Wendy Davis, MD FAAP - Senior Faculty, Vermont Child Health Improvement Program, UVM
Breena Holmes, MD FAAP – VCHIP Senior Faculty & Physician Advisor, MCH Division, VDH
June 23, 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

- Celebrating **Elle Purrier St. Pierre** victory in 1500m
  - 3 minutes, 58.03 seconds (after shoved off track after start)
  - SEE NYT: *A Vermont Runner Takes Her Show on the Road*  

- Also Pink Flamingo Day! *(official bird of Madison, WI)*

- Reminder – weekly event schedule:
  - *New VCHIP-VDH call calendar* (next slide); Gov. Media Briefings *now Tuesdays only*; VMS call w/Dr. Levine Thursday

- Announcements; situation, VDH, CDC, AAP updates

- Practice Issues – **VCHIP Transitions & Honoring Judy Shaw**

- Q & A/Discussion

*[Please note: the COVID-19 situation continues to evolve – so the information we’re providing today may change]*
Based on survey responses – thank you!

- **Remainder of June:** generally **Mondays & Wednesdays**
  - Exception: **NO CALL** Monday, June 28
  - We **WILL** have a call on **Wednesday, June 30**

- **July:** generally **Wednesdays only**

- **August:** generally **Wednesdays only** – subject to change as we approach fall school reopening

- **September forward** – **TBD!**
Situation update

- **U.S.** 33.5 million+ cases; 602,164 deaths
  - 6/22/21: 12,773 new cases; 432 deaths
  - Past week: av. 11,370 cases/day (14d. change -21%)
  - 3.8 million+ deaths worldwide; 179.1 million+ cases (-13% & -9% 14-day change respectively)

- **NEW VDH Weekly Data Summary** schedule: moving to every other week for the summer; then will likely move to monthly updates in the fall. Will only provide spotlight analyses as needed! (Latest: 6/18/21)
  - Children (0-19) = 23% of VT COVID-19 cases; of those, 24% are 18-19 y.o. [Total 5,535 posted 6/18/21]
  - Now includes data on vaccine breakthrough cases
COVID-19 Cases Among School Aged Children

June 21, 2021

This brief reflects data as of June 19, 2021 at 7 pm (the last complete MMWR week). All rates are calculated per 10,000 people. The 14-18 year old age group does not include college students. Data is preliminary and subject to change.

Number of Cases by Week

- School Aged (5-18)
- Non-School Aged

June 23, 2021
COVID-19 Cases Among Vermont’s School-Aged Children

[Compare to data from previous week: rates were 1.4/10K (HS), 0.5 (MS), and 1.1 (Elem. School) respectively]
COVID-19 Cases in Vermont K-12 Learning Communities While Infectious

- Table updated **Tuesday & Friday** w/data through previous Sunday & Wednesday.

### Cases in Vermont K-12 Learning Communities While Infectious

<table>
<thead>
<tr>
<th>Learning Community</th>
<th>Cases Reported In the Past 7 Days</th>
<th>Total Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL FOR ALL SCHOOLS</td>
<td>1</td>
<td>1402</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Learning Community</th>
<th>Cases Reported In the Past 7 Days</th>
<th>Total Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL FOR ALL SCHOOLS</td>
<td>4</td>
<td>1402</td>
</tr>
</tbody>
</table>

- **VT Colleges & Universities:**
  - **UVM update:** students on campus this summer must be registered with the Testing Center and test weekly.
  - Requiring COVID-19 vaccine for students: Bennington College, Champlain College, Middlebury College, St. Michael’s College, University of Vermont

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June 23, 2021
VDH COVID-19 Vaccine Registration & Sites


ELIGIBILITY

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

GET YOUR VACCINE WITHOUT AN APPOINTMENT!

› Find a walk-in clinic here

More ways to get your vaccine!

