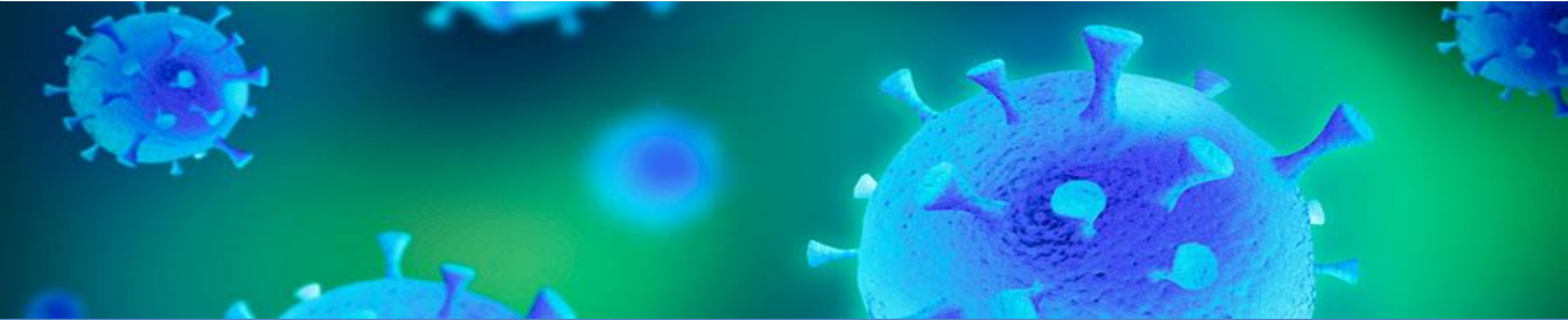


VCHIP / CHAMP / VDH COVID-19 UPDATES



Wendy Davis, MD FAAP - Senior Faculty, Vermont Child Health Improvement Program, UVM
Breena Holmes, MD FAAP – VCHIP Senior Faculty & Physician Advisor, MCH Division, VDH
August 25, 2021



Technology Notes

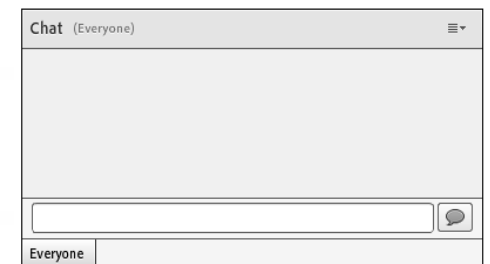
- 1) All participants will be muted upon joining the call.
- 2) If you dialed in or out, **unmute by pressing #6** to ask a question (and press *6 to mute).
If you are having audio difficulties and are using your computer speakers, you may wish to dial in:

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 1st (or 2nd) Day of the 2021-2022 School Year!**
- ❑ Also celebrating **Ella Bruning**, starting catcher for Wylie Little League team from Abilene, Texas (pictured here w/Monae Davis)
- ❑ Reminder – weekly event schedule:
 - ❑ **Summer VCHIP-VDH call calendar** (next slide); Gov. Media Briefings **now Tuesdays only**; VMS calls w/Dr. Levine **select Thursdays only**
- ❑ Situation, VDH, CDC, AAP updates; Tuesday media briefing
- ❑ Practice Issues – **Safe Return to School for Vermont Students**
- ❑ Q & A/Discussion



Courtesy R. Bell



https://www.espn.com/video/clip/_id/32078198

[Please note: the COVID-19 situation continues to evolve – so the information we're providing today may change]

VCHIP-VDH COVID-19 calls: Summer Calendar



- ❑ **August: generally Wednesdays only**
- ❑ **September: likely Mon. & Wed. with exceptions below**
 - ❑ **Next call September 8, 2021**
 - ❑ **No calls on September 1 or September 15**
 - ❑ **September call dates: 9/8 (W), 9/13 (M), 9/20 (M), 9/22 (W), 9/27 (M), 9/29 (W)**
- ❑ Schedule **subject to change** at any time if circumstances warrant!
- ❑ *Please continue to send your feedback re: schedule/topics to vchip.champ@med.uvm.edu*
- ❑ VMS calls with VDH Commissioner Levine now select Thursdays only (see next slide)

VMS Calls with Health Commissioner Levine: Summer Schedule

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

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

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

Join Zoom Meeting -

<https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJlZFQ2R3diSVdqdIJ2ZG4yQT09>

Meeting ID: 867 2625 3105

Password: 540684

Dial In: 1-646-876-9923

Vermont
Medical
Society

VMS Commissioner Call **Summer Schedule**

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

- 6/3
- 6/10
- **6/17 (No Commissioner)** VMS Health Care Laws Webinar from 12-1pm: [Register](#)
- 6/24
- 7/22
- 8/5
- 8/19
- 9/2
- **9/16 Hot topic: EUA for Under 12/Back to School Update**

Zoom link: <https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJlZFQ2R3diSVdqdIJ2ZG4yQT09>

Meeting ID: 867 2625 3105 / **Password:** 540684

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

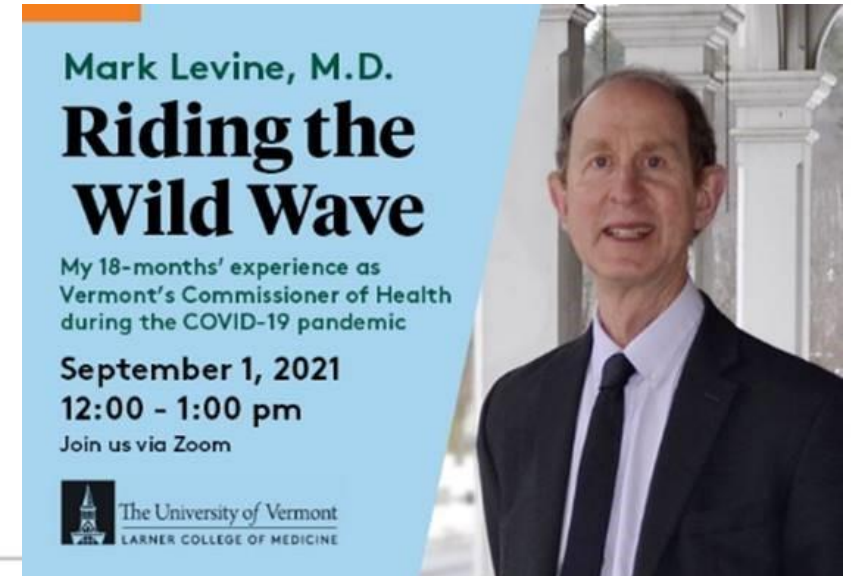
VMS Calls with Health Commissioner Levine: Fall Schedule

- Anticipate these will **generally** occur the ***first Thursday of each month*** – **next call 9/2/21**
- There will be a few exceptions when they will be held the ***third Thursday of the month***.
- VMS will also host a “**COVID Hot Topics**” call the ***third Thursday of the month***
 - **9/16/21: EUA for Under 12/Back to School Update**
- Summary: VMS calls will be held the first and third Thursdays of the month from 12:30 to 1:00 p.m.
- Please stay tuned for further details!

Special Presentation – September 1, 2021

UVM Larner College of Medicine, John Stetson, UVM'56, M.D.'60, and Roberta B. Stetson, UVM'57, present:

- ❑ ***The Annual Stetson Lecture in Technological Advances in Medicine***
- ❑ Mark Levine, M.D., Commissioner of Health, State of Vermont: ***Riding the Wild Wave*** – My 18-months' experience as Vermont's Commissioner of Health during the COVID-19 pandemic
- ❑ September 1, 2021
- ❑ ***Time change: now 1:00 - 2:00 pm***
- ❑ Join us via Zoom
- ❑ <https://uvmcom.zoom.us/j/98260256995>



Situation update

New Cases

120

27,355 Total

Currently Hospitalized

35

Hospitalized In ICU

9

Hospitalized Under Investigation

1

Percent Positive 7-day Avg.

3.2%

People Tested

435,895

Total Tests

1,860,934

Recovered

24,857

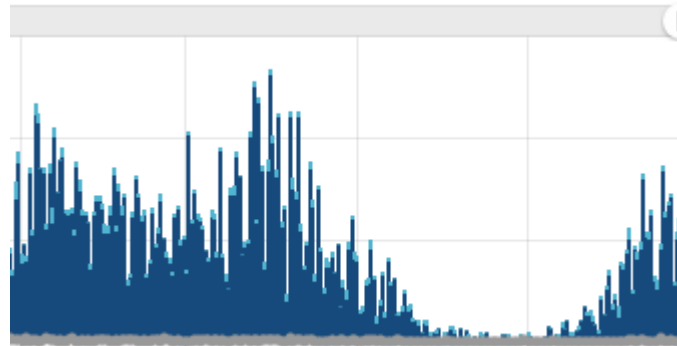
90.9% of Cases

Deaths

271

1% of Cases

Last Updated: 8/25/2021, 11:00:02 AM



VT New Cases, Probables, Deaths

NOTE: VDH Dashboard now (again) 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: VT total cases = 1572 (7 new)

U.S. **38.1 million+** cases; **631,050 deaths**

□ <https://www.nytimes.com/interactive/2021/us/covid-cases.html> (updated 8/25/21)

□ Past week: av. 151,441 cases/day (14d. change **+28%**)

□ **4.45 million+ deaths worldwide**; **213.3 million+ cases** (+2% & +3% 14-day change respectively)

□ **VDH Data Summary** now q.o.week. **Spotlight analyses** only as needed! (**Latest: 8/13/21**)

□ Case rate highest among 20-29 y.o. (628.6/10K)

□ Children (0-19) = 23% of VT COVID-19 cases; of those, 24% are 18-19 y.o. [Total 5,907 posted 8/13/21]

□ **Vaccine breakthrough cases = 630** since Jan. 2021

Find previous summaries at:

<https://www.healthvermont.gov/covid-19/current-activity/weekly-data-summary>

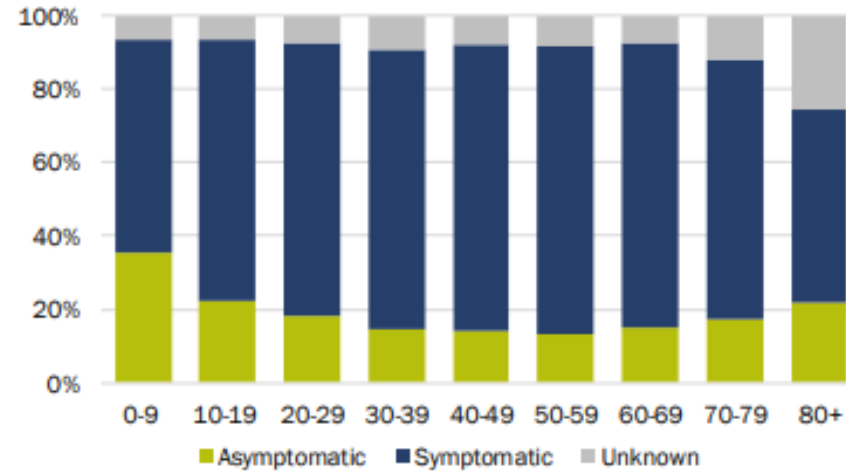
Vermont Children and COVID-19

Sign or Symptom	Percent of Children with Symptom
Runny Nose	56%
Cough	48%
Headache	46%
Fatigue	43%
Sore Throat	39%
Muscle Pain	26%
Loss of Smell/Taste	25%
Fever	20%

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.

The percent of COVID-19 cases with **no symptoms** is higher among children. More than one quarter (27%) of cases among children had **no symptoms** reported.

