



VCHIP CHAMP VDH COVID-19

November 23, 2020 | 12:15-12:45pm Call Questions and Answers*

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

Wendy Davis, MD, VCHIP: According to the COVID-19 in Vermont K-12 Learning Communities while Infectious dashboard (linked here:

https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID19-Transmission-Schools.pdf), there were 19 cases reported in the past seven days for a total of 74 cases. The College and University dashboard (linked here: https://dfr.vermont.gov/about-us/covid-19/school-reopening) show the St. Michael's College outbreak (part of ice sports) is up to a total of 79 cases as of 11/16/20. UVM has a total of 71 cumulative cases as of 11/15/20.

In the News

Wendy Davis, MD, VCHIP: Thanks to Dr. Joe Nasca for bringing the following USA Today on Thanksgiving during the 1918 influenza pandemic to our attention over the weekend: https://www.nation/2020/11/21/covid-and-thanksgiving-how-we-celebrated-during-1918-flu-pandemic/6264231002/. There were also some interesting articles in the New York Times about winter sports-related risk (linked here: https://www.nytimes.com/2020/11/19/opinion/sunday/anthony-fauci-covid-interview.html).

Three from the CDC

Wendy Davis, MD, VCHIP: There were a number of new MMWR reports released early last week or on Friday. A follow-up to the COVID-19 outbreak associated with a 10-day South Dakota motorcycle rally in August and September. The data from neighboring state Minnesota indicates that among 460,000 attendees, Minnesota had 51 confirmed primary associated cases, 21 secondary and five tertiary associated cases. There were nine additional likely associated secondary and tertiary cases with one death. They were able to use genomic sequencing to follow this. "These findings demonstrate rationale for consistent mitigation measures across states."

Trends in County-Level COVID-19 Incidence in Counties With and Without a Mask Mandate — Kansas, June 1—August 23, 2020 was released early on November 20, 2020. After the Governor's executive order, COVID-19 decreased in 24 counties that implemented the mask mandate, while the prevalence of the virus continued to increase in the 81 counties that did not implement the mandate. These findings suggest the mandates appear to have contributed to the mitigation of COVID-19 transmission in mandated counties.

Finally, Implementation of a Pooled Surveillance Testing Program for Asymptomatic SARS-CoV-2 Infections on a College Campus — Duke University, August 2—October 11, 2020 was released early. The campus conducted frequent PCR pooled testing of 10,265 students tested 68,913 times. 84 had positive results, half of which were asymptomatic and some of which had high viral loads. Pooled testing reduced the need for resources, allowed high throughput with high sensitivity and rapid turnaround of results.

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BCBS VT Connectivity Care Packages Pilot Program

Wendy Davis, MD, VCHIP: This pilot program coordinated by VPQHC (50+ organizations participating) endeavors to support equitable access to telehealth services, esp. for those who are digitally & medically underserved. 20 iPads will be distributed to BCBSVT members by mid-December (must have access to service connect; iPad may be kept; may add other apps. To refer, email Julie Zack (Director, Integrated Health): zackj@bcbsvt.com.

VDH Update – Testing

Wendy Davis, MD, VCHIP: Thank you so much to those of you who continue to share your testing experiences with us. Your feedback is relayed up the chain at the health department for continuous improvement. VDH's testing plan is posted and we're hearing there may be a new HAN this week, but no guarantee on that. We're looking for some clarification particularly regarding testing of asymptomatic individuals in the context of this week of people traveling either out of Vermont and back, visitors coming into Vermont or folks like college students returning home. VDH continues to conduct "Pop-Up" testing sites. Testing through the CIC partnership (tests sent to Broad Institute at MIT) are expanding rapidly. Ondemand testing events are indicated with "OD" on the website and all other events are Pop-Ups.

Practice Issues – Testing and School Updates

Breena Holmes, MD, VCHIP & VDH: We received an interesting question last week regarding the appropriate response if a student, staff member or teacher describes gathering or travel. What is the authority or the pathway for a school to exclude the individual based on this type of information sharing? There is an ongoing conversation with the Agency of Education and Governor to determine if there should be a stronger policy that folks who gather should be excluded, so stay tuned.

Michelle Shepard, MD, UVMCH Pediatric Primary Care & VCHIP: I was very disappointed to see some of the schools used very condemning language in their letters to families around gatherings. Our school district was great but I continue to feel sad reading some of the information coming from Washington county superintendents. I also channeled my inner Dr. Leah Costello and wrote on our school's Facebook page. It's interesting how parents are worried about kids getting sick at school but then don't want to change their holiday plans.