• Vaccine clinics for restaurant, hospitality, and tourism workers
• Vaccine clinics for school and community, open to 12-15-year-olds

MAKE AN APPOINTMENT

ONLINE
Daily updates Tuesday thru Saturday

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

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

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

- Daily updates Tuesday thru Saturday
- Data = counts reported by end prev. day; subject to change.
- By Age – Statewide (≥ 1 dose):
  - 12-15 = 57.5% (56.6% on 6/21)
  - 16-17 = 68.7% (68.4% on 6/21)
  - 18-29 = 55.3% (54.9% on 6/21)
  - VT Age 12+ = 77.3% (77.3% - 6/21)

### Vermont Vaccination Data

#### By Age – Statewide

<table>
<thead>
<tr>
<th>Age</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-15</td>
<td>57.5%</td>
</tr>
<tr>
<td>16-17</td>
<td>68.7%</td>
</tr>
<tr>
<td>18-29</td>
<td>55.3%</td>
</tr>
<tr>
<td>VT Age 12+</td>
<td>77.3%</td>
</tr>
</tbody>
</table>

Statewide numbers and percentages are capped at 100%. County numbers and percentages are capped at 99%. Values above 99% are suppressed to protect personal health information. See notes below for more information.

#### By Race – Statewide

<table>
<thead>
<tr>
<th>Race</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian</td>
<td>70.2%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>63.0%</td>
</tr>
<tr>
<td>Native American, Indigenous, or First Nation</td>
<td>20.1%</td>
</tr>
<tr>
<td>Pacific Island</td>
<td>17.1%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>39.6%</td>
</tr>
<tr>
<td>White</td>
<td>74.6%</td>
</tr>
</tbody>
</table>

Race information is missing for 4% of people vaccinated.

#### By Race/Ethnicity and Age – Statewide

<table>
<thead>
<tr>
<th>Race</th>
<th>12-20</th>
<th>21-64</th>
<th>65+</th>
<th>Age 12+</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIPOC</td>
<td>58.2%</td>
<td>73.4%</td>
<td>64.6%</td>
<td>67.8%</td>
</tr>
<tr>
<td>Non-Hispanic White</td>
<td>52.3%</td>
<td>72.9%</td>
<td>91.3%</td>
<td>73.8%</td>
</tr>
<tr>
<td>Vermont</td>
<td>53.0%</td>
<td>72.9%</td>
<td>91.1%</td>
<td>71.5%</td>
</tr>
</tbody>
</table>

Race/ethnicity information is missing for 0% of people vaccinated.

#### By Sex – Statewide

<table>
<thead>
<tr>
<th>Sex</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>80.0%</td>
</tr>
<tr>
<td>Male</td>
<td>74.3%</td>
</tr>
<tr>
<td>VT Age 12+</td>
<td>77.5%</td>
</tr>
</tbody>
</table>

Sex information is missing for 0% of people vaccinated.

Updated 6/23/2021 8:40:58 AM
Now Available: Map of Vaccine Rates by (VT) Town

- Map shows overall % of VTers age 12+ vaccinated with ≥ one dose of COVID-19 vaccine.
- Map updated weekly (Thurs.) & includes data reported to VT Immunization Registry thru Wed. [Note: last reviewed 6/10/21]
- Please use caution when interpreting town data – several scenarios where vaccinations are not attributed to the correct town. [See web site notes for details.]

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

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

7-Day moving average


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

June 23, 2021
From the CDC: SARS-CoV-2 Variants in the U.S.


Most common lineages:
- B.1.1.7 (VOC): 69.2% (64.0-74.2%)
- P.1 (VOC): 11.2% (7.7-14.8%)
- Other

Additional VOI/VOC lineages:
- B.1.351 (VOC): 0.4% (0.0-1.2%)
- B.1.1.71 (VOC): 0.3% (0.0-0.9%)
- Other

* Other represents >200 additional lineages, which are each circulating at <1% of viruses.
** These data include Nowcast estimates, which are models of projections that may differ from weighted estimates generated at later dates.


June 23, 2021
From the CDC: SARS-CoV-2 Variants in the U.S.


