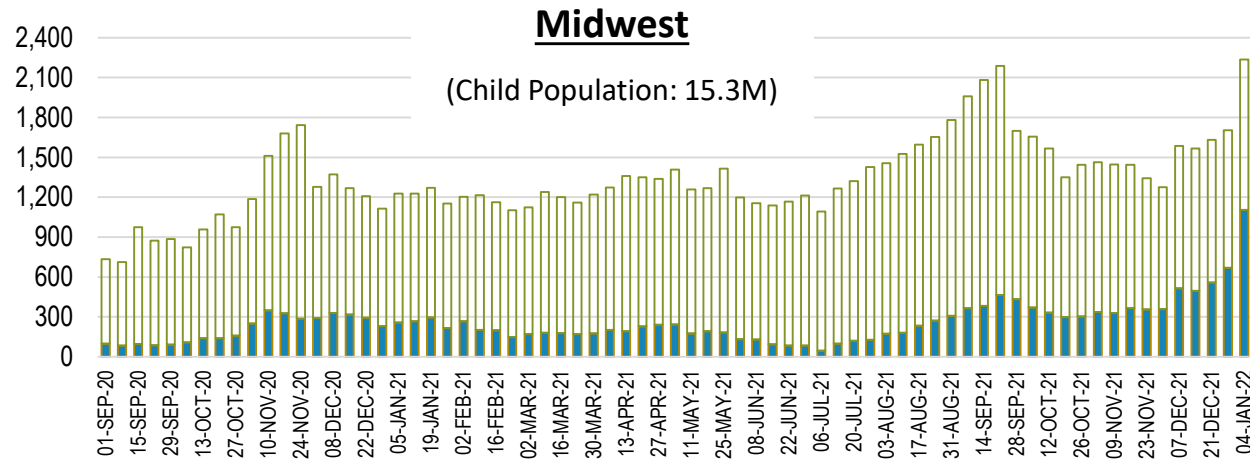
9.1.2020 - 1.4.2022



Source: AAP analysis of COVID-19 pediatric admissions based on the "COVID-19 Reported Patient Impact and Hospital Capacity by State" series published by the U.S. Department of Health & Human Services.

Number of Past-week Confirmed and Suspected COVID-19 Pediatric Hospital Admissions, by Census Region by Week

9.1.2020 - 1.4.2022



AAP COVID-19 VACCINE RESOURCES

Questions/comments: email COVID-19@aap.org.

- AAP.org: [COVID-19 Vaccine Implementation in Pediatric Practices](#)
- AAP.org: [COVID-19 Vaccine Administration: Getting Paid](#)
- AAP.org: [About the COVID-19 Vaccine: Frequently Asked Questions](#)
- AAP.org: [COVID-19 Vaccine Confidence Campaign Toolkit](#)
- AAP.org: [Children and COVID-19 Vaccination Trends](#)
- Free PediaLink Course: [Effective COVID-19 Vaccine Conversations](#)
- HealthyChildren.org: [The Science Behind COVID-19 Vaccines: Parent FAQs](#)
- HealthyChildren.org: [COVID-19 Testing and Kids: What You Should Know](#)



Standalone Vaccine Counseling

Medicaid Coverage of Standalone Vaccine Counseling

- CMS coverage decision: standalone vaccine counseling (separate from administration) is a mandatory EPSDT benefit for **all pediatric vaccines**
- The federal government will pay 100% of the cost of COVID-19 vaccine counseling for children in Medicaid (regular match for other vaccines)

What's Next?

- State-by-state implementation of policy: coding, payment amounts, etc.
- Resources for Chapters to come
- Please share your questions and experiences!

CMS.gov

Press release

Biden-Harris Administration Makes 100% Federal Medicaid Matching Funds Available for State Expenditures on Certain COVID-19 Vaccine Counseling Visits for Children and Youth

Dec 02, 2021 | Coverage, Medicaid & CHIP

Share    

The Biden-Harris Administration, through the Centers for Medicare & Medicaid Services, is now requiring states to cover COVID-19 vaccine counseling visits in which healthcare providers talk to families about the importance of kids' vaccination. Medicaid provides health insurance coverage to over 40% of all children in the United States and are a significant source of coverage for Black and brown children. Today's action will help expand access to individualized medical advice in all communities and give families the support they need to engage with trusted community providers.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



Provider Relief Fund: Phase 4

FOR IMMEDIATE RELEASE

December 14, 2021

Contact: HHS Press Office

202-690-6343

media@hhs.gov

HHS Is Releasing \$9 Billion in Provider Relief Fund Payments to Support Health Care Providers Affected by the COVID-19 Pandemic

Today, the U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), announced the distribution of approximately \$9 billion in Provider Relief Fund (PRF) Phase 4 payments to health care providers who have experienced revenue losses and expenses related to the COVID-19 pandemic. The average payment being announced today for small providers is \$58,000, for medium providers is \$289,000, and for large providers is \$1.7 million. More than 69,000 providers in all 50 states, Washington, D.C., and eight territories will receive Phase 4 payments. Payments will start to be made later this week.