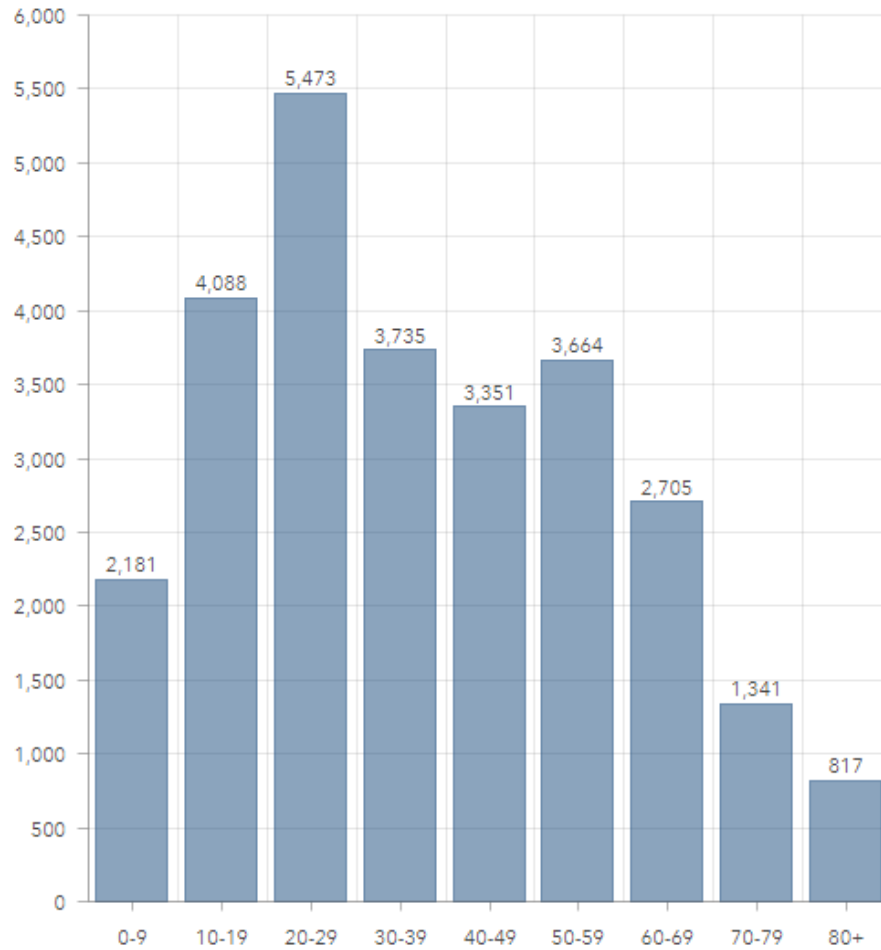


68% of children with COVID-19 had known contact with somebody else who had COVID-19.

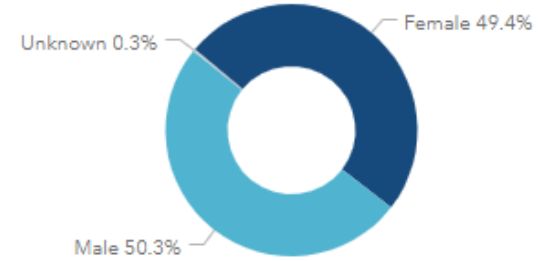
21% of children with COVID-19 were part of an outbreak.

Situation update

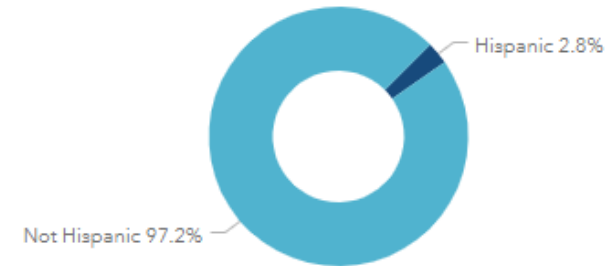
Vermont COVID-19 Cases by Age Group



Vermont COVID-19 Cases by Sex



Vermont COVID-19 Cases by Ethnicity if Known



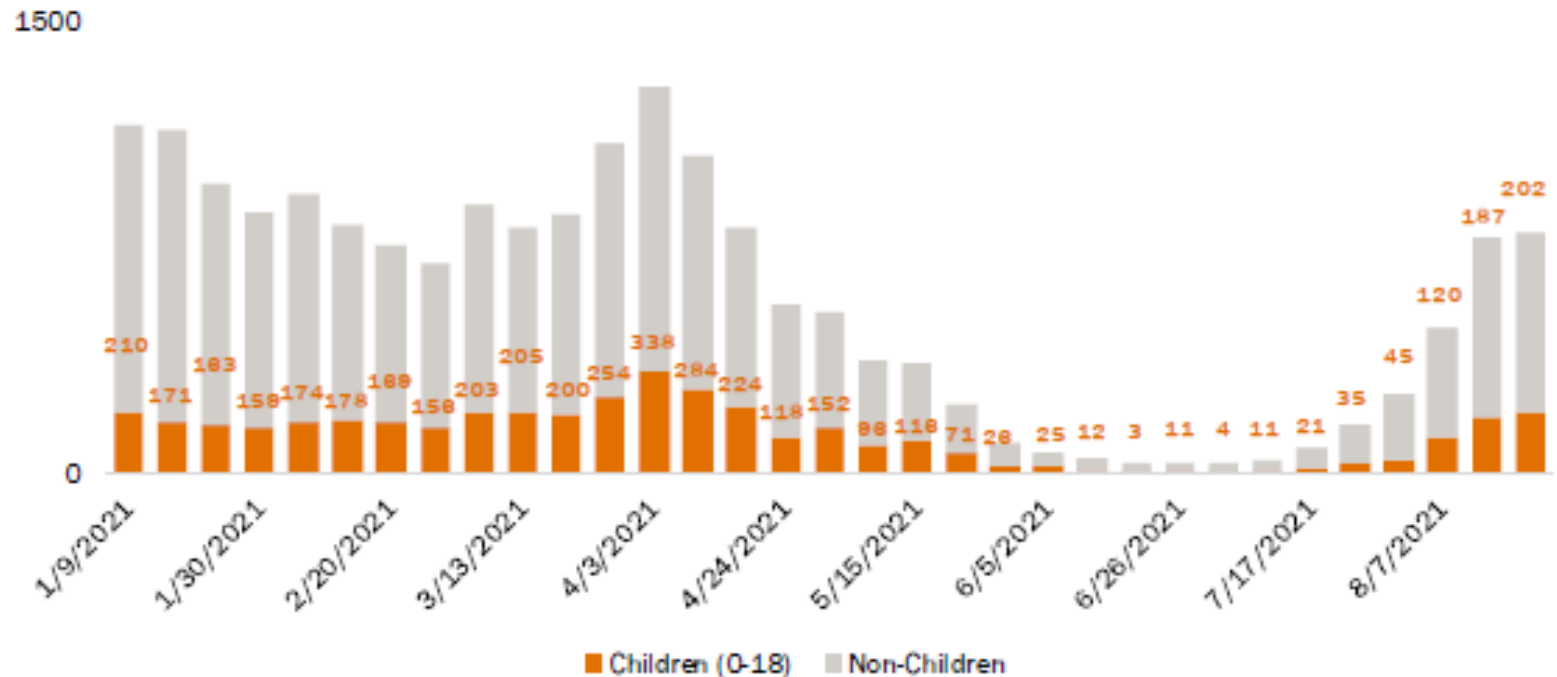
Vermont COVID-19 Cases by Race if Known



Case Demographics

This brief reflects data as of August 21, 2021 at 7 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

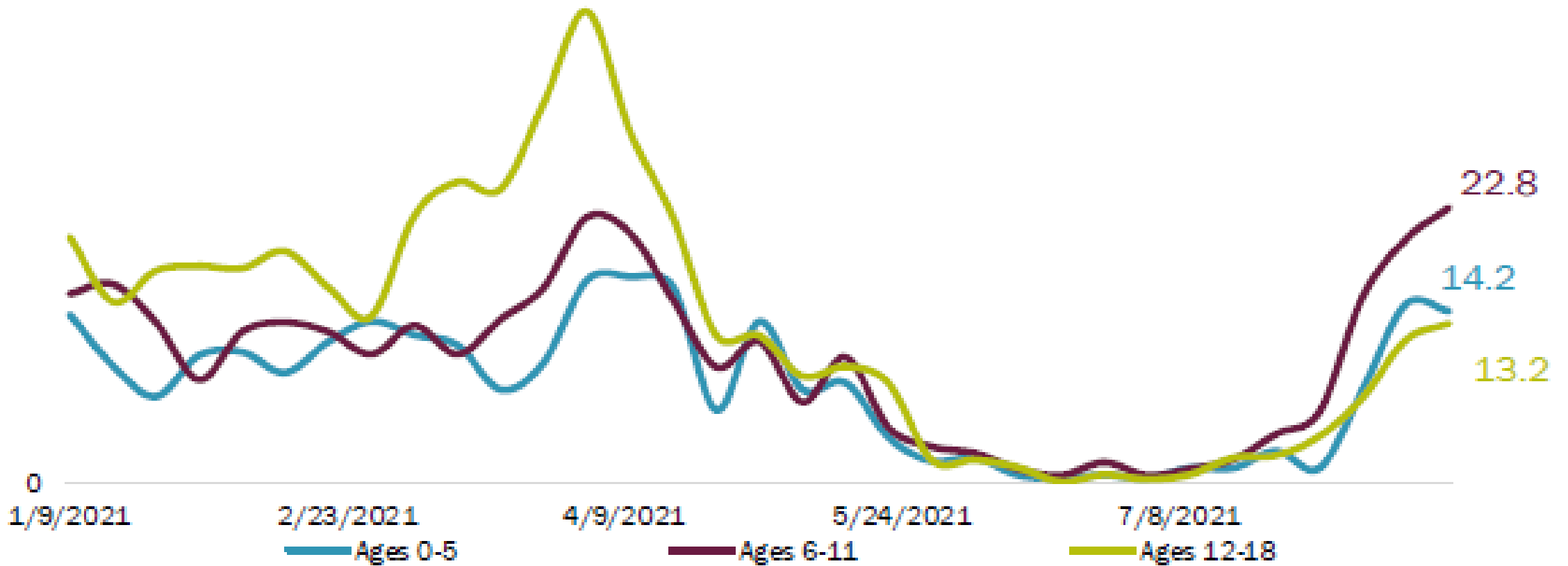


Same report as the School Aged Children report renamed to **COVID-19 Pediatric Cases** to clarify that the age groupings for the summer incorporates all children.