Regional proportions from specimens collected the two weeks ending 6/5/2021.
US Territories not shown are included in HHS regions:
PR, VI - Region 2
AS, FM, GU, MH, MP, PW - Region 9

Updated June 8, 2021


June 23, 2021
VDH detects variants of concern through genetic sequencing of certain viral specimens (people who already tested pos. in various parts of VT); only a small percentage of samples are sequenced.

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

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

We are collaborating with state partners to prepare for the next phase of pediatric COVID-19 vaccine administration.

Thank you to those who completed our survey
- Survey topics included: interest in administering COVID-19 vaccine in practice; willingness to assist with school-located vaccine clinics; opinion re: COVID-19 vaccine administration to pediatric patients in pharmacies.

Please stay tuned for further information – remember to enroll as a COVID-19 (specific) vaccine provider with VDH Immunization Program if you have not already done so!
- Please do not let concerns re: vaccine wastage be a barrier to enrollment – VDH ready, willing & able to support you on this issue!

By May 22, 2021, 57.0% of U.S. adults aged ≥18 years had received ≥1 vaccine dose; coverage was lower and increased more slowly over time among younger adults. If the current rate of vaccination continues through August, coverage among young adults will remain substantially lower than among older adults.

https://www.cdc.gov/mmwr/volumes/70/wr/mm7025e1.htm


Overall, 34% of adults aged 18–39 years reported having received a COVID-19 vaccine. Adults aged 18–24 years, non-Hispanic Black adults & those with less education, no insurance, and lower household incomes, had lowest reported vaccine coverage & intent to get vaccinated. Concerns re: vaccine safety/effectiveness were commonly cited barriers.

https://www.cdc.gov/mmwr/volumes/70/wr/mm7025e2.htm
ACIP Meeting Postponed

- Special meeting rescheduled due to Juneteenth federal holiday
- Agenda item on post-vaccine myocarditis now included 6/23-25/21
  - Webcast link access: https://www.cdc.gov/vaccines/acip/index.html
- Today’s agenda: COVID-19 Vaccines – Overview myocarditis/ pericarditis; update on safety (including myocarditis after mRNA vaccines); VaST assessment; COVID-19 mRNA vaccines in adolescents & young adults – benefit-risk; overview of data to inform recommendations for additional doses of COVID-19
- Agenda also includes info on Dengue, influenza, rabies, zoster, pneumococcal vaccines.
ABP blog: "College Students Speak Out About Health Care Needs" – thank you, Erica Gibson, MD
https://blog.abp.org/blog/college-students-speak-out-about-health-care-needs?_cldee=ZXJpY2EuZ2lic29uQHV2bWhlYWx0aC5vcmc%3d&recipientid=contact-af56d33bb524e71180d6005056ae0b4e-083a5815653944729907b3da42560698&esid=81074c10-74cf-eb11-8133-005056ae0581

Encouraging patients/families to familiarize themselves with on campus medical and mental health services plus arranging check-ins while home for visits/vacations is key also!
VPR: Ibram X. Kendi Recommends 6 Books To Help Your Kids Understand Race – thank you, Melissa Kaufold

https://www.vpr.org/post/6-books-help-your-kid-take-next-steps-towards-social-justice#stream/

Study (J. Dev & Behavioral Peds): no adverse impact on attachment for parents who choose not to share a bed with their infant.

Governor Phil Scott

- Just off phone w/White House & governors. Walensky: upcoming ACIP meetings.
- Delta variant makes up 20% of cases nationally and vaccine is effective against variant.
- Supply will remain the same in the state allocation. Moderna and Pfizer contracts will expire in July & will not be renewed. We have plenty of inventory.
- Today, we are at 81.3% vaccination; still many opportunities to get vaccinated.
- VT averaging <5 cases/day and low hosps.; 1 death in past 5 wks.
Modeling – Commissioner Pieciak:

- VT leads U.S. in highest vaccination rates, lowest cases, fewest hospitalizations, 0 (recent) fatalities.
  - Only state where over 90% of 65+ is fully vaccinated. Over 5,000 vaccinated last week.
- States with > 60% vax have 50% fewer cases, hospitalization, and deaths.
  - Estimated > 300 lives saved in Vermont due to vaccination.
- 14-day hosp. low, down 47%; 38 new cases this week, 8 fewer than last week. 5 counties had no cases all week. Cases will remain low for foreseeable future.
- New England states continue at the top of vaccination. All 6 now fully open.
- Canada situation steadily improving. Vaccination rate now 66.7% at least 1 dose. 19.6% fully vaccinated.
  - US & Canada extended closed border for another month. Fully vaccinated Canadian citizens/residents can now enter US without quarantining.
Tuesday Media Briefing (cont’d.)

AHS Secretary Mike Smith

- As of this a.m., 81.3% w/ at least one dose. 71.8% w/ at least one dose reconciled. White House metric (8+ at least one) = 84.4%.
- Pop-ups – most pharmacies also offering walk-in.
- Haven’t slowed down in popups! We’re going any place we can possibly go to get people vaccinated (Barton-Glover yard sale!)
- VT response to serving homeless has been recognized nationally – waived elig. rules for emerg. housing program. Motel rooms some nights approaching 2K individuals. Emergency closed these
- FEMA reimb. VT w/almost 79m. Costs. FY22 – costs would rise to 108m. If w/o change. Cont’d. fed reimb. uncertain. Never intended to be permanent soln. Causes isolation; barriers to meals, substance use tx.
AHS Secretary Mike Smith

- Transitioning to more sustainable/scale model. Legislature will convene work group w/partners. Reached agreement on plan accepted w/o change by Legislature; incorp into budget; eff. July 1.
- 41m. plan much more expansive than pre-pandemic. New elig criteria qualify for up to 84d. Emerg housing for fam w/children, pregnant women some disabled. Some will qualify for >84d.
- Service agencies working w/families on individual trans plans.
- AHS may provide 2500. stipends to families to meet their needs; rapid funds up to 8K to meet needs.
AHS Secretary Mike Smith

- Solution is transition to more permanent housing & services. VT now investing >120m. to build new housing. In the interim, AHS will meet needs of most vulnerable w/expanded hotel/motel program in 2022. New units, shelter capacity, access many millions of dollars.

- Post-pandemic, VT will still be a leader in caring for the homeless.
Tuesday Media Briefing (cont’d.)

VDH Commissioner Levine

- “Strong wall of protection against the virus through vaccines.”
- I trust the vaccines but not the virus. It has the potential to change and mutate into more dangerous viruses.
- CDC now calls Delta a **variant of concern**. Spreading in US w/potential to become dom. strain. w/in weeks – months. Parts of US where vax rates much lower expected to have significant outbreaks – already seeing - but not the Northeast.
- VT still working hard to make vax accessible to anyone not vax. – talk to health care professional or find personal reason to get vax. You can help: listening, being empathetic, non-judgmental can go a long way. Help others get vaccinated: transportation, child care. Vaccine is routine part of our health care against diseases like flu, measles, polio.
Practice Issues

VCHIP Transitions: Honoring Judy Shaw, EdD, MPH, RN, FAAP

Professor of Pediatrics and Nursing, UVM Larner College of Medicine

Executive Director, VCHIP (2000-2021) & Natl. Improvement Partnership Network (NIPN)

June 23, 2021
Virtual Retirement Party: Share Reflections of Judy’s Impact

From **Colleen Reuland** (OR) – “I will be eternally grateful to Judy for:

- **Mentorship** to me as a professional as the Director of OPIP (OR’s VCHIP!).
  - Judy was always available to me to mentor me on how to handle difficult conversations, engage partners, and consider our staffing model.

- **Positive and strength-based attitude**
  - The beginning development of our IP was BUMPY & political – Judy’s upbeat, “can do attitude” was essential to getting people to work together.