The PRF Phase 4 payments, in addition to the \$8.5 billion in American Rescue Plan (ARP) Rural payments to providers and suppliers who serve rural Medicaid, Children's Health Insurance Program (CHIP), and Medicare beneficiaries, are part of the \$25.5 billion the Biden-Harris Administration is releasing to health care providers to recruit and retain staff, purchase masks and other supplies, modernize facilities, or other activities needed to respond to COVID-19.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®





Vermont Department of Health – Immunization Program

Monica Ogelby, MSN, RN – *Immunization Program Manager*
Merideth Plumpton, RN – *Nurse Program Coordinator*

Booster / Additional Dose Update

- Booster dose in those 12 through 15 years of age
 - FDA authorized, ACIP meeting today (1/5/22) to vote, awaiting CDC recommendation
- Shortening the interval from 6 months to 5 months for those who received Pfizer as their primary series
 - CDC recommended, may begin in your offices
 - The booster interval recommendation for people who received the J&J vaccine (2 months) or the Moderna vaccine (6 months), has not changed.
- Moderately to severely immunocompromised 5 through 11-year-olds eligible to receive an additional (3rd) dose of Pfizer.
 - CDC recommended, may begin in your offices
 - Definition of immunocompromised consistent with [recommendation for adults](#)
 - 28 days after second shot of primary series

COVID-19 Vaccine Ordering Guidance

- We are starting to see COVID-19 vaccine supplies stabilize.
- **Order based on what you can use within the timeframe of the vaccine's shelf life.** Maximize direct shipments when possible.
- **Always wait for confirmation of your order through the Thursday e-mail from AHS.VDHCovidVaxDistribution@vermont.gov before scheduling.** The distribution team may reach out to individual practices to reduce your vaccine order when statewide requests exceed the available allocation.
- **Minimum shipments and shelf life**

Moderna: Minimum direct shipment is **100 doses**.

Shipments from the distributor arrive frozen. If stored in the freezer, Moderna is good through expiration. Shipments from the depot arrive refrigerated. **Beyond-use date of 30 days.**

Pediatric Pfizer (orange cap): Minimum direct shipment is **100 doses**.

Shipments from the distributor and depot should be placed in the refrigerator. **Beyond-use date of 10 weeks.**

Adult Pfizer (gray cap – do not dilute): Minimum direct shipment is **300 doses**.

Shipments from the distributor and depot should be placed in the refrigerator. **Beyond-use date of 10 weeks.**

Janssen: Minimum direct shipment is **100 doses**.

Shipments from the distributor and depot should be placed in the refrigerator. Janssen is good through its expiration date.

Updated Minimizing Waste Policy

- Every vaccinated child is valuable.
- If a patient is in your office and willing to be vaccinated, do not lose that opportunity. Open a vial even if it means wasting an uncomfortable amount of vaccine.
- See our updated [Minimizing Waste Policy](#) for more information.



December 30, 2021

Minimizing Vaccine Waste

BACKGROUND & PURPOSE

Vaccine availability has surpassed the demand, and this updated document clarifies guidance on wasting vaccines versus missing a vaccine opportunity.

Do not turn any person away over the risk of vaccine waste. Efforts should be made on the part of the practice to administer all viable doses of the COVID-19 vaccine before their beyond use date/time (BUD).

www.healthvermont.gov/sites/default/files/documents/pdf/COVID19-Vaccine-Minimize-Waste-Policy.pdf

Check your coverage

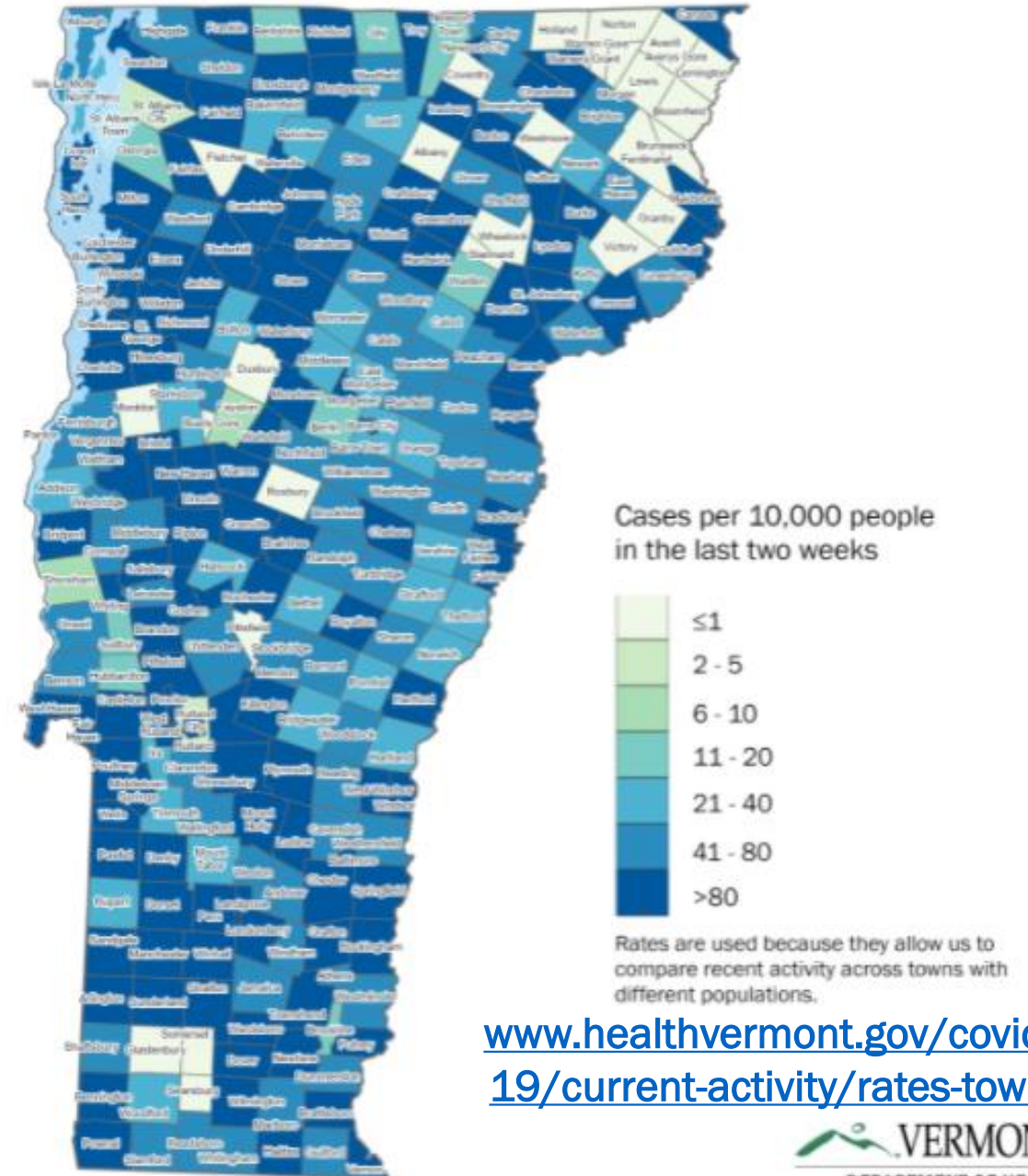
[Patients who have not received any COVID-19 doses](#) | IMR