COVID-19 Pediatric Cases

Rates by Week by Age Category

45



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

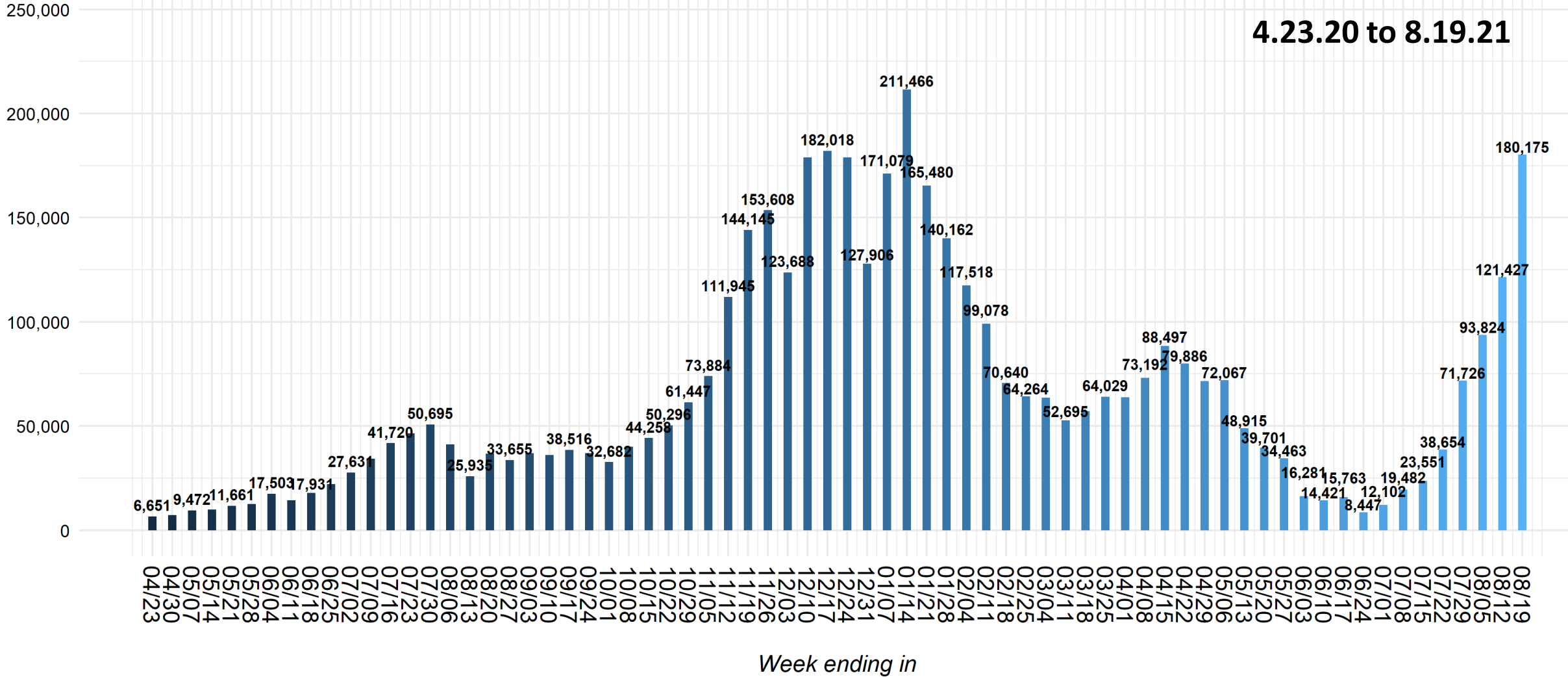
August 25, 2021

12

United States: Number of Child COVID-19 Cases Added in Past Week

4.23.20 to 8.19.21

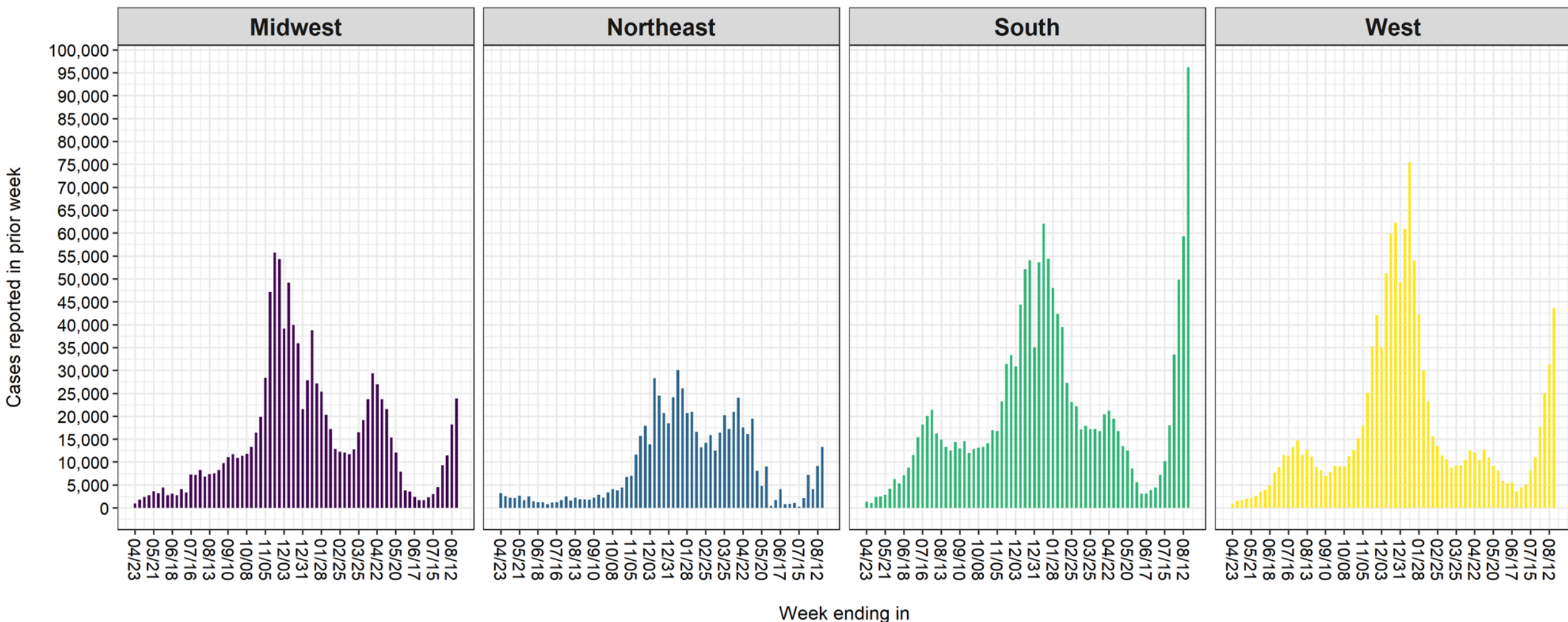
Number of child cases added



Source: AAP analysis of publicly available data from state/local health departments
 Note: 4 states changed definition of child cases: AL as of 8/13, HI as of 8/27, RI as of 9/10, MO as of 10/1
 TX reported age for only a small proportion of total cases each week (eg. 3-20%); as of 7/22/21, TX stopped updating demographic case data
 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
 As of 8/12/21, WV changed definition of child case from 0-19 to 0-20 years; the cumulative results in this 8/19 report represent the 0-20 age category

4.23.20 to 8.19.21

Child COVID-19 cases reported in the prior week, by region



Source: AAP analysis of publicly available data from state/local health departments
Note: Analysis excludes data from AL and MO due to change in definition of 'child' case
TX reported age for only a small proportion of total cases each week (eg, 3-20%); as of 7/22/21, TX stopped updating demographic case data
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 calculations required to obtain MA child cases, weekly estimates fluctuate
As of 8/12/21, WV changed definition of child cases from 0-19 to 0-20 years; the cumulative results in this 8/19 report represent the 0-20 age category

VDH COVID-19 Vaccine Registration & Sites

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

ELIGIBILITY

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

GET YOUR FREE VACCINE WITHOUT AN APPOINTMENT!

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

APPOINTMENTS ARE ALSO AVAILABLE

- > Make an appointment for a free vaccine



Home Pharmacy + Savings + Shop + About Us +

COVID-19 Vaccination Scheduling at Kinney Drugs in

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

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



Search

Pharmacy MinuteClinic® HealthHUB Shop ExtraCare® Contact Lenses Photo

Home > Pharmacy > COVID-19 Vaccine

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

We're administering the vaccine by appointment only based on local eligibility guidelines.

No cost with insurance or through federal program for the uninsured.



Menu

Search by keyword or item #



Schedule your COVID-19 vaccination today.



Limited supplies of COVID-19 vaccines are now available in some states at select stores to individuals 16 years of age and older (16 years of age and older for Pfizer; 18 years of age and older for Moderna) who meet state-specific eligibility criteria.

See if you're eligible in your state >

15



VDH COVID-19 Vaccine Dashboard (Summary Page: 8/25/21)

- 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).

Vermont Vaccination Data

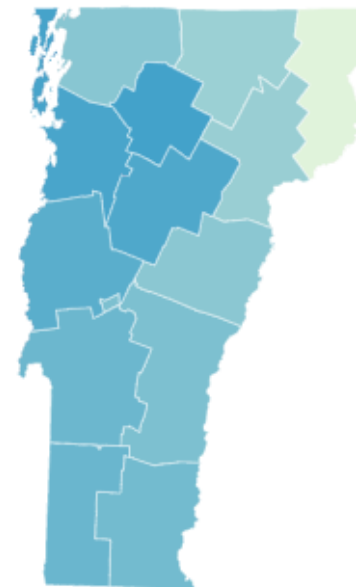
Blue headers indicate CDC data
Gray headers indicate Vermont data

Vaccination by County Age 12+

The percent of the county population age 12+ that has received at least one dose of the vaccine

Show Rates By: Overall Race/Ethnicity Ethnicity

County	Overall progress
Addison	83.9%
Bennington	81.0%
Caledonia	72.6%
Chittenden	86.9%
Essex	60.0%
Franklin	75.6%
Grand Isle	87.5%
Lamoille	88.0%
Orange	75.2%
Orleans	72.2%
Rutland	80.6%
Washington	85.8%
Windham	79.4%
Windsor	77.6%



60.0% 88.0%

See data notes for more information about COVID-19 immunizations provided in New Hampshire.

August 25, 2021

Summary

By Age, Sex, Race, Ethnicity

Vermont Forward

85.7%

of Vermonters 12+ have started vaccination

Source: CDC

472.0K

Vermonters 12+ have received at least one dose

Vaccine Distribution

Doses Received

969.4K

Doses Administered

872.3K

Total People Vaccinated

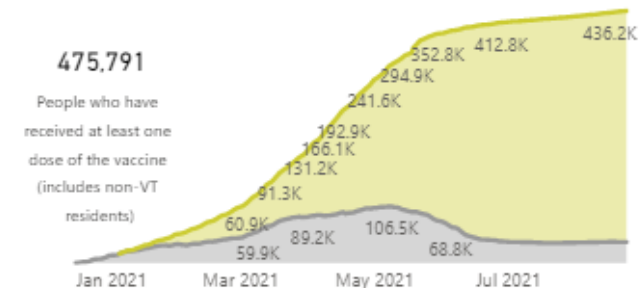
Total People Started

39.6K

Total People Completed

436.2K

Started Completed



Updated 8/25/2021 8:44:31 AM

VDH COVID-19 Vaccine Dashboard (Age/Sex/Race/Ethnicity)

- 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):
 - ▣ 12-15 = 69.6% (68.2% on 8/18/21)
 - ▣ 16-17 = 75.0% (74.2% on 8/18/21)
 - ▣ 18-29 = 59.9% (59.4% on 8/18/21)
 - ▣ VT Age 12+ = 81.4% (80.9% on 8/18)

Vermont Vaccination Data

By Age - Statewide

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

Age	%*
12 - 15	69.6%
16 - 17	75.0%
18 - 29	59.9%
30 - 39	81.0%
40 - 49	80.9%
50 - 59	84.0%
60 - 64	90.1%
65 - 69	96.0%
70 - 74	99.9%
75+	96.5%
VT Age 12+	81.4%

Statewide numbers and percentages are capped at 100%. County numbers and percentages are capped at 95%. Values above 95% are suppressed to protect personal health information. See notes below for more information.

Select County

All

By Race - Statewide

The percent of the statewide population age 12+ of each race that has received at least one dose of the vaccine

Race	%*
Asian	73.4%
Black or African American	71.3%
Native American, Indigenous, or First Nation	29.8%
Pacific Islander	24.6%
Two or more races	66.3%
White	79.1%
VT Age 12+	78.5%

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

By Ethnicity - Statewide

The percent of the statewide population age 12+ of each ethnicity that has received at least one dose of the vaccine

Ethnicity	%*
Hispanic	92.8%
Not Hispanic	76.3%
VT Age 12+	76.6%

Ethnicity information is not reported for 6% of people vaccinated.

By Race/Ethnicity and Age - Statewide

The percent of the statewide population age 12+ of each race/ethnicity that has received at least one dose of the vaccine

Race*	12-30	31-64	65+	Age 12+
BIPOC	65.1%	79.2%	88.0%	73.8%
Non-Hispanic White	58.6%	77.6%	94.2%	76.5%
Vermont	59.4%	77.7%	94.0%	76.4%

Race/ethnicity information is not reported for 6% of people vaccinated.

