



VCHIP CHAMP VDH COVID-19

January 25, 2021 | 12:15-12:45pm Call Questions and Answers*

Wendy Davis, MD, FAAP, Vermont Child Health Improvement Program, UVM Breena Holmes, MD, FAAP, Physician Advisor, Maternal & Child Health, Vermont Department of Health (VDH), VCHIP Senior Faculty

Presenting: VDH Vaccine Registration & Sites

Wendy Davis, MD, VCHIP: VDH, AHS, and many other partners are now beginning to roll out the vaccine to that first age band (Vermonters age 75 and up). Information is readily accessible on the VDH website. There is a page specifically about the vaccine and a link to register, so it's easy to see what kind of information you will need to provide to register. Early this morning, the phone number was not posted, but it is now. There are hundreds of sites now posted. 10s and 10s of thousands of appointments available between local health office healthcare sites.

Breena Holmes, MD, VCHIP, VDH: I'd like to go over three quick things. First, there are enough spots, so this is not a first come first serve and the rest of you are out of luck kind of thing. We must really push the message that there will be slots for everyone in this age group. Second, I want to confirm what Dr. Davis said. The call volume to other aspects of the call phone tree at VDH has completely exploded this morning because the vaccine registration call center did not open until noon. Third, VDH staff in the district offices are going to be doing a ton of the human resource of the vaccine clinics. It won't fully take them out of testing. I think there's still a capacity expansion opportunity for VDH staff to do pop-up testing in the setting of an outbreak, which has been sort of the norm all along. However, it might not be for all outbreaks. There's ongoing discussion about local health office capacity.

<u>Practice Issues: VDH Immunization Program Update – Christine Finley, APRN MPH, VDH Immunization</u> <u>Program Mgr. & Merideth Plumpton, RN, Nurse Program Coordinator</u>

Christine Finley, APRN MPH, VDH: I'm learning a lot and it's so nice to be out of the operational mode for a minute to be able to hear some of that. The first thing I wanted to mention is that we looked at what we know from the skilled nursing facilities last week. We surveyed the skilled nursing facilities and filled in anything lacking with the pharmacy provider data. We learned that 92% of residents and 60% of staff had taken the vaccine. We were delighted with that. That was a good start. Work is underway to ensure there's multiple clinic options. It would have been nice if the call center could have opened early this morning. The delayed open had to do with training and availability and the amount that's been done in the last two weeks. I can tell you many people worked all weekend. Our Agency of Digital Services has proven to be amazing.

Community clinics for those 75 and older are starting on Wednesday. We have over 38,000 appointments available. I read in the chat that 13,000 people have already registered, so thank you for filling me in. We're looking at trying to have community vaccination clinics served by a common registration system, and this is something that Stephanie and her peers requested. It's not always going to be possible and sometimes there are barriers. I can tell you that we were trying to directly tie it into Kinney Drugs, but at the rate we're going, it doesn't always work. Clinics are currently planned at 54 sites across 37 towns. They will likely be looking at expanding that, but I have a map where they are currently during week one (see slide 18). They're going to be in district offices and Kinney Drugs in the beginning. In week two, they'll be with contracted

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partners. I didn't put the list out, because they're finalizing it right now and I'm not sure if all the contracts are signed. It will be some hospitals and FQHCs. I'll be happy to share it. I never know how fast something's moving. There's a lot of questions about second doses. Those appointments for second doses will be scheduled after you show up for the first dose clinic. So, you need to show up and get your first dose to get the appointment for the 2nd dose.

I could probably build plenty of PowerPoint slides with the list of issues, but right now the vaccine supply remains uncertain. I received contradictory messages last week within the same day, so it's difficult to plan. What's been planned 6-8 weeks out is based on the supply that we currently have. The hope is the supply will only increase and not decrease. The other challenge is how to vaccinate homebound patients. There's some really great work going on with the VNAs and EMS. The big challenge is how to transport the vaccine, because these files don't have preservatives in them, and studies haven't been done yet. I will be chatting with CDC this afternoon about this. The priority is ensuring we are safe and are using the vaccine in the correct manner in an environment that may not be as controlled and so working in.

There is also a federal retail pharmacy COVID-19 program. So, when there's enough vaccine available, the federal government will start sending vaccine directly to pharmacies in each state. Each state had to pick which chain they'd like the vaccines sent to. They made a recommendation based on those 65 and older, social vulnerability index and location. The pharmacy identified through all of that was Walgreens. So, once there's enough vaccine for the federal government to allocate it to one chain pharmacy in each state, Walgreens pharmacies will come on and add another area where vaccine might be available from.

I also wanted to talk a little bit about registration. There's the website healthvermont.gov/MyVaccine, the phone numbers and the hours for the phone numbers. If you have anybody that does better seeing a video, there's a video that takes you through every step.

Finally, I'd like to touch base on guidance regarding second doses of the COVID-19 vaccine. This is some information that was released on Friday. The guidance is now to administer second doses as close to the recommended interval as possible. If that's not feasible, second doses may be scheduled for up to six weeks after the first dose. I'm not sure what drove this. There is limited efficacy of these mRNA vaccines administered after 42 days. If the second dose is administered beyond 42 days, it is noted there is no need to restart the series. If the vaccine is given too early (earlier than the four-day grace period which precedes the recommended date) it should not be repeated.

Questions/Discussion:

C: Nathaniel Waite, RN, VDH: Vermont's dental periodicity schedule outlines preventive pediatric oral health services that children should receive at their pediatric or general dental home. This schedule contains recourses to help providers implement the recommendations, and indicates where there is overlap between services that can be provided at both medical and dental homes. https://www.healthvermont.gov/sites/default/files/documents/pdf/Vermont%20Dental%20Periodicity

https://brightfutures.aap.org/Bright%20Futures%20Documents/BF4_OralHealth.pdf.