[Patients who have missed/are late for a second COVID-19 dose](#) | IMR

[Patients who have received a COVID-19 dose](#) | IMR

- Please get in touch with us if:
 - you have the capacity to do patient outreach, and the ability to utilize a more detailed reporting in excel format
 - you would like supports in your community in the form of vaccinators or clinic assistance.

Rate of Vermonters with COVID-19 by Town in the Last Two Weeks
Data from 12/16/2021 to 12/29/2021



COVID-19 vaccines and boosters are approved for many children and adults. **Talk to your doctor, nurse or pharmacist today about how you and your family can be as protected as possible.**



Not sure what to believe about COVID-19 vaccines and boosters? Ask.

Vermont Department of Health Print Materials

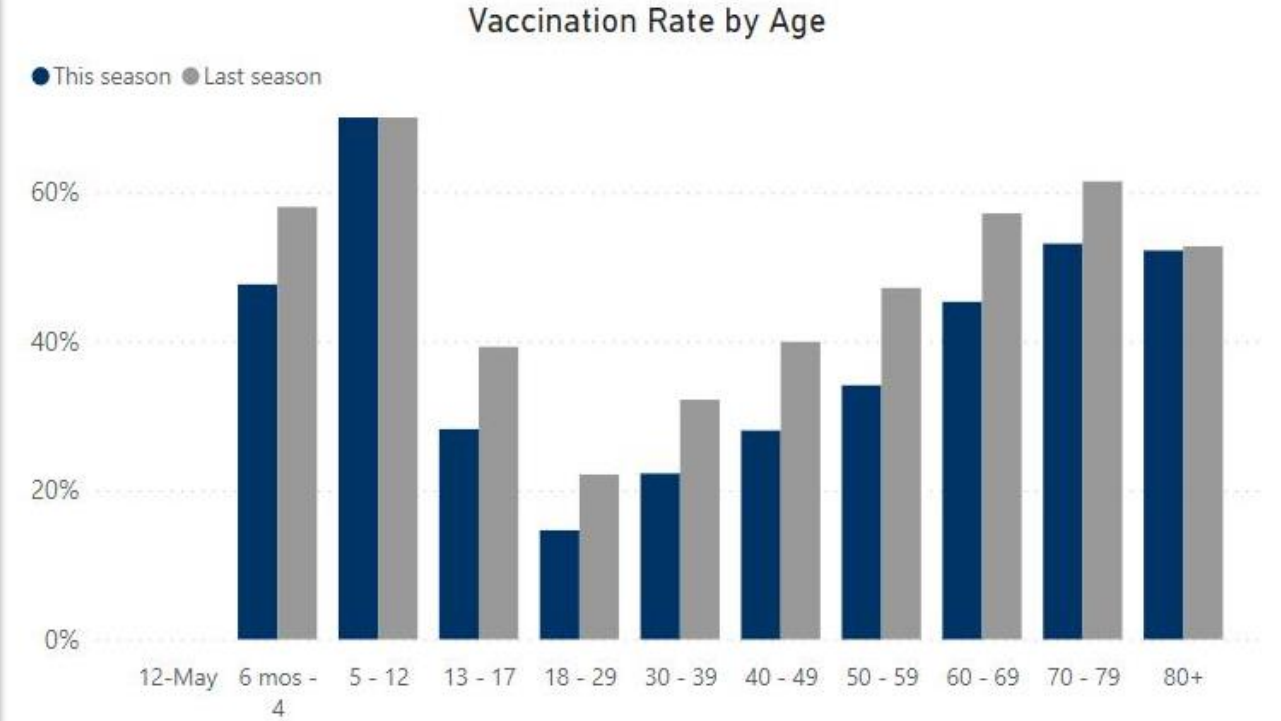
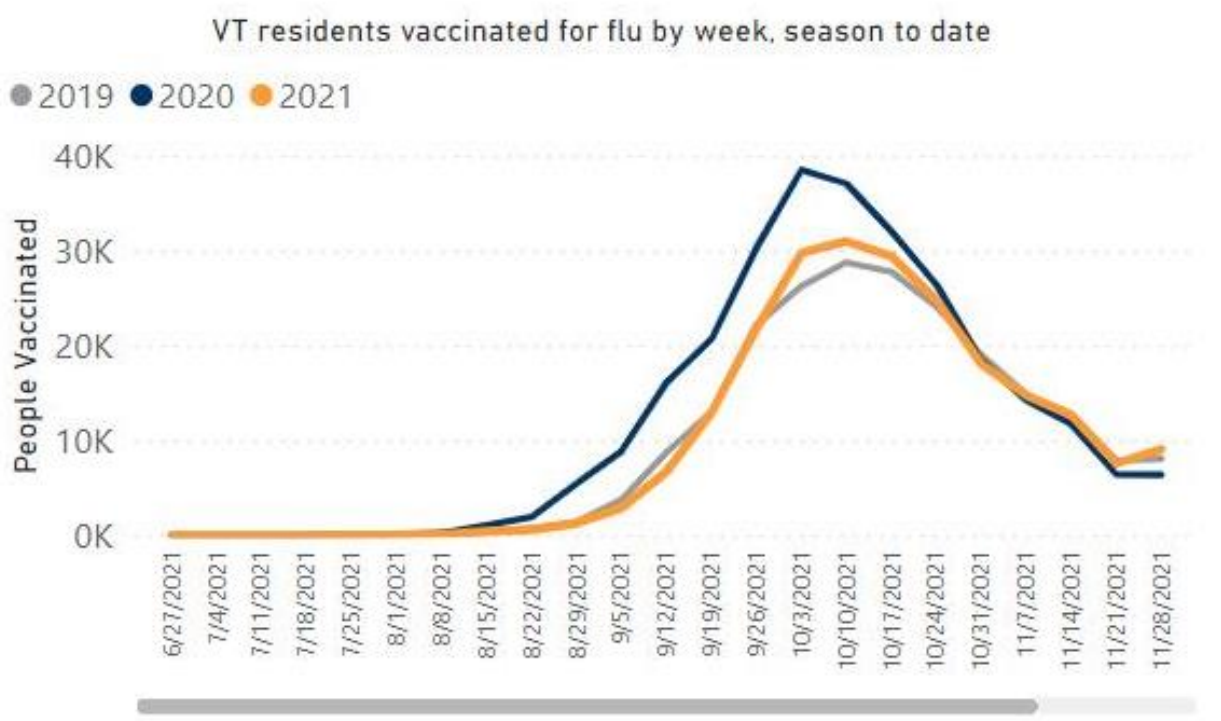
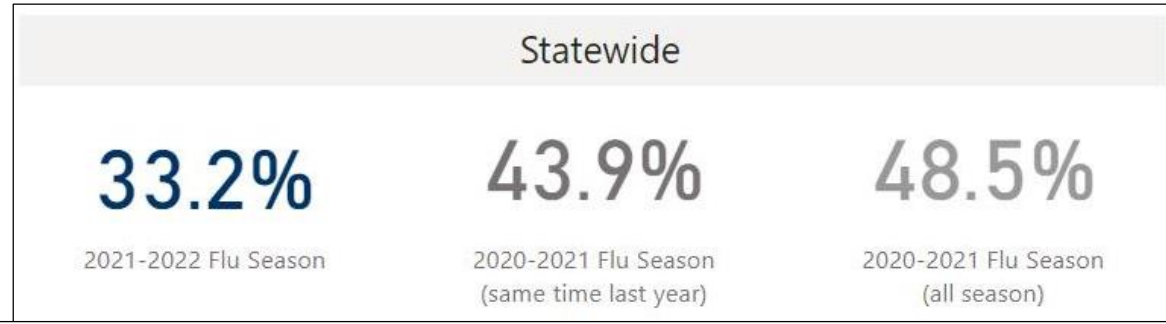
The Vermont Department of Health in collaboration with community partners are working to create posters and patient handouts.

These resources will be mailed to provider offices c/o the primary immunization contact in the coming weeks.

Translations of all new resources will be available in many languages shortly. These translations may be found on the [COVID-19 Translation webpage](#).

Flu Vaccination in Vermont

- We have plenty of flu vaccine left to order
- Please consider patient outreach and co-administration with COVID-19 vaccine



Novavax Vaccine

- Protein-based vaccine shown to have high efficacy
- Final data filed with the FDA for potential EUA approval
- More information will be provided as the vaccine moves through the approval process.

- [Efficacy and Safety of NVX-CoV2373 in Adults in the United States and Mexico | NEJM](#)
- [How the Novavax Covid-19 Vaccine Works – 05/07/2021 The New York Times](#)

Immunization Communication

- Ordering guidance comes from AHS.VDHCovidVaxDistribution@vermont.gov prior to ordering on Wednesday.
- The upcoming December Vermont Vaccine Program Update will go out tomorrow, including updated booster dose guidance.
- Next Immunization Program Provider call will be **January 25, 12:15 pm – 1:00 pm**: look for the invitation next week!