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

By Sex - Statewide

The percent of the statewide population age 12+ of each sex that has received at least one dose of the vaccine

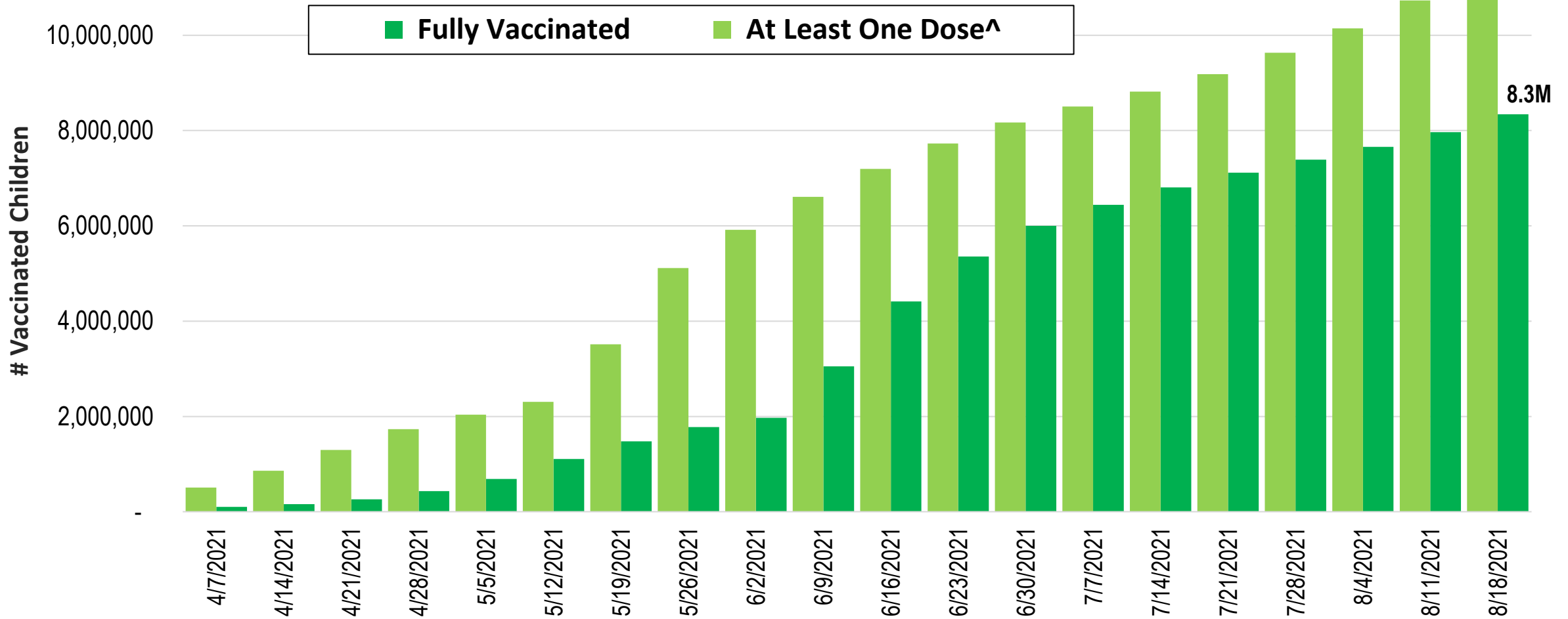
Sex	%*
Female	83.6%
Male	79.0%
VT Age 12+	81.3%

Sex information is not reported for 512 people vaccinated.

Updated 8/25/2021 8:44:31 AM

Cumulative Number of US COVID-19 Vaccine Recipients Under Age 18

4.07.21 to 8.18.21

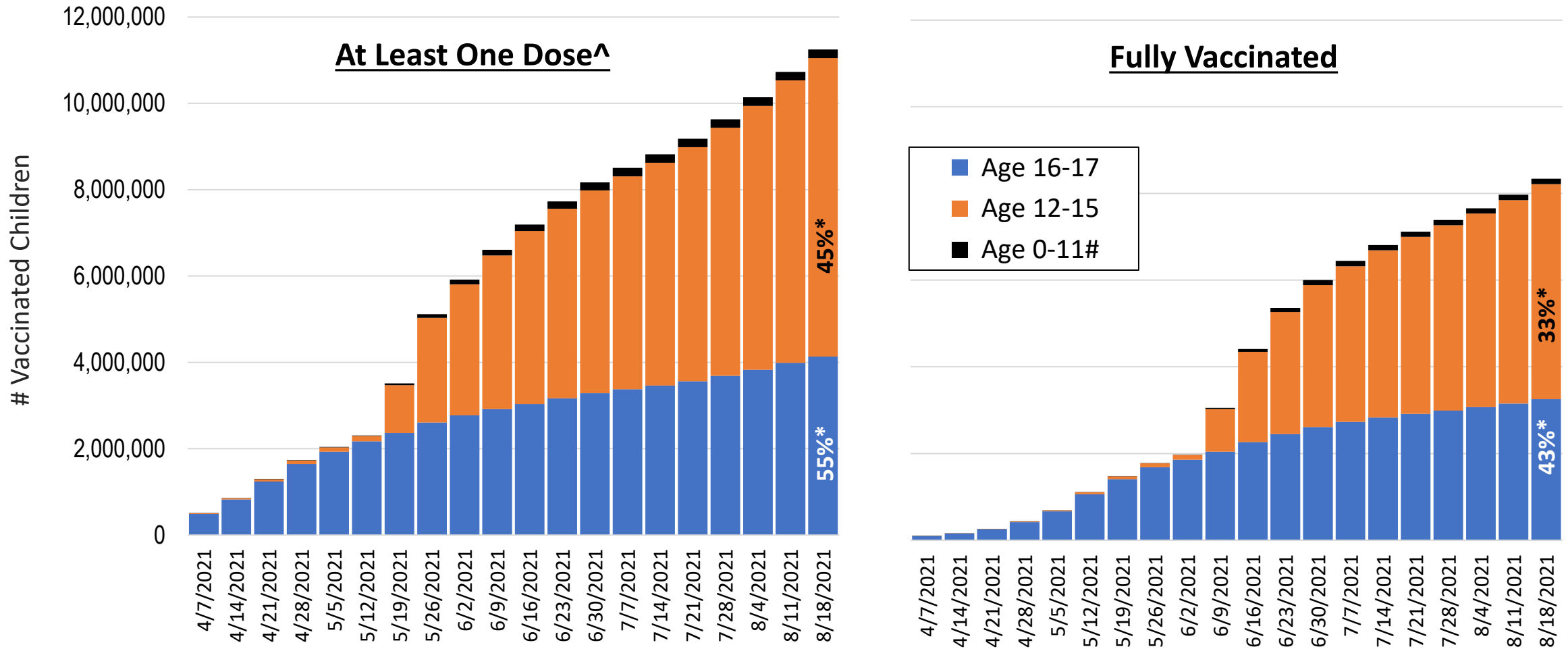


^Includes those having received only 1 of 2 doses and those fully-vaccinated.

Source: AAP analysis of data series published by the CDC titled "Demographic Trends of People Receiving COVID-19 Vaccinations in the United States."

Cumulative Number of US COVID-19 Vaccine Recipients Under Age 18 by Age Group

4.07.21 to 8.18.21



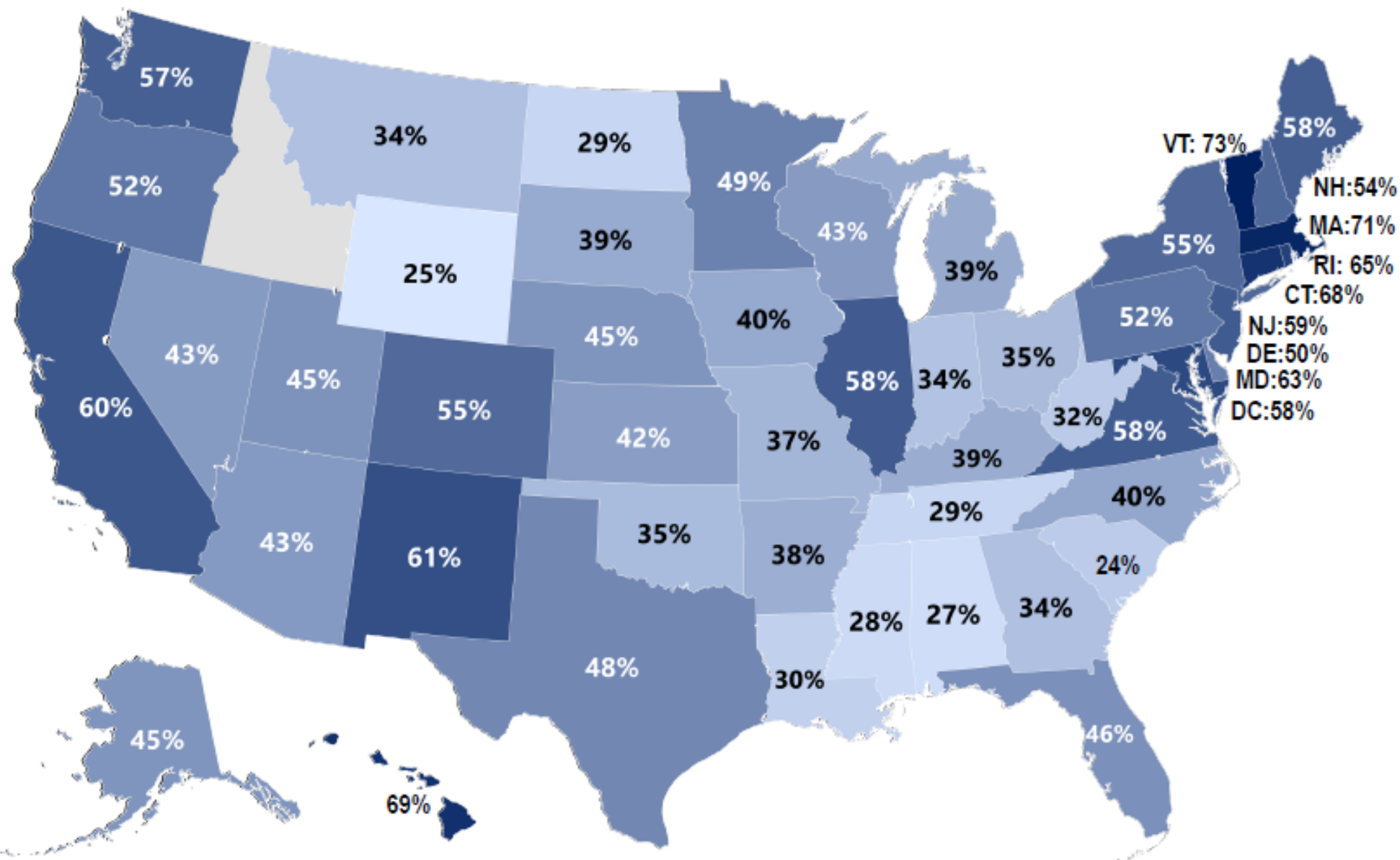
[^]Includes those having received only 1 of 2 doses and those fully-vaccinated. Vaccinated children as percentage of all children within age group. # According to the CDC Coronavirus Disease Response Team, children under age 12 may be included as vaccinated due to (1) birthdate entered incorrectly, or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

Source: AAP analysis of data series published by the CDC titled "Demographic Trends of People Receiving COVID-19 Vaccinations in the United States."

Received At Least 1 Dose  25% 73%

as of 8.18.21

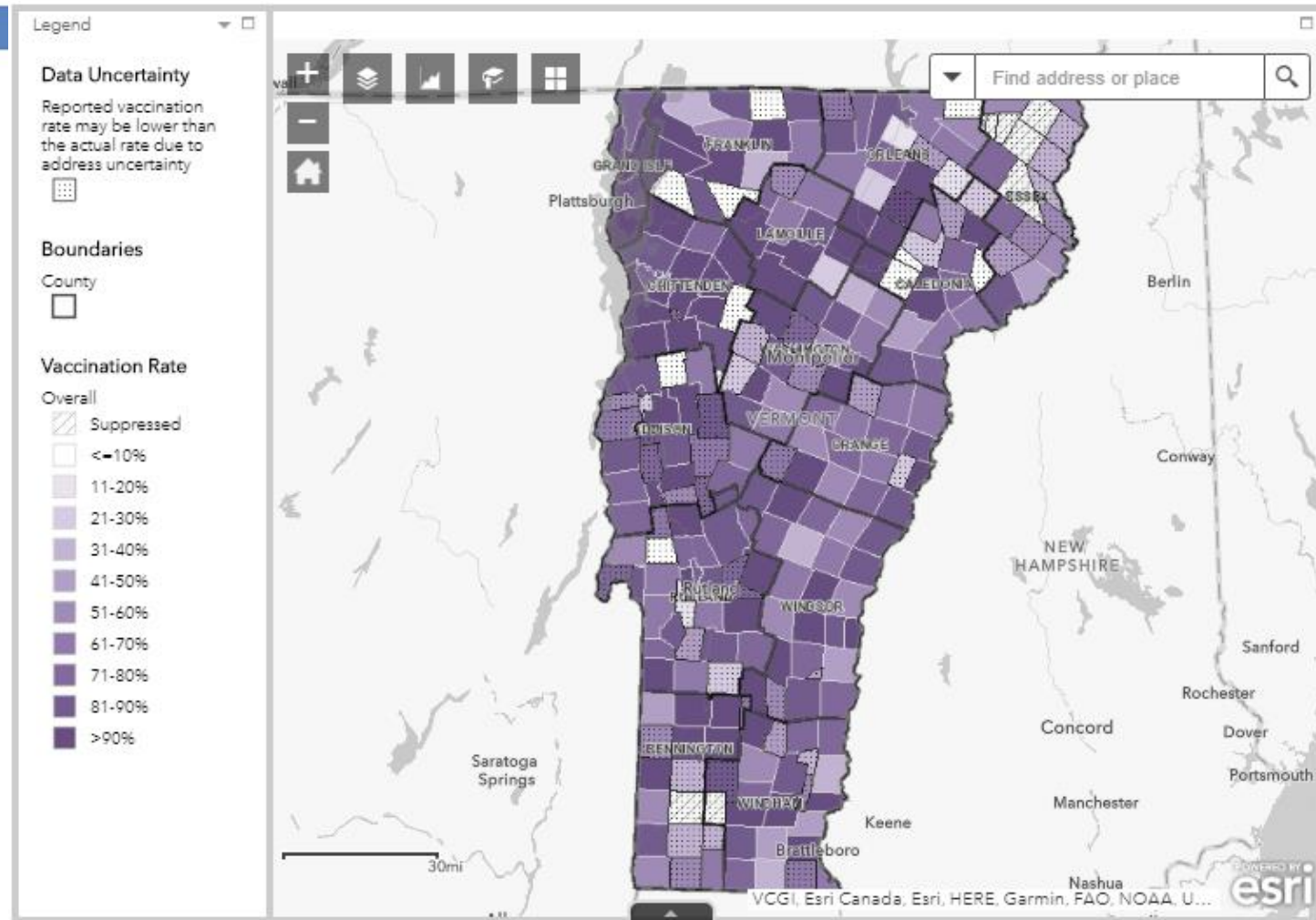
Proportion of US Children Ages 12 through 17 Who Received At Least One Dose of the COVID-19 Vaccine by State of Residence