- **Mama Bear about NIPN and each IP**
  - I always felt like Judy was a mother figure to all her “IP children”. I felt the motherly love of unconditional support, pushing me to be better, but having our collective back if we ever felt attacked or in danger.

Thank you!! Judy. As Maya Angelou said “People won’t remember what you did, but they will remember how you made them feel”. I cannot tell you how supported, cared for, and seen you always made me and our team feel.”

June 23, 2021
From Francis Rushton, MD FAAP (pediatrician who practiced in Beaufort, SC & served as medical director of QTIP (SC’s VCHIP; now lives in AL)

- Thank you Judy, for being the "rock", steadily shepherding new partnerships into existence and reaching out to us for years and years from frozen Vermont. You have been a true friend not only to children but to us too!

From Andy Racine, MD PhD FAAP – Professor of Pediatrics, Albert Einstein College of Medicine & Children's Hospital at Montefiore

- Judy is a unique treasure from whom every one of us has benefitted enormously over the years. Her leadership has been an inspiration and her legacy will continue to guide our efforts for years to come.
From **Holly Tutko, MS** – UNH Institute for Health Policy & Practice & Department of Health Management & Policy; Director, NH Pediatric Improvement Partnership (NH’s VCHIP!)

- Judy – THANK YOU so much for your encouragement, guidance and advocating for state IP partnerships. Your support was instrumental to the development and building of NH PIP.

- THANK YOU for your tireless dedication to promoting the delivery of optimal care to every children and teen in the US. The ripple effects of your work continue on through the work of all IPs and Bright Futures!

- Enjoy and best wishes for the new opportunities ahead!
I am honored to be invited to recognize and thank Judy for all of her contributions to the field of quality improvement and promoting children’s health! Off and on, over the years, I had the opportunity to work with Judy and it was always such a delight when it happened! We reached out to Judy when getting ME-CHIP [Maine’s VCHIP!] off the ground and she was always there to support and, whenever she could would make the trek to Maine to give us a hand! Thank you, Judy, for all that you have done and for all that you have taught me. Thank you for leadership in the area of improvement science, for always making it a vital part of your work and for the many other “improvers” you have groomed over the years! Enjoy your well-deserved retirement!
Virtual Retirement Party: Share Reflections of Judy’s Impact

From **Linda Lee, APR** – Executive Director, AL Chapter of the AAP

- Judy’s site visit to Alabama in 2013 was the pivotal moment for our organization’s efforts in spreading QI capacity across pediatric practices statewide. Her wisdom & counsel were key factors in the successful/swift ramp-up of our IP. AL Child Health Improvement Alliance (ACHIA) has benefited ever since from her strong leadership at NIPN & commitment to spreading pediatric QI as an integral part of practice. Thank you, Judy, for your years of dedication and commitment to child health!

From **Cason Benton, MD FAAP** – U of AL & Director, ACHIA

- Judy – you provided the vision and ongoing mentorship that allowed ACHIA to come into existence. It is not an exaggeration to state that I say one or more of your sage words of wisdom at least once a week. Thank you.
From **Tamara John Li, MPH (TJ)**, Children’s Natl. Medical Center

- Judy, you are amazing! You have touched so many lives and I am so grateful to have met you. You are a brilliant, dedicated, hardworking superstar, but still remain humble. I will cherish the times you encouraged me and will utilize your QI lessons throughout my career. Thank you for being you and congrats on your retirement!
Virtual Retirement Party: Share Reflections of Judy’s Impact

From Susan Castellano – Acting Director, Health Policy Division, MN DOH

- Between her Bright Futures and NIPN leadership, it would not be an overstatement to say that Judy has led the collective vision for this country on developing and promoting children’s health. Of course she would be quick to say with lots of partners, which she expertly engages, thereby making her so successful. With NIPN, she has both the ability to hold the vision loosely enough to accommodate state differences, while maintaining the integrity to the core principles of strong quality improvement science that would make them successful. It was an art and a gift that greatly benefited me and Minnesota.