Special COVID Vaccine Clinic

- For the deaf, hard of hearing, deafblind community and their families or households.
- January 22, 2022
- 10 a.m. – 3 p.m.
- Doubletree by Hilton, Williston Rd., South Burlington

**JAN
22
2022**
10 AM - 3 PM

**COVID-19
VACCINE
CLINIC**

FOR THE DEAF,
HARD OF HEARING,
DEAFBLIND
COMMUNITY, AND
THEIR FAMILIES OR
HOUSEHOLDS

DOUBLETREE BY HILTON

870 WILLISTON RD, S. BURLINGTON, VT 05403

Pfizer and Moderna 1st, 2nd, boosters, and children 5+doses available.

Please bring your COVID-19 vaccination card.

Featuring:

- Staff in clear masks
- ASL interpreters, Nepali Sign Language interpreter, and Deaf interpreter
- Additional accommodation for those who don't sign
- Walk-ins are welcome, no pre-registration needed



NO Tuesday Media Briefing this Week – Special Vermont Edition on VPR

Stay tuned for Governor Scott's **State of the State address *today*** at 2 p.m.

- VT Legislature convened 1/4/22: Senate gaveled in remotely; House members attended in person, voting only (106-19) to allow **remote** legislating for 2 wks.

Quebec update: VPR's Mikaela Lefrak & CBC Montreal reporter Kate McKenna:

- Quebec in midst of post-holiday surge w/>15K new infections 1/3/22 & hundreds of new hospitalizations daily over the past week.
- Omicron arrived in Quebec in November; by mid-December “massive exponential” increase in daily new cases; officials monitoring hospitalizations (1/3: 97% of beds occupied).
- 11K HCWs currently off the job in Quebec due to infection.
- Just passed ministerial decree allowing cancellation of HCWs vacations.

NO Tuesday Media Briefing this Week – Special Vermont Edition on VPR

- ❑ Quebec update (cont'd.) – new restrictions by Quebec Premier François Legault and Minister of Health & Social Services Christian Dubé:
- ❑ Prior to Christmas, could gather indoors in groups of 10; restaurants open.
- ❑ Between Christmas and New Year's, established **curfew** (may not leave house from 10 pm – 5 am).
- ❑ Restaurants, gyms, theaters closed.
- ❑ Masks had been required indoors almost beg of pandemic.
- ❑ *“People are exhausted...there have been protests, but pretty muted so far.”*
- ❑ Canadian armed forces have been called in to help
- ❑ Talk of expanding existing vaccine passport with additional limits on unvaccinated.

Vermont Edition with VDH Commissioner Levine (1/4/22)

Q & A with Dr. Levine:

- MRC nurse – giving vax since Feb. 2021. Why are we not focusing on using hi-quality masks to cut transmission & why not impose a mask mandate? What are our plans for VTers who will suffer from long COVID? Levine: any mask is better than no mask – esp. indoors in public places; encourage use that which is most helpful. For Omicron, single layer cloth not primary choice – use doubled up, combo cloth & surgical, or KN95 if access to one that is validated/known to be effective, tho many will find these harder to wear for longer time. Mask mandate always on the table if we get to state of emergency & need to accelerate all mitigation measures; right now we are very specific in saying we ***strongly recommend***.

Vermont Edition with VDH Commissioner Levine (1/4/22)

- Mother of 15 yo vaxed thru school last summer, & “now considered not fully vax b/c past 6 mos. w/o booster. How quickly will can he get booster? What does FDA approval mean for VT? Levine: already authorized 3rd primary series dose for immunocompromised 5-11 yo. Tomw. is ACIP mtg. – we wait for that but usually very quick & aligned w/FDA. We want to be v. responsive to get them boosted as soon as they can be – goal = maintain in-person educ.
- Caller who had 2nd (Moderna) shot 8/28/21 & has heard conflicting reports re: when qualify for booster. Levine: right now no authorization to boost at 3-4 mos. But still considered fully vax – check list of immunocompromising conditions to be sure not eligible.
- School nurse: Got J & J & booster. Is that adequate – should I get mRNA booster? Levine: *“could have gotten mRNA booster after 1st dose J&J. “I would wait – you will get some impact from booster – let that play out in your immune system.”*

Vermont Edition with VDH Commissioner Levine (1/4/22)

- RE: testing – lots of parents facing issues this week when asked to test kids before back to school/child care, but hard to access (esp. PCR) – what is state doing to increase access? Levine: good news is that VTers listening to testing recs. Bad news is access to tests. Vendor unable to fulfill PCR – so we filled in w/rapid PCR & Ag tests. I think you'll see things go back to normal re: PCR. In addition, we handed out >45K Ag test kits to parents so students could be tested at home. We have a # of other initiatives to procure Ag tests for VTers that they don't have to pay for. Working on a # of supply chains. Pharmacies have had intermittent access – can only get what they get & sell out quickly. A lot will change since holidays no longer an issue. Cases today reflect rapid transmission of Omicron & result of gatherings. Just learned today from CDC – Omicron >82% of New England cases.
- Hearing concerns re: nasal swabs not as effective in detecting Omicron? Levine: hearing tests may not be as effective but can't quantitate – I think we're catching what we need to (some pts. may not have had enough viral load at time of 1st test.

Vermont Edition with VDH Commissioner Levine (1/4/22)

- (via Tweet) what are data re: under 5 age group them that make them not a priority for rapid testing right now? Levine: this age group is a TRUE priority. We want child care sector to know that – only limitation was supply chain for rapid tests. Have been planning since early Dec. but needed adequate supply for child care sector. Coming very soon – w/in next 1-2 wks. Please stay tuned & be optimistic.
- [Jane Lindholm live tweeting] people showing classic sx's but negative on rapid tests days & days after sx's began – what's happening here? Levine: PCR is most sensitive & should be positive if truly COVID. If Ag test negative early on, could be false negative. Also, we're in respiratory virus season – not seeing lots of flu but could be common cold or other viruses.
- Dr. Levine summarized treatments available for immunocompromised pts.