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-Jurisdi/uns-k-b7fc>). Idaho information not available. Check state's web sites for additional or more recent information

Map of COVID-19 Vaccine Rates by (VT) Town

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



<https://www.healthvermont.gov/covid-19/vaccine/map-vaccine-rates-town>

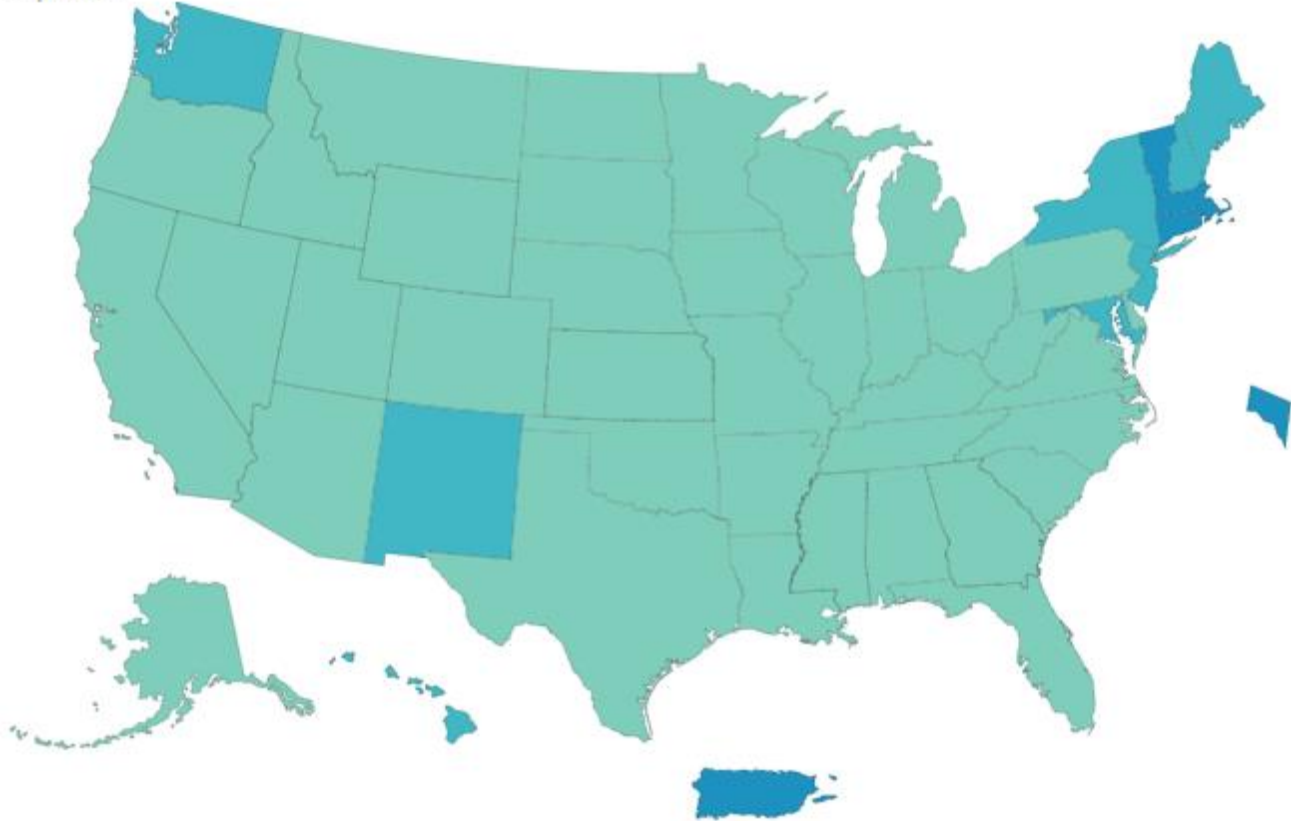
August 25, 2021

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From the CDC Vaccine Tracker

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

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

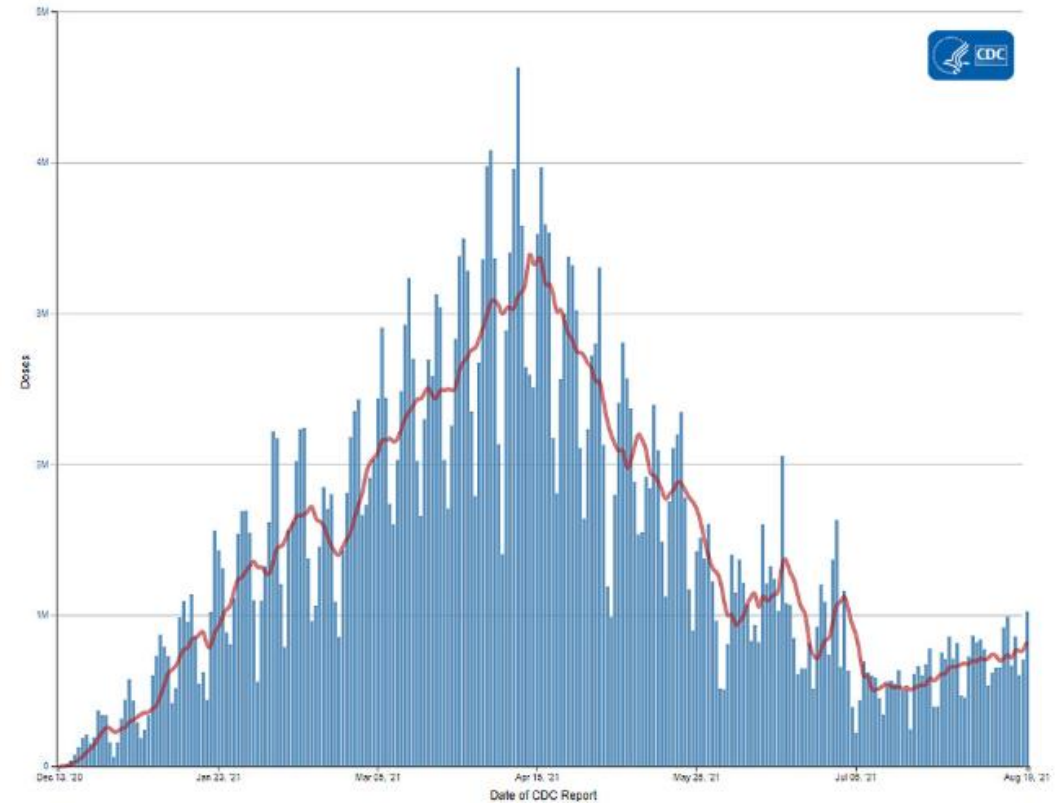


Total Doses Administered per 100,000

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

Note: new KEY for doses/100K

7-Day moving average



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

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

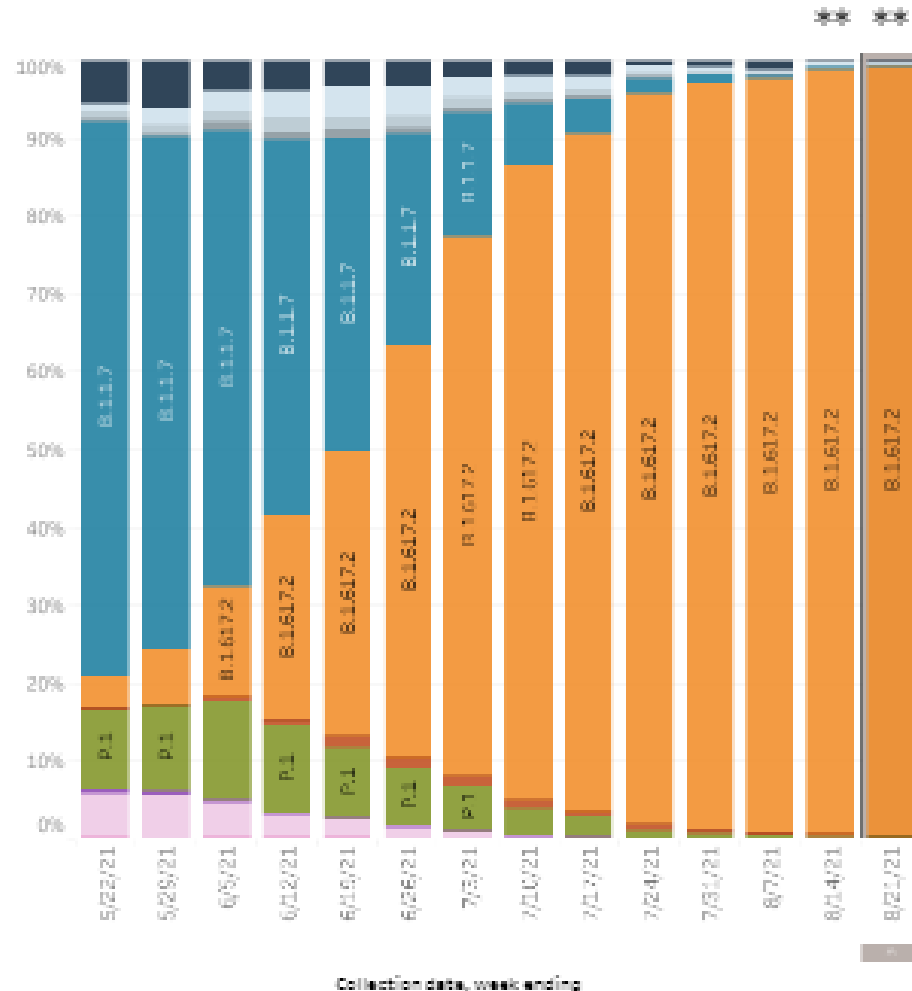
August 25, 2021

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

United States: 5/16/2021 - 8/21/2021

United States: 8/15/2021 - 8/21/2021 NOWCAST

Note striking preponderance of Delta variant (orange) in far right column, two weeks ending 8/21/21.