%20Schedule.pdf. Bright Futures Promoting Oral Health theme:

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Q: The website and phone numbers are unfortunately not running very smoothly yet. Can you confirm, people can also register directly with Kinney Drugs and I'm not sure if there are other pharmacy sites that are accepting appointments themselves?

A: Sally Kerschner, RN, MSN, VDH: Burlington District Office Vaccination clinics this week will be at HO Wheeler. I have heard that all appointments are via VDH. The appointment messiness will settle in a few days.

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: That is what I had heard as well (that all reservations were supposed to go through VDH) but Kinney drugs is accepting reservations on their website right now which is why I want to clarify.

A: Merideth Plumpton, RN, VDH: Kinney is our only pharmacy partner and yes, you can register at the Kinney site. Our state site directs people to the Kinney site if that is the clinic they select.

A: Christine Finley, APRN MPH, VDH: Yes, I've heard they can register at Kinney. I'm not sure it's preferred, but I know I've heard it can happen.

A: Monica Fiorenza, MD, Timber Lane Pediatrics: Tracy Dolan is on Vermont Edition right now and said that over 13,000 75+ have registered already.

Q: The VDH recommends 10 days since initial symptoms and afebrile for return to school. Parent question today was is it longer for a dental visit? Child needs dental care and the dentist is making them wait another couple weeks. Looks like ADA is suggesting 14 days since COVID positive test. Any updates?

A: Breena Holmes, MD, VCHIP, VDH: I have not heard of different recommendations for dental visits.

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: I have not heard of different recommendations for dental visits but each health care specialty group often has their own guidance, so it is possible ADA is asking their people to have patients wait 14 days, although I do not know for sure what their guidance is. Dentists are at particularly high risk since basically all of their visits involve being close to the airway and potentially generating aerosols so I would not be surprised if they are using a more conservative cut-off.

A: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: Perhaps the dental group is assuming that some are immunocompromised and for those patients, we isolate a little longer.

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: Dentists are at particularly high risk since basically all of their visits involve being close to the airway and potentially generating aerosols so I would not be surprised if they are using a more conservative cut-off.

C: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: Moderna has already announced that is working on a vaccine that addresses 1.351, (https://www.cnbc.com/2021/01/25/covid-vaccine-moderna-working-on-covid-booster-shots-for-south-african-strain.html).

Q: I've been reading information on double masking after Mayor Pete wore 2 to the inauguration day. Any research out on this?

A: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: Double masking made it to the national media a week or 2 ago. I think the bigger issue is using the highest quality mask you can, routinely.

Q: How was severe obesity defined?

A: Merideth Plumpton, RN, VDH: I will let Chris answer that. I know they were considering a few cutoffs. A: Breena Holmes, MD, VCHIP, VDH: The definition is if BMI greater than 40; severe obesity is BMI greater than 40.

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Q: Do we know yet if the vaccine likely prevents transmission to those who are not vaccinated?

A: Merideth Plumpton, RN, VDH: I can post some info from CDC. The vaccine trials didn't study transmission.

A: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: We do not have a lot of clinical data on that particular topic. We hope, based on other vaccines, that it will but we don't have much clinical data to conclude that at this point in time.

Q: Estimated time line for "high risk" patients to schedule vaccines?

A: Merideth Plumpton, RN, VDH: The timeframe is dependent on the vaccine allocation we receive.

A: Christine Finley, APRN MPH, VDH: I think it depends on the vaccine allocation of what we see in the coming weeks. We've gotten some hopeful indicators. You could say as late as April or May but then you'd be wrong. My sense is to say hold tight and see what we see in the next three to four weeks and then we may be better able to estimate.

Q: With this option for delaying the second dose, has there been any discussion about conditions for electively deferring the second dose (e.g. intercurrent illnesses such as shingles, non-COVID URI or gastroenteritis, etc.)?

A: Wendy Davis, MD, VCHIP: I don't see Stephanie on, but she noted this a.m. that VMS IS planning to address that issue re: premed for allergy. Maybe on call next week when Dr. Levine not available? A: Merideth Plumpton, RN, VDH: I haven't seen any guidance on other illnesses.

Q: Should people delay dose and get COVID testing first if they have mild URI symptoms?

A: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: I think I would be cautious about delaying the second dose. That is easier to do when there is a surplus supply of vaccine.

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: Those are my thoughts as well (along with lack of data), but was curious to hear if there has been any explicit guidance on this given the changes. If someone has symptoms, I would probably test to make sure someone with COVID doesn't show up to a vaccination site.

Q: How long to wait after COVID-19 infection until vaccine?

A: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: Generally, we would defer for three months.

A: Merideth Plumpton, RN, VDH: You can look here under vaccination of persons with COVID infection or exposure: https://www.cdc.gov%2Fvaccines%2Fcovid-19%2Finfo-by-product%2Fpfizer%2Fclinical-considerations.html.

A: Susan Sykas DNP, Appleseed Pediatrics: Massachusetts vaccinates in 2 weeks if well asymptomatic following mild COVID-19 illness.

A: Meghan Gunn, MD, Southwestern Vermont Medical Center, Pediatrics: I had seen several different answers a few weeks ago last time I looked.

A: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: Recent COVID-19 is not a contraindication; however, we have assumed fairly solid immunity for three months following COVID-19 so we allow for deferring three months.

A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: But, if someone wants to get vaccinated post-COVID-19 and is eligible, the general recommendations is to just defer until they have recovered, there is no specific minimum interval.

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C: Christine Finley, APRN MPH, VDH: Here's a link to the weekly flu surveillance report: https://www.healthvermont.gov/sites/default/files/documents/pdf/2020-2021-Flu-WeeklyReport-Week02.pdf

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