VDH COVID-19 Web Resources

<https://www.healthvermont.gov/covid-19/symptoms-sickness/what-do-if-you-test-positive-covid-19>



Rev. 11/15/2021

What to do if you test positive for COVID-19

People with COVID-19 can spread the virus to others. **If you test positive for COVID-19, even if you are vaccinated or never have symptoms, isolate as soon as you receive your test result and then notify your close contacts.** Isolation means staying home and away from other people – including the people who live with you – for at least 10 days.

Start following the guidance below on [how to isolate](#) and [notify your close contacts](#) as soon as you receive your positive test result.

You may get a call from the Health Department. If you miss the call, call us back at 802-863-7240.

Tell your health care provider that you tested positive for COVID-19. They may have guidance for you to take care of your own health. If you need to see a health care provider but don't have one, call 2-1-1 to be connected to care, or contact the nearest [federally qualified health center](#) or one of [Vermont's free & referral clinics](#).

If you are over 65 or have a high-risk medical condition and have mild to moderate symptoms, reach out to your health care provider to ask about [monoclonal antibody treatment](#) – as soon you get your positive test result. The treatment works best in the first five days, and can reduce the chance of being hospitalized by 70%. You can also get a pulse oximeter from the Health Department. This small device that clips onto your fingertip measures your pulse and oxygen levels and can help you know how sick you are.

If you took a self-test, or an at-home test, please be sure that you report your positive result to the Health Department. You can do that by choosing the option to automatically provide your results to your local health department or by filling out the [Vermont COVID-19 Self-Test Result Reporting Form](#).

Check the [Follow-up Testing Guide](#) to understand next steps based on your test results, whether



Use this guide for next steps to take after receiving an initial test result, based on whether or not you have symptoms and type of test (antigen or PCR). This guidance applies regardless of your vaccination status or if the test you took was completed in person at a clinic or at home (also called self-tests). At-home test results should be reported to the Health Department by completing [this online form](#). The chart continues on the next page. Find more detailed information:

- **for people with COVID-19** about isolating and notifying close contacts at healthvermont.gov/covid19positive
- **for close contacts** about quarantine and testing at healthvermont.gov/aboutclosecontact.

	Initial Test Result	Next Steps	Results from FollowUp PCR	Final Steps
PCR Test	Negative without symptoms	None Or, if you are a close contact and in quarantine, continue following the quarantine guidance .	A follow up PCR is not needed.	
	Negative with symptoms	Stay home until symptoms resolve. If you are a close contact and in quarantine, continue following the quarantine guidance .	A follow up PCR is not needed.	
	Positive with or without symptoms	Treat as a positive. Isolate and notify close contacts	A follow up PCR is not recommended. A follow up negative PCR test during your isolation period does not end isolation. Follow the guidance for ending isolation at healthvermont.gov/covid19positive	



https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID-19_What-to-do-if-you-are-diagnosed-with-COVID-19_final.pdf <https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID-19-Follow-up-Testing-Guide.pdf>



From VDH: Marketing/Materials for Pediatric Vaccine

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

HOME / COVID-19 / VACCINE /

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.

ANSWERS FOR PARENTS

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.

90%



[Find more answers in these FAQs about children's vaccines](#) ⓘ

Vaccine Education Sessions

We are proud to collaborate with the [Abenaki Nation of Missisquoi](#) and the [Vermont Chapter of the American Academy of Pediatrics](#), hosting 5-11 vaccine education and Q & A sessions:

- 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: [العربية Arabic](#) | [မြန်မာစာတန်း Burmese](#) | [Français French](#) | [Kirundi](#) | [नेपाली Nepali](#) | [Soomaali Somali](#) | [Español Spanish](#) | [Swahili](#) | [Tiếng Việt Vietnamese](#)

TALKING TO KIDS ABOUT VACCINES

Practice Issues

Shedding LIGHT on Recent COVID Guidance

The triple threat: Drs. Bell, Holmes and Raszka!



<https://www.nytimes.com/2021/10/20/us/politics/kids-covid-vaccination.html>

But first...

A Few Words About **Testing**

- Practices hearing that Fanny Allen test site is booking 4-5 days out and VDH is 5-6 days out; has caused increased demand for families who are able to navigate the system to book acute visits for a well-appearing child w/URI sxs who want same-day test (practice working to increase access on-site)
 - ▣ *Many efforts across VT to increase PCR and at-home antigen testing access. It helps to hear from you regarding real life delays – please keep us posted!*
- **RETURN TO PLAY** – demand also increasing for asymptomatic/mild cases, & how are practices responding? (e.g., shifting to RN phone screening and possible provider review/approval after information gathered)?
 - ▣ *YES – many colleagues have created RN triage clearance system for return to play after COVID. We have heard that the burden of clearance is HUGE & are in touch with national AAP and also UVM CH Pediatric Cardiology to consider changing the protocols (safely) to reflect changes in guidance and increased caseloads.*

But first...

A Few Words About **Testing** (cont'd.)