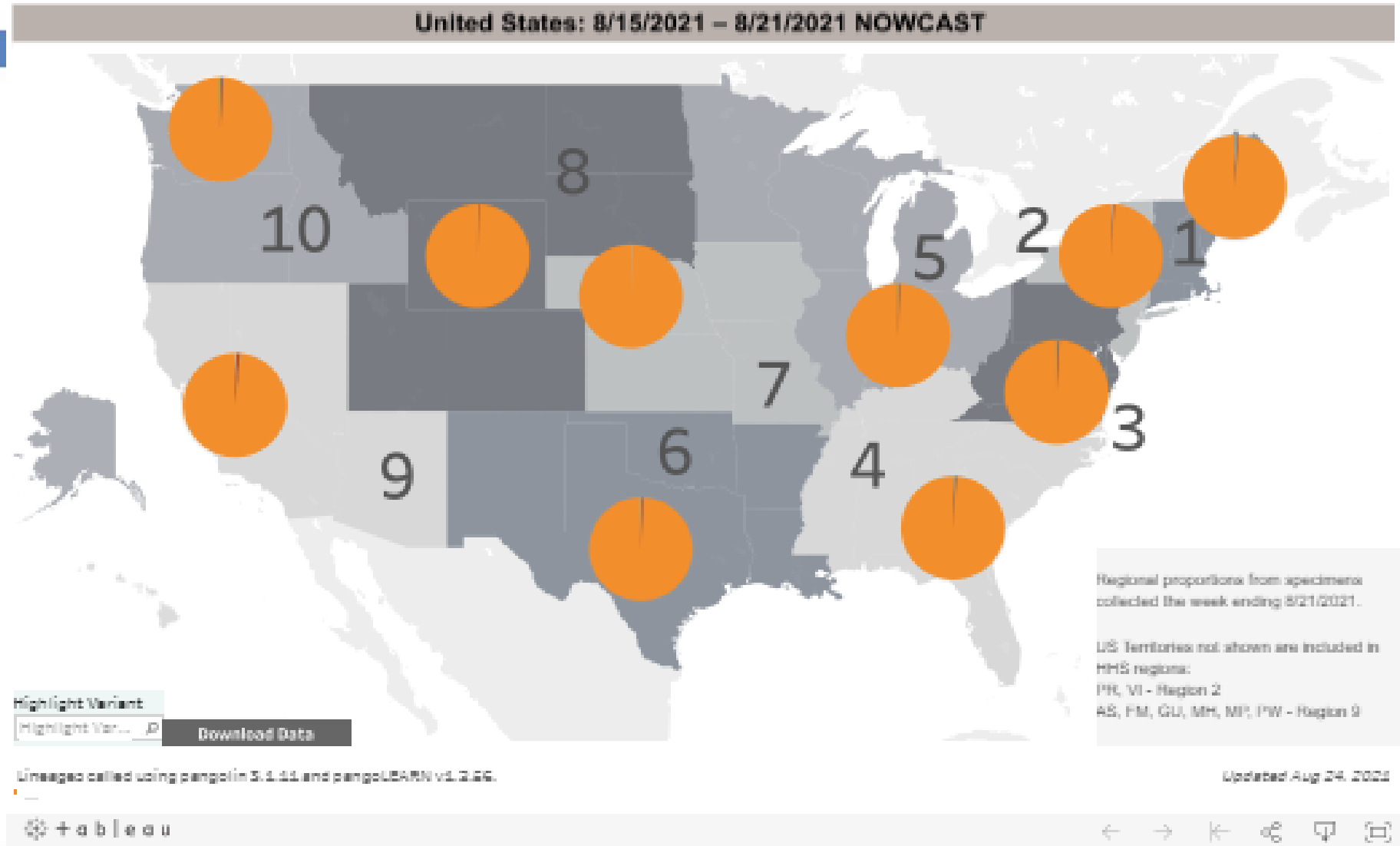


** **

USA				
WHO label	Lineage #	Type	%Total	95%PI
Alpha	B.1.1.7	VOC	0.2%	0.0-0.7%
Beta	B.1.351	VOC	0.0%	0.0-0.2%
Gamma	P.1	VOC	0.1%	0.0-0.5%
Delta	B.1.617.2	VOC	98.8%	97.6-99.8%
	AY.2	VOC	0.2%	0.0-0.7%
	AY.1	VOC	0.1%	0.0-0.5%
Eta	B.1.525	VUI	0.0%	0.0-0.2%
Iota	B.1.526	VUI	0.0%	0.0-0.2%
N/A	B.1.621		0.3%	0.0-0.7%
	B.1.621.1		0.1%	0.0-0.5%
	B.1.628		0.1%	0.0-0.5%
Other	Other ^a		0.1%	0.0-0.5%

^a Enumerated lineages are VOC/VUI or are circulating >1% in at least one HHS region during at least one two-week period; remaining lineages are aggregated as "Other".
^b These data include Nowcast estimates, which are modeled projections that may differ from weighted estimates generated at later dates.
^c Sublineages of P.1 and B.1.351 are aggregated with the parent lineage and included in parent lineage's proportion. AY.3-AY.12 are aggregated with B.1.617.2

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



Again note striking preponderance of Delta variant (orange) across all HHS Regions (two weeks ending 8/21/21).

SARS Co-V-2 Variants in Vermont

- VDH detects variants of concern through genetic sequencing of certain viral specimens; only a small percentage of samples are sequenced.
- Table: **cumulative #** variants identified & co. of residence (NOT actual # variants circulating).
- Note (8/25/21): “***At this time, all genetically sequenced specimens are the Delta variant. For this reason, we have suspended the variant table.***”
- <https://www.healthvermont.gov/covid-19/current-activity/covid-19-communities>

Specimens Collected from July 7 to July 29

COUNTY	B.1.1.7 (ALPHA)	P.1 (GAMMA)	B.1.351 (BETA)	B.1.617.2 (DELTA)
Addison	0	0	0	12
Bennington	0	0	0	1
Caledonia	0	0	0	3
Chittenden	1	0	0	56
Essex	0	0	0	5
Franklin	0	0	0	4
Grand Isle	0	0	0	1
Lamoille	0	0	0	1
Orange	0	0	0	5
Orleans	0	0	0	14
Rutland	2	0	0	12
Washington	0	0	0	24
Windham	0	0	0	10
Windsor	0	0	0	1

Vaccine News

- FDA grants full approval to Pfizer for COVID-19 vaccine mRNA for 16+ yo
 - ▣ <https://www.fda.gov/media/151710/download>
- Johnson & Johnson reports booster dramatically raises levels of Ab against SARS-CoV-2 (8/25/21 – Medrxiv manuscript pending).
 - ▣ J & J aspires to be part of initial distribution of boosters (as early as Sept.)
- Boosters (Pfizer & Moderna) to be made available beginning on Sept. 20 to people 8 months past 2nd dose.
 - ▣ WHO Director General Tedros Adhanom Ghebreyesus called on countries to delay giving boosters until nations with low vaccination rates can inoculate more of their population (8/23/21). Concern re: possible increase in variants of concern globally.
<https://www.npr.org/2021/08/23/1030248514/who-calls-for-a-delay-in-booster-shots-to-prioritize-under-vaccinated-countries>

Vermont Pediatricians in the News

- Meghan Gunn, et al (Ghazali, Pierce, Orton, Swann, Lozier, Bromirski, Mann, Rice): “**Masking is Imperative**” (Rutland Herald, 8/24/21)



- VT Digger: “**Franklin County parents shout down pediatrician at school board meeting over mask policy**” (thank you, Tracy Tyson & Becca Bell)

- “**Where’s the data on Delta?**” (Drs. Ben Lee and Bill Raszka, NBC News) <https://www.nbcnews.com/science/science-news/delta-variant-response-hindered-covid-test-limitations-lack-data-rcna1692>



- “**Vermont officials detail basic model for returning to school.**” (Dr. Leah Costello; WCAX) <https://www.wcax.com/2021/08/17/vermont-officials-detail-basic-model-returning-school/>

VDH Immunization Program Update

COVID Vaccine Plan for 2 – 11 year olds (***thank you, Merideth Plumptre***, Nurse Program Coordinator)

- Expect approval anytime from fall to early winter
 - ▣ State plan includes clinics in various settings, including primary care involvement
 - ▣ Provider survey
 - ▣ Start speaking with patients and families now
- VDH now interviewing for Immunization Program Manager
- ***Coming soon*** (from the CDC): NIS-Teen Data 2020

From the AAP

2021 AAP NATIONAL ELECTION OPENS TODAY, August 25!

- ❑ **WHAT:** Elect the future leaders of your AAP.
- ❑ **WHY:** Exercise your right to vote as a member and to influence the future direction of your AAP.
- ❑ **WHEN:** August 25 – September 8, 2021. The elected leaders will take office on January 1, 2022.
- ❑ **WHERE:** <https://www.aap.org/elections> or candidate biographies.
- ❑ **WHO:** Sandy L. Chung, MD FAAP & Joseph L. Wright, MD FAAP
- ❑ **ALSO: DISTRICT I ELECTIONS**
District Vice-Chairperson (Pat Flanagan, MD FAAP) & District National Nominating Committee representative: ***Rebecca Bell, MD FAAP***



AAP Election (cont'd.)

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®



2021 AAP NATIONAL ELECTION IS NOW OPEN!

Elect the future leaders of your AAP by visiting <https://www.aap.org/vote>. Elections will conclude on Wednesday, September 8, 2021.

To see more about the candidates and videos from your President-elect candidates go to aap.org/elections.

Any questions about this service may be directed to the Elections Team at nationalelections@aap.org.

After you submit your ballot you will receive an email confirmation that it has been received and recorded.

Thank you in advance for your participation!

AAP Updates

Note: slides 32-34 (next 3 slides) are courtesy of the **American Academy of Pediatrics**. They were presented during today's AAP *Chapter Chat* & were added to **this** presentation following today's VCHIP-VDH call.

American Academy of Pediatrics

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COVID-19 Vaccine Updates

FDA approval of Pfizer-BioNTech COVID-19 vaccine for 16 years and older on Monday, 8/23/21. Brand Name: "**Comirnaty**"

- Vaccine continues to be available for 12-15 year olds under EUA
- AAP statement cautioning against off-label use in patients < 12 years of age
- Off-label use violates CDC COVID-19 Vaccine Program Provider Agreement and could expose providers to the following risks:
 - May not be covered under the PREP Act – immunity from claims
 - Administration fees may not be reimbursable by payers
 - Individuals who receive an off-label dose may not be eligible for compensation after possible adverse event



COVID-19 Vaccine Updates

Pfizer-BioNTech Vaccine Expiration Extension

- Has approved an extension of expiration date from 6 to **9 months**.
 - Cartons/vials with expiration date of August 2021 – February 2022 can be used for 3 months beyond printed date if "ultra cold" authorized storage conditions have been maintained. (Does not apply to vaccines that expire before August 2021.)
 - "Authorized storage conditions" have been broadened to between -90°C to -60°C (-130°F to -76°F).



Next COVID-19 Town Hall

- **Thursday, September 2, 2021 at 8 pm Eastern**
- **Topic TBD**
- 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/>



Tuesday Media Briefing (8/24/21)



Governor Phil Scott

- White House call: progress on vaccine approval Fauci clinic trials 11 under going well; pf enough data early – mid Sept.
 - ▣ Logistics: will be dedicated supply since dose for younger kids lower.
 - ▣ FDA full approval of Pfizer vaccine for 16+ y.o. *“If you’ve been on the fence, hope this will inspire you to get vaccinated.”*
- Modeling: cases have increased but rate continues to slow – we believe means we’ll begin to see same decrease as other countries soon.
- Gap between cases in vaccinated vs. unvaccinated continues to widen.
 - ▣ Can’t just compare total # - must look at rates. Vaccinated cases are just a very small percentage of new cases.

Tuesday Media Briefing (cont'd.)



Governor Phil Scott

Recommendations for Safe Return to School:

- *“We believe & strongly recommend that masks be required for all students of all ages at the start of the year.”*
- For under 12, mandate masks until approved to receive/fully vax.
- Without state of emergency, state cannot require this unilaterally – which is why weeks ago we issued recommendations to Districts to give them time to implement at local level.
- *“When vaccines approved for <12 yo, I’m confident we can continue to show the nation how it’s done, lead on vax rates, & reduce remaining mitigation measures.”*

Tuesday Media Briefing (cont'd.)



Modeling – Commissioner Pieciak:

- Natl: case growth has risen again but rate of growth slowed. CDC **ensemble model** anticipates cases will start to decrease (natl. rate last wk. 19% & 14% this week). MO, AR, LA – seeing cases plateau – LA & MO coming down.
- Closer to home New England – regional cases up but rate of ~4K is slowest rate over past 6-7 wks. Growth rate 19% last wk. & 9% this wk.
- VT wk./wk. ~40 (758 last to 790 cases this wk.); trend growth rate: incr more quickly, then level, then down. Next wk., look closely as cases may start to decline.
- Reproduction rate: was increasing early on in this wave, but now (for 1 person infected) getting down close to only 1. VT forecast expect cases should start to fall.
- Granular data: case rates continue to be significantly different for vax vs. unvax. 28% rate of increase for unvax vs. 18% rate for fully vax.

Tuesday Media Briefing (cont'd.)