- Judy has worked tirelessly and long to move the field forward. She is a force to be reckoned with in the most friendly, positive and engaging way possible. I appreciated her mentorship, personal and professional caring, and treating me as a colleague. Working with and learning from Judy, one feels they have the distinguished privilege (as indeed it is) of being co-conspirators in a special club accomplishing greatest mission there is: to support and improve the health of children in the US. It has been a wonderful experience!

Thanks Judy for all you’ve done for me, the field, and children!

June 23, 2021
From **Lewis First, MD FAAP** – sent regrets that he is unable to be on today’s call, with the following remarks:

- “I have appreciated the opportunity to extend some personal thoughts of gratitude for all that Judy has done, and I offer my congratulations, thanks, and best wishes on behalf of all of us in the department.”

- Please stay tuned – more to come at:
  - Pediatric Grand Rounds on July 7 (Dr. First’s annual State of the Department)
  - Department event on July 9 honoring Judy, Alan Homans, Barb Kennedy & Sue Victory
In case you missed it… (6/21/21)
Update: Blood Lead Screening in Vermont – Matt Saia, MD

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

Available for your use!
• PowerPoint presentation
• Video message from AAP-VT Chapter President Rebecca Bell: “We are so excited that the COVID Vaccine is available for young people….”
• Posters for your office
• SEE ALSO AAPVT press release 6/10/21:
From Merideth Plumpton, VDH IZ Program RN Coordinator: Planning for (More) Pediatric Vaccine Administration

- For all state supplied vaccines, CDC requires provider offices enroll w/child & adult vax programs; requires additional enrollment to house/administer COVID vaccine. Once completed, can receive shipment, store & administer vaccine.

- Three PCP office “buckets,” each w/separate COVID-19 enrollment process.
  - FQHC’s – can enroll into a federal HRSA program to receive a separate allocation of vaccine. IZ program working with Bi-State to help FQHC’s with this process. Of the 11 FQHC umbrella organizations, eight are fully onboarded and offering COVID vaccination.
  - Hospital owned practices – IZ program spoke with all hospitals; request for information was sent to all hospitals two weeks ago asking for their plan to continue to offer vaccine. Have responses from all but one hospital.
  - Hospitals are telling VDH when their PCP sites will offer COVID vaccine. No hospital PCP offices are currently offering vaccine. Several planning to in the coming weeks.

- Some hospitals with ultracold storage capacity have offered to be local vaccine hubs for Pfizer in their region of the state.
From Merideth Plumpton, VDH IZ Program RN Coordinator:
Planning for (More) Pediatric Vaccine Administration

- **Independent PCP offices** – selected independent PCP offices were invited to onboard earlier than others (based on panel size, location, & ability to manage minimum vaccine order sizes. Invitation sent to 20; 14 sites now offering COVID vaccine in their offices; served vax depot and direct shipments from mfrs.

- On 6/4, all COVID-19 enrolled PCP independent practices (approx. 35) received invitation to provide COVID vaccine regardless of size. Vaccine depot will help serve smaller practices that cannot order the minimum shipment. 25 independent practices have not completed the COVID 19 enrollment process and are not eligible to receive COVID-19 vaccine.

- Independent Practices: - If your office would like to offer COVID 19 vaccine and have not heard from the Immunization Program please reach out to us.

- Hosp. owned practices – please check with administration for your plan.

- FQHC’s – please check with your umbrella organization for your plan.
VT vaccine depot has been serving mass vax clinic sites & will continue to operate & serve PCP practices across the state. Depot can break large shipments (e.g., Pfizer min. order size 1170 doses; now offers 450 doses) into more manageable sizes.

There is no requirement for PCP offices to have ultracold storage capacity!