- Antigen testing for child care test-to-stay – hoping this is in the pipeline?
 - ▣ *YES – this has been in pipeline for a while and hopeful (with increase in supply chain) will be offered in the next week or so.*
- [Update following today's call: see next slide & link in today's email for info on anticipated rollout (1/10/22) of "Tests for Tots"]**
- General access to antigen tests from a health equity lens?
 - ▣ *Our VCHIP-AAP team agrees this is a massive problem. Increased supply should help but we are interested in your ideas on how to help in the equity arena.*

Thank you, Hillary Anderson!

From the VT Department for Children & Families COVID-19 Testing in Regulated Child Care Programs



COVID-19 Testing In Regulated Child Care Programs

We are reaching out today to share that we are closer to a rollout of the program we are calling 'Tests for Tots'. This program will distribute antigen test kits, on an ongoing basis, to regulated child care providers statewide, who in turn can provide them to their enrolled families. Families will be able to test their children in the event a positive COVID case is detected at the program. This program will allow kit distribution through providers, without the burden of implementing the actual testing or performing contact tracing. Increased testing will also reduce the impacts of widespread quarantine on children, their families, and program staff, who can also test themselves through this program. **We anticipate providers will be able to begin enrolling on Monday, January 10th.**

On December 13, 2021, the Child Development Division (CDD) shared that, in collaboration with the Vermont Agency of Education, work had begun to extend the school-based Test to Stay program to Prekindergarten (Pre-K) programs located in school buildings. Building on this work, the CDD, with the Vermont Department of Health and the Agency of Education, has developed a program in parallel with Test to Stay for the remaining regulated child care programs.

Tests for Tots will be for children aged two years old and older, as well as program staff. The antigen test kits that the state has available are limited by this age range of two years old and older in accordance with the manufacturer's recommendation for usage. We acknowledge that there are still children and families (children under the age of two years old) that will not have a testing option and the state will continue to explore what options might be coming available.

Additional information about Tests for Tots will be coming within the next week.

CDC Update: Isolation and Quarantine (12/29/21 & 1/4/22)

- Includes ***rationale*** and ***data***
 - <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation-background.html>
- Shorter **isolation** (for asymptomatic/mildly ill people) & **quarantine** periods of **5 days** to focus on when pt. is most infectious; followed by **continued masking for additional 5 days.**
 - Facilitate individual social & well-being needs, return to work, & maintenance of critical infrastructure.
 - Preliminary data suggest Omicron up to 3X more infectious than Delta variant.
- Isolation should only end if pt. fever-free for ≥ 24 hours without use of fever-reducing medication and other symptoms have resolved.
- Modeling data from UK reinforce importance of mask use: after 5th day after a positive test, an estimated 31% of persons remain infectious.

VDH Adaptation – CDC Isolation and Quarantine Recs

VDH has adopted CDC 12/29/21 update with the **following additions/exceptions:**

□ VDH **added** recommendation for two negative antigen tests at least 24 hours apart beginning no earlier than day 4 (Reminder: **Day 0 = sx onset OR day of pos. test if no sxs**)
<https://www.healthvermont.gov/covid-19/symptoms-sickness/what-do-if-you-test-positive-covid-19>

□ Testing also recommended **day 5 after exposure** (VDH does **not** specify how to do this testing: PCR/LAMP or antigen)

□ Refer to VDH testing guide shared previously:

<https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID-19-Follow-up-Testing-Guide.pdf>

IF YOU HAVE A POSITIVE TEST (PCR, LAMP, OR ANTIGEN)

This guidance is for people who are vaccinated, boosted or unvaccinated.

- Stay home and isolate for 5 days.
- You can leave your home after day 5 if:
 - you have two negative antigen tests performed at least 24 hours apart beginning no earlier than day 4*
 - AND you never had symptoms, or your symptoms have improved and you feel better
 - AND you have had no fever for at least 24 hours without the use of medicine that reduces fevers
 - AND you **wear a mask** around others through day 10.
- Notify your close contacts that you have tested positive.

*Testing is strongly recommended. If you are unable to get a test and you meet all other requirements you can end isolation after 5 days.

VT AOE & the New CDC Isolation and Quarantine Recs

- [Update following today's call]** Per VT AOE Secy. Dan French (1/5/22, ~3 p.m.):
- *“Our colleagues at the Health Department are working rapidly to review this guidance and apply it to Vermont's context, and we are balancing the urgent need for guidance with the equivalent need for that guidance to be sufficiently stable. As soon as possible this week, we will jointly issue an FAQ with the Health Department responsive to the many questions we are hearing from the field. In the meantime, schools should continue to follow the updated Vermont Department of Health isolation and quarantine guidance for those who test positive and those who are a close contact of someone who tests positive. Additionally, for your planning purposes, schools can be confident that given the changes in CDC and Vermont guidance, the Test to Stay protocol for Vermont schools will be shortened from seven days to five.”*
 - **Please be mindful of this notable exception:** AOE/VDH has **NOT** officially stated that children 5-17 yo do NOT quarantine if vaccinated with 2-shot primary series (please stay tuned)

VDH: Adopted New Isolation and Quarantine Recs (cont'd.)

- Test to Stay team is working on updating protocols in light of changes re: isolation and quarantine
- **Pediatric algorithm** is outliving its utility and a team will meet Thursday (1/6/22) to determine how to support pediatricians and school nurses in getting students back to school
 - ▣ **Thank you** for your many comments and questions about this!
- Return to Play is burdensome and pediatricians are swamped (as addressed in slides re: testing)

One School's Response: from Montpelier this a.m.