Modeling – Commissioner Pieciak:

- ❑ Breakthrough cases: how infrequent for fully vax to be hospitalized/die. VT lower rate cases/hosps/fatalities than even other high vax states.
- ❑ No pediatric hospitalizations presently. VT hosp. rate cont. to be lowest in US.
- ❑ **Higher education restart:**
 - 1st snapshot level of vax on campus: 13/16 reporting. Encouraging picture: of 24,500 enrolled, ~90% fully vax; 5.8% not vax (betw shots, foreign students, providing info to school; unknown 3%. ~350 granted exemptions 1.4%. Will update weekly.
- ❑ LTCFs: 4 outbreaks/62 cases.
- ❑ Vaccine scoreboard: VT = #1 across the board.
 - Hawaii & VT have almost identical rates w/1st dose; then deviation w/rates for fully vax. Plays out in HI case rates, which are ~2 ½ X greater than VT.

Tuesday Media Briefing (cont'd.)



AHS Secretary Mike Smith

- Vaccine boosters – 1st phase is for those w/certain immunocompromising conditions. Will require self-attestation.
- 2nd phase: general population. Will start w/HCWs & LTCFs. Will leverage multiple sites. Boosters for Pfizer & Moderna: feds gathering more data on J & J in coming wks.
- If vax approved for 2-11 yo, may use some of same infrastructure: e.g., school-based clinics & PCPs.
- 36 popup & school-based clinics this week.
- Coming soon: Champlain Valley Fair as vaccine site.

Tuesday Media Briefing (cont'd.)



AOE Deputy Secretary Heather Bouchey

- Many VT schools back-to-school this week: here are reminders of state's recommendations for public health & safety measures.
- Urging all eligible VT residents who are able to get vaccinated.
- Districts require students/staff to stay home if sick, use same resources to evaluate health & wellness, seek testing.
- Facial coverings: recommend that schools require everyone to wear masks X 1st instructional days. If reach >80% elig. pop. vaccinated, may lift for both eligible students/staff. If <80%, continue for all. Students 11 & under should continue to wear while in school. Should not have to wear outdoors. Our recommendation is advisory – but **duty of care** confers responsibility to take action to assure student health & safety. Will continue to assess & provide updates as need arises.

Tuesday Media Briefing (cont'd.)



AOE Deputy Secretary Heather Bouchey

- State of VT offering surveillance testing – school districts currently enrolling.
 - ▣ Several starting this week & next; remainder next few weeks. Recommend test often.
- Contact tracing: see guidance.
- Memo: under VT law, districts have authority to adopt **local policies** to keep student safe (incl. from COVID-19).
 - ▣ Details may vary by district; some may delegate principals, school nurses, COVID coordinators – *“OK that not all the same.”* What’s important is locals stepping up to exercise authority. We’ve been hearing about a few contentious conversations re: masking & COVID-19 mitigation measures. Not unexpected – we urge such conversations to remain civil, measured, respectful. You can disagree w/decisions but not OK to threaten or disrupt.
- Truly great to be able to start in person w/streamlined measures – we don’t take for granted.

Tuesday Media Briefing



VDH State Epidemiologist Patsy Kelso

- VDH contact tracing: schools will conduct when students/staff in school or at event while infectious. Will learn when family notifies or VDH identifies through out our contact tracing. When schools aware, 1st verify if at school while infectious. Identify close contacts in school setting, review decision. w/VDH. ***Do not need to quarantine if fully vax.***
- Schools notify w/quarantine letter & give test guidance as needed; then loop back to VDH.
- Schools know families best & families more likely to answer call from school
- Mitigation: stay home if sick, get vax, test even if sxs c/w cold & even if vax; if in HH w/younger kids/immunocomp., consider mask when indoors in public.
- For children/parents: better chance of group activities if vaccinated!

Tuesday Media Briefing (cont'd.)



VDH Commissioner Levine

- Delta variant continues to drive U.S. COVID activity, incl. here in VT; >434K VTers highly protected against serious outcomes.
- Already seen data showing safety/effectiveness of all 3 vaccines. Pfizer reached impt. milestone 8/23/21 w/full approval FDA for 16+ yo. Continues to be available under EUA for 12-15 & 3rd dose for certain immunocompromising conditions. May help employers require vaccine for employees.
- Modeling data: biggest difference is our rate of those fully vaccinated; much more protective for our population. Please get 2nd dose if still due.
- Israeli data: 3rd dose confers 4X protection as dose #2; 5-6X higher against serious illness & hosp. Israel just reduced booster to age 40 if 2nd dose >5 mos. ago.

Tuesday Media Briefing (cont'd.)



VDH Commissioner Levine

- ❑ VT rates of those vaccinated who are eligible high enough to help reduce spread. We will likely see cases in schools this fall – just as now.
- ❑ Students/teachers who go to school every day represent the communities they come from & level of transmission. If Delta variant trends hold, surge may last weeks & not months. We all believe important for kids to have/enjoy as normal experiences as possible in school. Schools & staff have been amazing partners in keeping communities safe.
- ❑ We can all do our part: test if sxs, mask indoors if not fully vax; if fully vax, consider mask indoors if weak immune systems or have children unable to be vaccinated, travel to places w/higher transmission/lower vax rates.

Practice Issues

Safe Return to School for Vermont Students



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

VT AOE Update: School Surveillance Testing

Important Change to Surveillance Testing Procedure for Young Students

- ❑ SEE updated AOE COVID-19 Surveillance Testing Webpage (2021-22):
 - ❑ Program overview, participation info, **enrollment & FAQ for students/families/staff**.
 - ❑ <https://education.vermont.gov/news/covid-19-guidance-vermont-schools/school-staff-covid19-surveillance-testing/school-staff-resources>
 - ❑ For districts & independent schools who wish to participate: Intent to Participate form.
- ❑ **Change to testing requirements:**
 - ❑ **Self-administered tests now allowable for all students 5 yo & up** (previous collection for ages 5-7 yo required medical professional).
 - ❑ No change to all other testing eligibility: open to all students & staff ages five and up, regardless of vaccination status.
- ❑ Program question – email testing team at: aoe.covid19testing@vermont.gov

VT AOE Updates (cont'd.)

- ❑ Vermont Agency of Education (AOE) memo entitled “School District Authority to Require Masks” <https://education.vermont.gov/document/School-District-Authority-to-Require-Masks>
- ❑ Vermont AOE memo entitled “COVID-19 Contact Tracing for Fall 2021” <https://education.vermont.gov/memo/covid-19-contact-tracing-for-fall-2021>
- ❑ Vermont AOE memo to supts. & indep. schools: resources for vax promotion <https://mailchi.mp/vermont/resources-to-promote-student-vaccination?e=8520ec9068>
- ❑ VT DCF COVID-19 Advisory Memo Child Care & Out-of-School-Time (see VCHIP-CHAMP COVID-19 email 8/19/21)
- ❑ CDC grant in partnership w/AHS, VCH, AOE offering portable HEPA air purifiers for classrooms & other school spaces to SU/SDs & indep. schools.
 - ❑ These HEPA purifiers are one measure recommended by CDC to improve air quality & mitigate spread of COVID-19, esp. in spaces without adequate ventilation

Vermont AOE Updates (cont'd.)

- ❑ **Clinical question:** *Has there been any discussion about writing letters to allow for remote learning to patients with underlying conditions? I have a patient with a syndrome whose mother wishes to pursue this, but our district isn't offering remote this year.*
- ❑ VDH/MCH received the following guidance from VT AOE: *“There is allowance for remote schooling for individual students this year based on need, but it is up to the school to provision, plan, and implement. The family should connect with school leadership to discuss.”* Note: it may be that district/school would request a medical note as part of this process.
- ❑ Reminder: the special education (right to fair and equitable education) route with an IEP if you believe there is a medical risk to being in person for your patient.

- REMINDER: this is intended as a **clinical decision making tool for health care professionals, esp. PCPs & school nurses.**
 - ▣ Opportunity for **team-based care** among these partners!
- Current draft reflects comments from review by VSSNA board members & primary care colleagues
- This will be a living document that will need updating as the weeks progress
- VDH MCH team has also updated ***parent/childcare document***.
- **Selected updates/changes to algorithm:**
 - ▣ Pathways to reflect vaccination status
 - ▣ Stronger recommendation to test children with symptoms (which will lead to more testing options/sites – VDH is aware).

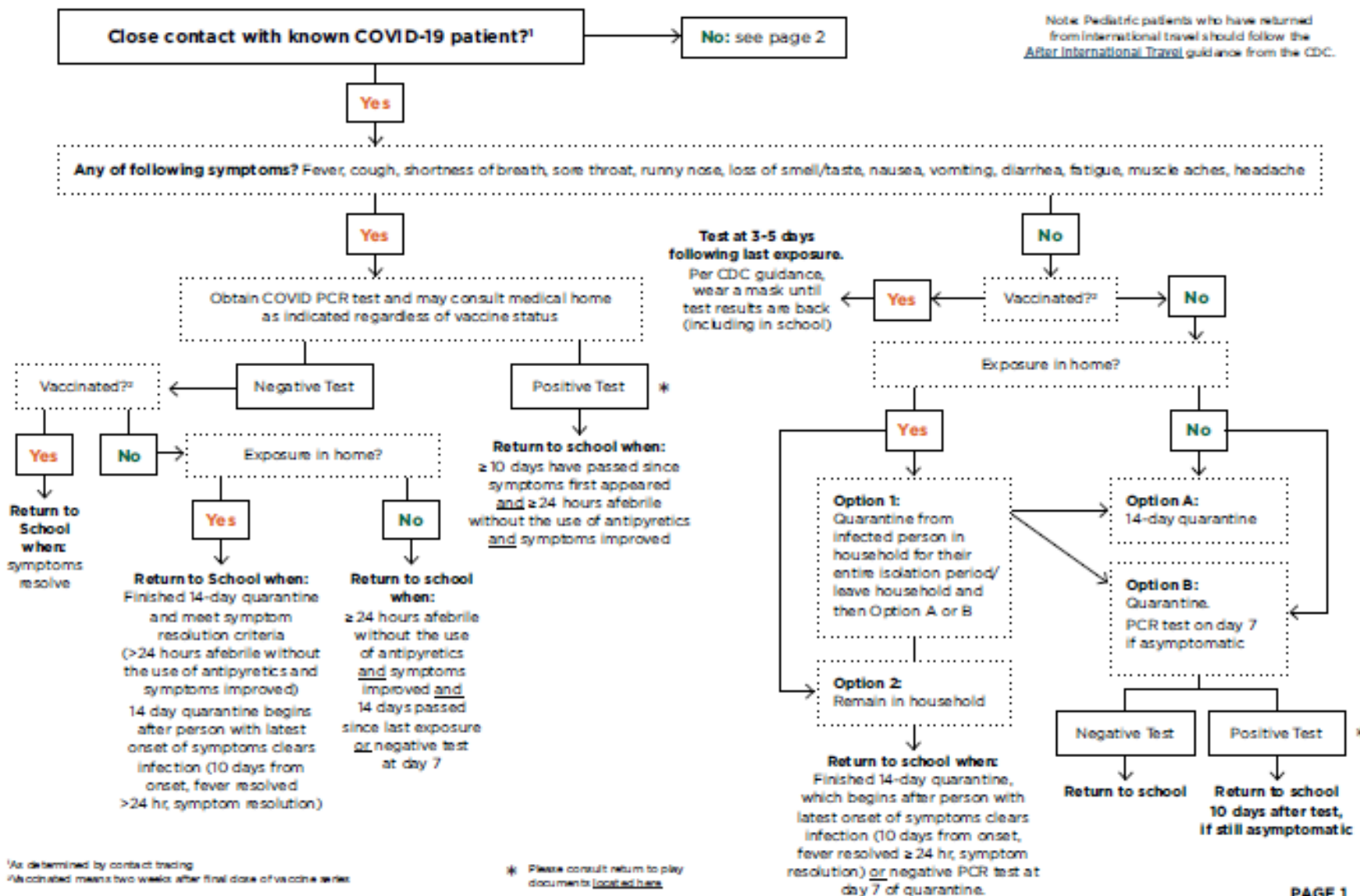
COVID-19 in Pediatric Patients

Triage, Evaluation, Testing and Return to School

This is a changing environment, and as we gain new knowledge about this virus, expect adaptations. The algorithm does NOT apply to children diagnosed with COVID-19 by PCR within the past three months. Please consult CDC protocols in those situations.

Current as of August, 2021

Note: Pediatric patients who have returned from international travel should follow the [After International Travel](#) guidance from the CDC.