If interested in having COVID vaccine, here’s what you need to know:

- CDC requires that sites reconcile COVID vaccine inventory weekly.
- You can offer this in your normal clinic flow, and/or offer small COVID clinics
- Pfizer and Moderna both require 2 doses; office must manage inventory & plan for both.
- Large shift in messaging from CDC: may be increased waste at PCP offices, since all COVID vaccine comes in multidose vials (packaged without preservatives and needs to be used within a short window of time once the vial is punctured: 6 hrs. for Pfizer and J&J, 12 hours for Moderna). CDC is now saying do not miss opportunities to vaccinate because of potential waste – e.g., if pt. comes into the office 5 minutes before you close and wants a COVID vaccine, open the vial/give vaccine, waste the remaining doses.
NEW position: Division of Maternal & Child Health (MCH) – will oversee legislatively appropriated Global Commitment funding in support of the Governor's vision to expand sustained MCH home visiting & implementation of new evidence-based model: Parents as Teachers (PAT). Expansion is also a key VDH priority, as outlined in State Health Improvement Plan.

- Will oversee all aspects of program development/implementation of PAT. [Sustained home visiting is a voluntary program for pregnant individuals/families w/young children to provide services that improve MCH; prevent child injuries/abuse/maltreatment; promote social-emotional health; improve school readiness; reduce crime/domestic violence; improve economic self-sufficiency; and enhances coordination and referrals among community resources and supports, such as food, housing, and transportation.]


- Position closing this week!
In case you missed it (SEE VCHIP-VDH COVID Call 6/7/21)

Vermont WIC Program Updates

• Current waiver for remote (phone) enrollment & nutrition appointments will expire late Aug.; preparing for return to in-person Sept.
  • Revising procedures to support safe experience for families/staff, (children & some pregnant participants will not be vaccinated).
  • Goal: align WIC service delivery with pediatric and OB approaches to masking, etc. (knowing that things may look different by September).

• Practices may receive requests from local WIC staff for recent measurement data until return to in person WIC appointments.

• Increased benefit for Fruits & Vegetables June through September!
  • Farm to Family coupons issued in July for use through October

• Breastfeeding Peer Counseling services are expanding and will be available Statewide this summer

• Formula contract change: Vermont currently contracts with Gerber, and will transition to Abbott/Similac on 10/1/21 (no Rx needed for special formulas)
Information campaign goal:
- Increase # of patient/provider conversations about substance use in pregnancy
- Addresses alcohol, cannabis, tobacco, opioid use
- Web pages, fact sheets, rack cards
- https://www.healthvermont.gov/family/pregnancy/substance-use-pregnancy
Holly Morehouse, Executive Director: initial grant program (fed. $) = $1.5m
- 188 proposals submitted; seeking >$7m.

Sen. Bernie Sanders secured additional $2.35m. for total of $3.85m.
- Grant awardees: ~100 grants in 13 counties will go out (1st 38 this week; > additional next week). Also, additional programs by local schools.

Increased access through: creating new opportunities, addressing affordability (98% have measures to provide at low/no cost), increasing slots, assure underrepresented youth included, providing for those w/special needs.

VT Community Foundation adding support to stretch grants even further.

Expect to add 238 total weeks of programming & 31,650 new slots.

*Vermont 2-1-1 is ready/willing to help families find summer programs*

Visit the web site: resources for families & highlights of the summer health guidance for programs.
Based on survey responses – thank you!

**Remainder of June**: generally Mondays & Wednesdays
- Exception: NO CALL Monday, June 28
- We WILL have a call on Wednesday, June 30

**July**: generally **Wednesdays only**

**August**: generally **Wednesdays only** – subject to change as we approach fall school reopening

**September forward** – TBD!
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, June 30, 12:15 – 12:45 pm – NO CALL MON. 6/28!

- SEE VCHIP-VDH COVID-19 Call Summer Calendar for our new schedule!

- Please tune in to VMS call with VDH Commissioner Levine:
  Thursday, June 24, 2021 – 12:30-1:00 p.m. – Zoom platform & call information

- Join Zoom Meeting:
  https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVdqdlJ2ZG4yQT09
  - Meeting ID: 867 2625 3105 / Password: 540684
  - One tap mobile - +1 646 876 9923,,86726253105#,,,,0#,,540684#