- ❑ *“Over vacation, student population at Main Street Middle School (MSMS) reached vaccine coverage rate >80% threshold set by the state.*
- ❑ *The guidance from the Agency of Education and Department of Health (<https://education.vermont.gov/sites/aoe/files/documents/edu-vdh-memo-french-levine-advisory-covid19-recommendations-for-contact-tracing-updated.pdf>) states: when school reaches >80% fully vaccinated students, students not required to quarantine as a result of a school based contact with a positive case.”*
- ❑ No longer conducting TTS at MSMS. (Montpelier HS hit 80% early in fall.)
- ❑ Going forward, if pos. case at MSMS, caregivers & students will receive an **exposure email** with guidance re: which day to test (based on date of exposure). Students will not need to quarantine or show a negative test to school officials. If quarantine desired, contact school – will be excused absence. (Expect pos. cases from surveillance testing conducted 1/3/22)

Worth a Look!

Thank you, Val Rooney!

- From The Atlantic magazine: Why Health-Care Workers Are Quitting in Drove
 - ▣ About one in five health-care workers has left their job since the pandemic started. This is their story—and the story of those left behind.
 - ▣ <https://www.theatlantic.com/health/archive/2021/11/the-mass-exodus-of-americas-health-care-workers/620713/>

And on a much lighter note, thank you, Melissa Kaufold!

- NPR story from Germany: ~700 sheep/goats arranged in shape of ~330-foot syringe in a field to encourage Germans to get vaccinated.
 - ▣ <https://www.npr.org/sections/coronavirus-live-updates/2022/01/03/1069942305/sheep-goats-encourage-vaccination-germany>



From AAP-VT

- Round 2 of **Family Forums** is complete!
- All recordings will be posted on YouTube – please stay tuned for links in January, 2022
- Successfully engaged local health care professionals, school nurses, and VDH School Liaisons in conversation with parents/caregivers re: COVID-19 vaccine for children.
- **Thank you to colleagues who stepped up to participate!**
- <http://www.aapvt.org/news/join-us-conversation-about-covid-19-vaccines-children>

Vermont Chapter
INCORPORATED IN VERMONT
American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN

Join Us

For a conversation about
COVID-19 vaccine for children

All events held from 7-8:00 pm

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.



Thank you Becca Bell, Stephanie Winters!

VDH Resources of Interest

- Created by Katy Leffel & Molly McClintock as suggested by VDH District office MCHC to answer questions from community partners (goal: support non-clinical home visitors in conversations w/families; rec. key source of info always the PCP).
- Included links since info on sites will be kept up to date.
- Most home visitors work w/adults & children < 5, but many families have older children eligible for vaccine now; also laying groundwork for next, younger age group.
- Shared w/MCHCs, home visitors, & Head Start.

General information on the COVID-19 vaccine for ages 5-11

- [The Vermont Department of Health](#) has up-to-date information for Vermonters ages 5-11 who are now eligible for the vaccine
- [Frequently asked questions](#) about the COVID-19 vaccine for this age group
- Information changes frequently, so make sure to keep up with the [American Academy of Pediatrics](#) and [Centers for Disease Control and Prevention](#) web pages for updates

Join a family forum with Vermont pediatricians

- The [American Academy of Pediatrics family forums](#) are focused on the COVID-19 vaccine for ages 5-11 (please check the website for the most updated information)
- Informational videos from Dr. Andrea Green on the COVID-19 vaccine for ages 5-11 in [multiple languages](#) and [American Sign Language](#)

Tips for supporting families during vaccinations

- Tips on creating a [more positive vaccine experience](#), especially for children with special health needs, from the Vermont Family Network
 - Under the "resource tab" you can also find handouts for a [social story](#) and a template to help families ["make-a-plan"](#)

Schedule an appointment

- Links for general information on [vaccination appointments](#) or to help families [make an appointment online](#)
- Call the Health Department at 855-722-7878, Mon - Fri 8:00 am - 4:30 pm, Sat and Sun 10:00 am - 3:00 pm
- Email questions to AHS.VDHPublicCommunication@vermont.gov

Resources on talking with families

- [Talking with families about vaccines](#) can be difficult, here are some resources to help:
 - CDC web page, including a section on [common myths](#) about the COVID-19 vaccine and how to dispel them
 - Video explaining to families [how the vaccine works](#)
 - A [video with the Sesame Street](#) characters talking to doctors about what a vaccine is, why they should get it, and what to do if they are feeling scared

VCHIP-VDH COVID-19 calls: *Welcome 2022!*

- ❑ January calls generally Wednesdays except as below:
- ❑ Call dates: 1/5 (W), 1/12(W), 1/19 (W – 1st Zoom call), 1/24 (M)
 - ❑ No call Wednesday, 1/26/22
- ❑ **COMING THIS MONTH:** switching to **Zoom** platform
 - ❑ **Anticipated date: January 19, 2022**
- ❑ 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 1st/3rd Thursdays (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 – ***Wednesday, January 12, 2022 12:15 – 1:00 pm***
- Please tune in to VMS COVID-19 call with VDH Commissioner Levine – ***Thursday, January 6 – 12:30-1:00 p.m.***
- **Join Zoom Meeting:**
<https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJlZFQ2R3diSVdqdIJ2ZG4yQT09>
 - ▣ Meeting ID: 867 2625 3105 / Password: 540684
 - ▣ One tap mobile - +1 646 876 9923,,86726253105#,,,,0#,,540684#