* As determined by contact tracing

** Vaccinated means two weeks after final dose of vaccine series

* Please consult return to play documents [located here](#)

August 25, 2021

Updated
Return to
School
Algorithm
(page 1)

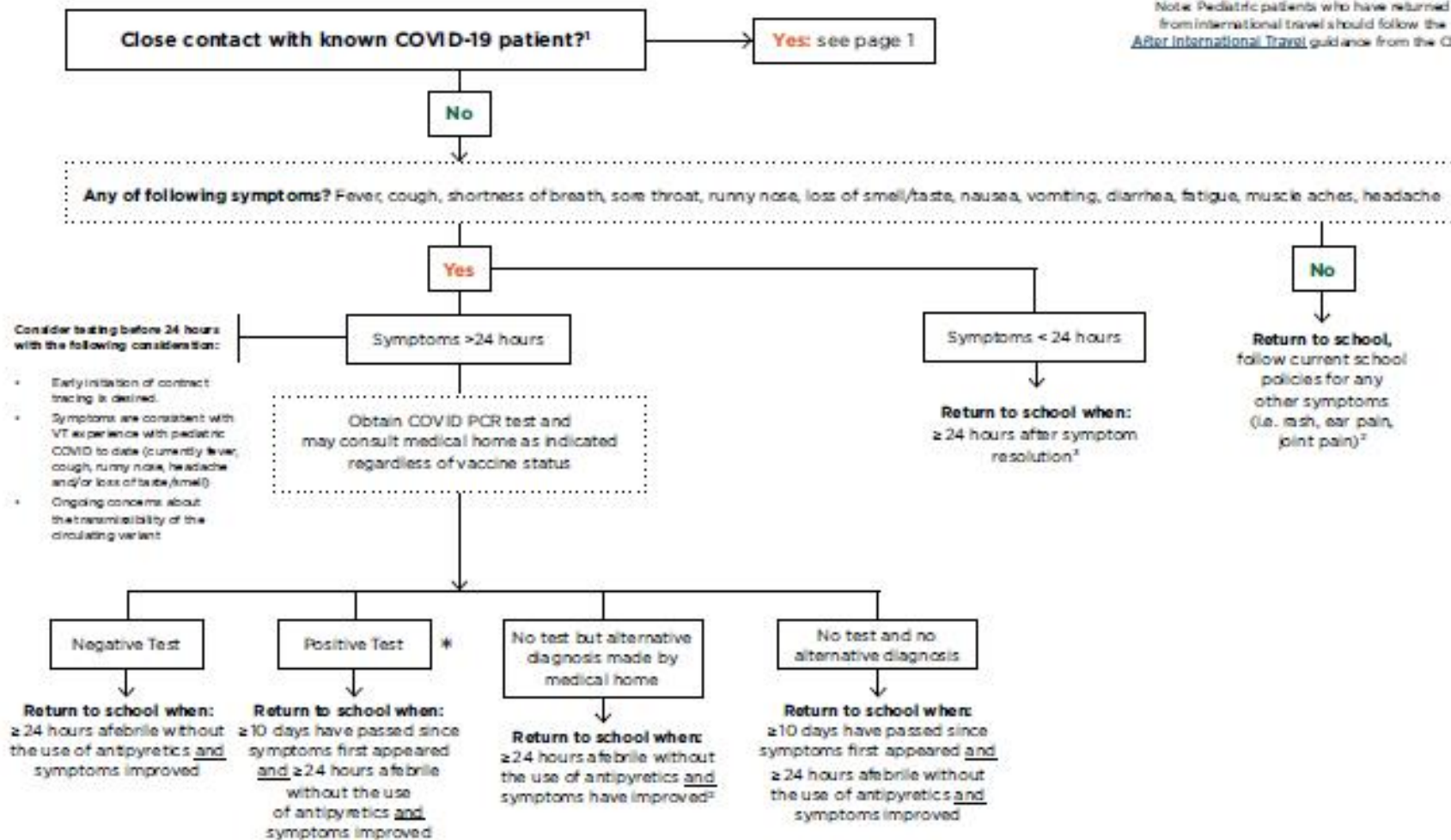
COVID-19 in Pediatric Patients

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This is a changing environment, and as we gain new knowledge about this virus, expect adaptations. The algorithm does NOT apply to children diagnosed with COVID-19 by PCR within the past three months. Please consult CDC protocols in those situations.

Current as of August, 2021

Note: Pediatric patients who have returned from international travel should follow the After International Travel guidance from the CDC.



Consider testing before 24 hours with the following considerations:

- Early initiation of contact tracing is desired.
- Symptoms are consistent with VT experience with pediatric COVID to date (currently fever, cough, runny nose, headache and/or loss of taste/smell)
- Ongoing concerns about the transmissibility of the circulating variant

Updated
 Return to
 School
 Algorithm
 (page 2)

Parent/Childcare Provider Handouts for Return to Childcare after Illness: In Revision



COVID-19 Information for Families: Return to Childcare or an Out-of-School Care Program Following Illness

August 2021

□ **When does my child need a COVID-19 test?**

- Here are the current pediatric symptoms associated with COVID-19:
 - Fever (100.4 °F or higher)
 - Shortness of breath
 - Runny nose
 - Nausea
 - Diarrhea
 - Muscle ache
 - Cough
 - Sore throat
 - Loss of smell or taste
 - Vomiting
 - Fatigue
 - Headache
- If your child has any of these COVID-19 symptoms for **longer than 24 hours**, they should obtain a COVID-19 PCR test.
- Consider having your child tested **earlier than 24 hours** if they have a fever, cough, runny nose, headache, or loss of taste or smell. These are symptoms commonly experienced by children testing positive for COVID-19 in Vermont. Please consult with your child's healthcare provider if you need assistance in deciding if your child needs an earlier test.
- If your child experiences allergy symptoms that are on the list above, COVID-19 PCR tests are recommended during this time of increased circulation of the COVID-19 virus.

VSSNA Town Hall (8/18/21)



- **What:** *“A frank discussion about COVID-19 with Dr. Becca Bell, Pediatric Critical Care Physician/AAP-VT President and Dr. William “Bill” Raszka, UVM Pediatric Infectious Disease Specialist”*
- **When:** August 18 – 9 a.m. via Zoom
- VSSNA top concerns:
 - ▣ Mandatory masking indoors for everyone
 - ▣ Calculation of fully vaccinated by eligible vs. total building population (numerator/denominator)
 - ▣ Recommendations for 3’ minimum physical distancing inside
 - ▣ Contact tracing
 - ▣ “These appear to be the concerns from both school nurses and administrators. We very much appreciate support for our role in caring for our students!”

Vermont State School Nurses Association (VSSNA)



- VSSNA Leadership:
 - ▣ Becca McCray, MSN MA RN NCSN – VSSNA President
 - ▣ Soph Hall (*Sophia Boyle Hall*), MEd, RN, NCSN – VSSNA Immediate Past President
 - ▣ Clayton S. Wetzel III, BSN, RN, NCSN – VSSNA Webmaster
- Website: <https://www.vssna.org/home>; also find them on Facebook!
- Update from Clayton Wetzel:
 - ▣ Town Hall recording available on website
 - ▣ Message posted on Facebook and Twitter
 - ▣ Updated the "useful links" on VSSNA COVID-19 resource page
 - ▣ Town Hall was a huge success – 154 participants!

From the AAP – in case you missed it

AAP COVID-19 Vaccine Updates

MMWR Report: mRNA COVID Vaccines During Preconception and Pregnancy

- Analysis of VSAFE data: 2,456 pregnant people who received one dose of mRNA vaccine just prior to pregnancy through < 20 weeks of pregnancy.
- No increased risk of miscarriage; growing evidence about safety and efficacy during pregnancy.
- **CDC recommends that pregnant people should be vaccinated against COVID-19.**



From the AAP – in case you missed it

AAP COVID-19 Vaccine Updates

- [ACIP Meeting](#) on August 13, 2021
- Additional dose of mRNA vaccine for moderately to severely immunocompromised individuals ≥ 12 years of age
 - Treatment for malignancies, s/p solid organ or stem cell transplant, primary immunodeficiency syndromes, advanced/untreated HIV, or active treatment with high dose corticosteroids or other immunosuppressive or immunomodulatory agents
- Same mRNA vaccine at least 28 days after completion of initial series



From the AAP – in case you missed it

AAP New & Updated Interim Guidance

- [Palivizumab Prophylaxis for RSV](#) *(New)*
 - Chapter Advocacy Letter: Payment for Palivizumab during Atypical Interseasonal RSV Surge
- [Face Masks](#) *(updated 8/11/21)*
- [COVID-19 and Safe Transportation in Motor Vehicles](#)
(updated 8/11/21)



From the AAP – in case you missed it

Information for Families

New Mask Graphics:

A new series of mask graphics optimized for social media, in English and Spanish, available in the [COVID-19 Vaccine Campaign Toolkit](#)

New articles on HealthyChildren.org:

- [Do Masks Delay Speech and Language Development?](#)
- [Long-Haul COVID-19 in Children and Teens](#)
- Ask the Pediatrician: [Is it safe for our newborn to be around unvaccinated people?](#)

Updated articles on HealthyChildren.org:

- [Safe Schools During the COVID-19 Pandemic](#)
- [Mask Mythbusters: Common Questions about Kids & Face Masks](#)
- [RSV: When It's More Than Just a Cold](#)

Masks work to
**reduce the
spread of
COVID-19 among
children.**



Real Talk

From AAP-VT Chapter President Rebecca Bell, MD FAAP

Blog post (8/10/21):

- ***Going Back to School During Delta***

- Prioritization of in-person learning
- Vaccination, vaccination, vaccination
- Stay home when sick
- Masking



- *“Pediatricians believe a healthy, safe, and productive school year is essential and achievable. We just all need to do our part to make it happen.”*

<https://rebeccabell-md.medium.com/going-back-to-school-during-delta-a262a9812b7f>

AAP Updates

- August is National Immunization Awareness Month – see AAP Toolkit.
- **Updated/New Interim Guidance:** <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/>
 - **Supporting the Emotional and Behavioral Health Needs of Children** (*revised 7/28/21*): includes new information on managing uncertainty, screening for mental health concerns and helping children who have lost a parent. There also are updates on use of telehealth, fear and anxiety, peer relationships and parental well-being.
 - **Post-COVID-19 Conditions in Children and Adolescents** (*new 7/28/21*): severity does not predict subsequent/ongoing sx's; can lead to secondary (subacute-severe) conditions.
 - Recommends all patients who test positive for SARS-CoV-2 infection have at least one follow-up conversation or visit w/pediatrician to: discuss residual symptoms (may include respiratory symptoms, cardiac symptoms, fatigue or cognitive fogginess); explore new symptoms & guide their return to activities; determine if the child/adolescent might require additional academic supports (e.g., gradual return to school & cognitive activities based on tolerance); offer guidance on rest periods & other accommodations. Some patients may require pediatric subspecialty support; those w/underlying medical or behavioral conditions may require additional support.

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:

<http://www.aapvt.org/news/aapvt-offers-guidance-families-children-how-navigate-summer-and-stay-healthy-and-active>

5 REASONS TEENS SHOULD GET THE COVID VACCINE



Vermont Chapter

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American Academy of Pediatrics
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VCHIP-VDH COVID-19 calls: Summer Calendar



- ❑ **August: generally Wednesdays only**
- ❑ **September: likely Mon. & Wed. with exceptions below**
 - ❑ **Next call September 8, 2021**
 - ❑ **No calls on September 1 or September 15**
 - ❑ **September call dates: 9/8 (W), 9/13 (M), 9/20 (M), 9/22 (W), 9/27 (M), 9/29 (W)**
- ❑ **Schedule subject to change** at any time if circumstances warrant!
- ❑ *Please continue to send your feedback re: schedule/topics to vchip.champ@med.uvm.edu*
- ❑ VMS calls with VDH Commissioner Levine now select Thursdays only (see next slide)

Questions/Discussion

- Q & A Goal: monitor/respond in real time; record/disseminate/revisit later as needed.
- **For additional questions, please e-mail: vchip.champ@med.uvm.edu**
 - ▣ **What do you need** – how can we be helpful (specific guidance)?
- **VCHIP CHAMP VDH COVID-19 website:**
https://www.med.uvm.edu/vchip/projects/vchip_champ_vdh_covid-19_updates
- Next CHAMP call – **Wednesday, September 8, 12:15 – 12:45 pm**
- Please tune in to VMS call with VDH Commissioner Levine:
Thursday, September 2, 2021 – 12:30-1:00 p.m. – Zoom platform & call information
- **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#