Breena Holmes, MD, VCHIP & VDH: We're approaching 10,000 teachers tested with ~0.2% positivity rate (some IT issues) as part of the surveillance testing effort. Please note the distinction between surveillance testing and VT population testing. This may indicate good compliance with guidance.

VDH is following 5-7 situations per day and there is still minimal in-school transmission. Some schools are choosing to go remote for a few new reasons. The first is related to food services. If there's a positive case and many close contacts, a school may feel unable to conduct in-person operations. VDH (local health offices) are working to support food services to stay open. In addition, some schools are going remote because they have so many families who won't wear masks and think the virus is a hoax, making leaders concerned about keeping schools safe. We wonder if there's a role here for local pediatricians to discuss this. Lastly, staff shortages due to a need for some teachers/staff to quarantine are a contributing factor to some schools' decision to go remote. Note, these quarantines are not as school close contacts but as community close contacts.

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Questions/Discussion

Q: After being on this weekend, there are still a lot of parents telling me they were told that if they don't hear back about a test result to presume it is negative. I have been telling them is not the case however it is unclear to me where this is coming from.

A: Lisa Gannon: I've also heard this. Maybe it's because they are told they will be called with a positive result. I have been telling them to quarantine until they get the negative result.

Q: Over the last 24 hours, we've been hearing more about the efficacy of the AstraZeneca vaccine. I believe what they revealed was near 70% efficacy with the regular regimen. Interestingly, if they gave half a dose for the first dose and a full dose for the second dose, the effectiveness was approaching 90% is what I heard.

A: William Raszka, MD, UVMCH & LCOM Dept. of Pediatrics: Just the opposite; vaccine seemed more effective after one dose, which is very odd. A regimen consisting of two full doses given a month apart looked to be just 62% effective. But, surprisingly, participants who received a lower amount of the vaccine in a first dose and then the full amount in the second dose were 90% less likely to develop COVID, compared with participants in the placebo arm.

A: Benjamin Lee, MD, UVMCH & LCOM Dept. of Pediatrics: That is all I know now as well. I'm not sure I quite understand but am trying to dig into it a bit more. They all got two doses, it was just the better dosing strategy was to give a half dose for the first dose in one of the arms. I'm just speculating, maybe those who got a full dose first developed enough of an immune response that they didn't boost after the second, while those who got a half dose first were able to boost following the second dose? Just thinking out loud here, I do not have any information on this beyond what has been reported in the press.

C: The expanded pop-up testing is such tremendous help, our regular COVID testing site is already triple booked for the entire week! I am grateful for availability of CIC testing starting this week.

Q: Does "upper valley ambulance mornings" mean they end at noon?

A: Michelle Perron, MD, Timber Lane Pediatrics: I think it's 9am-2pm.

A: Wendy Davis, VCHIP: It looks like Dr. Perron is correct regarding the timing, but please continue to check the web site if specifics are needed.

C: Population mass testing in Tirolean Alps showed shocking positivity rate of 1% last week (asymptomatic). Our OR diagnoses asymptomatic based on their pre op testing all the time.

Q: Some schools are choosing to go remote for a few new reasons, one of which is because they have so many families who won't wear masks and think the virus is a hoax, making leaders concerned about keeping schools safe.

A: William Raszka, MD, UVMCH & LCOM Dept. of Pediatrics: We do not want schools going remote! A: Jessica Denton, UVMHN Community Health Team: I'm very worried about our adolescent youth. So many mental health needs, which are ever on the rise. This whole week of vacation is tough on this age group. I worry about the late December break too.

A: Ellen Gnaedinger, APRN, UVMCH Pediatric Primary Care: I was on a call with White River Valley SU and encouraged SU to remind parents of HUBS daycare when schools are remote:

<u>http://www.vermontafterschool.org/hubs/.</u> WRVSU remote one week after Dec. break, also had heard of unsafe remote daycare setting including sick kiddos.

A: Stephanie Winters, Vermont Medical Society: Messaging definitely needs to be strong here in Washington and Orange county, given it's common to think wearing masks is being a sheep and the virus is a hoax. It's discouraging to see this type of behavior and dialogue where I live.

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A: William Raszka, MD, UVMCH & LCOM Dept. of Pediatrics: I saw that first hand yesterday in Randolph. Really discouraging.

A: Michelle Perron, MD, Timber Lane Pediatrics: I also live in Washington County and it is better where I live, but I have relatives in Barre and hear about that type of behavior there.

Q: Will there be more info on how current guidelines apply for childcare at home outside of centers?

A: Breena Holmes, MD, VCHIP & VDH: Yes, I have that. The language is very clear that any setting in the care of children is allowable in the executive order and it's listed on the Agency of Commerce and Community Development website. I'll get it for you.

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