

## VCHIP CHAMP VDH COVID-19

June 1, 2020 | 12:15-12:45pm Call Questions and Answers\*

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### **Governor's Media Briefing – Monday, June 1, 2020**

The Governor addressed the death of George Floyd and the reactions across the U.S. The Governor is promoting safe and peaceful activities, especially in the context of the COVID-19 public health crisis. He's launching a racial and equity task force today, which has been in evolution over the course of his administration. It will focus on addressing gaps in healthcare delivery, support for a racially diverse population, review of current laws, and anticipating appointments and updates next week. He encouraged Vermonters to consider what role each of us can take to end racism, hate, and bigotry. We can address this particular issue without a vaccine.

Governor Scott will detail additional re-openings soon, including indoor dining in restaurants and continuing to ramp up other elements of the hospitality industry. The DMV is reopening, as announced by Commissioner Wanda Minoli. She announced that Learner's Permit testing will be conducted online. If they pass, they will receive a permit in the mail (standard only – no motorcycle or commercial vehicles). Beginning June 8, the DMV will resume driver's license exams that were scheduled pre-COVID and subsequently cancelled during the shutdown. These individuals will be contacted by the DMV. Beginning on June 3, road tests can be scheduled by appointment only. The DMV is developing a plan to handle the backlog with certified examiners after additional training.

Commissioner Levine said the data continues to be positive with very few new cases. We are on track to enter CDC Phase 3 to guide reopening and will continue to follow current guidelines. There are ongoing risks to be aware of and to watch carefully, such as the weekend protests in Burlington and elsewhere. Many were wearing masks, but he expressed concern about the lack of physical distancing. This week, many upper-level college and university students will return to Burlington. There is a coordinated effort by the city of Burlington, UVM, Champlain College, and VDH to provide proper messaging and programs. Mayor Weinberger send out a message to "box it in" and emphasize the need for quarantine, opportunities/locations for testing, public health principles for mass gatherings, physical distancing, and facial coverings.

He did address the cluster of 7 individual cases in Winooski and acknowledged concern that the cluster could become much larger. The VDH Epidemiology team and contact tracers are working with those involved, using the standard public health approach and methodology to support that. Coordination is being led by the VDH Epidemiology team at the central office and the Burlington Districtal (local) Health Office. Testing will occur today and all week for Winooski residents in partnership with Community Health Centers of Burlington at the O'Brien Center.

In the Q&A period, the Governor called Commissioner Mike Schirling of the Department of Public Service to the podium, and he spoke about the service orientation of law enforcement in Vermont and how that focus will continue in the weeks ahead.

## **Practice Issues - At the Intersection of the Pandemic and the Impact of Racism on Child and Adolescent Health**

*Wendy Davis, MD, VCHIP*

We wanted to use this time to address the public health crisis that is occurring, but it is a different kind of public health crisis than the one created by COVID-19. We are seeing the impact of racism on child and adolescent health. I use that title because that is the title of a policy statement that came out from the AAP last year. I wanted to share and make sure you all know some of the excellent resources that have come out of the AAP on this topic. Many of you are members, but many of you may not be. I want to assure you that this topic has been a very important focus for the AAP over the last few years. We can use the following AAP policy statements as a way to frame our conversations and actions going forward to address the issue of racism and its impact on child and adolescent health:

- Racism and Its Impact on Child and Adolescent Health (2019)
- Poverty and Child Health in the United States
- Providing Care for Immigrant, Migrant, and Border Children
- Detention of Immigrant Children
- Promoting Food Security for All Children
- Providing Care for Children and Adolescents Facing Homelessness and Housing Insecurity (reaffirmed 10/2016)
- Navigating the Intersection of Medicine, Public Health, and Social Determinants of Children's Health (reaffirmed 10/2016)
- The Lifelong Effects of Early Childhood Adversity and Toxic Stress (reaffirmed 07/2016)
- Early Childhood Adversity, Toxic Stress, and the Role of the Pediatrician: Translating Developmental Science Into Lifelong Health 9 (reaffirmed 07/2016)

Last night, AAP members received an email from our President, Dr. Sally Goza, who lives in Georgia. She referenced how to frame our actions and our discussions around what is happening in the country right now. It's compelling and helps us frame our conversations.

In pursuit of the AAP Equity Agenda, the AAP has also formed two task forces: 1) the Task Force on Diversity and Inclusion, which is made up of child health professionals thinking about these issues from the organizational perspective and 2) the Task Force on Addressing Bias & Discrimination, which is made up of children and families thinking about these issues from the societal perspective. These two task forces come up with both inwardly focused and outwardly focused recommendations for how we can address the issue of how pediatricians can deliver equitable healthcare with child health equity at the center of these initiatives.

Out of these two task forces, the AAP did create a very focused set of recommendations that can get us thinking about the actions we can take in the pediatric healthcare arena to promote racial healing. The following recommendations are focused on the AAP's organizational work and having these recommendations permeate all aspects of the work of pediatricians across the country. They created a number of structures to develop an advanced diversity and inclusion initiative, and a lot of that is focused on how we develop and support our own diverse pool of leaders for the AAP. There is a lot of assessment and evaluation going on in the AAP right now. For the task force addressing bias and discrimination in healthcare, it really calls to the forefront the evidence base and impact of structural, interpersonal, and internalized racism on child health. That was really the main message of Dr. Goza's email on Friday.

Diversity and inclusion considerations undertaken by the AAP include:

- Commitment to diversity and inclusion should permeate all aspects of organizational functioning, and be collaborative, explicit, and nationally visible
- Create an enduring structure to develop and advance diversity and inclusion initiatives and provide guidance, coordination, and oversight
- Explicitly promote and sustain a diverse pool of leaders throughout the AAP leadership structure
- Conduct ongoing assessment and evaluation of diversity and inclusion actions and outcomes to foster an environment of continuous reflection and improvement

Bias and Discrimination considerations undertaken by the AAP include:

- Increasing evidence of the pervasive impact of structural, interpersonal, and internalized racism on child health
- There is a critical need to address diversity and inclusion and bias and discrimination synergistically
- Need to address bias and discrimination across all AAP competencies
- Education, Policy, Advocacy, Research, Clinical Practice Support
- Create accountability and provide ongoing oversight to guide, develop and implement policies, practices, and programmatic activities that address bias and discrimination across all areas of the AAP
- Equip AAP members with the structural competency to acknowledge themselves as actors within biased societal institutions

There is a series of activities that will be unfolding in the next couple of days, including in the Department of Pediatrics at UVM's Larner College of Medicine. Dr. Becca Bell, Vermont's AAP President, plans to bring us together around these issues through the chapter.

*Breena Holmes, MD, VDH:* It's always helpful to ground our work and our thinking in AAP policy because, as most of you know, there are really good thinkers across the AAP trying to get this right because it's been bubbling up for decades and decades. In public health, the data speaks for groups of Vermonters who experience the health disparities and worsening health outcomes with one of these groups being people of color. We also see these types of disparities in LGBTQ Vermonters, folks with disabilities, and also people in poverty. Those are the four areas that we try to walk the walk with at VDH. VDH's COVID-19 data is also stratified by race now, and we are experiencing more positive cases of COVID-19 in people of color. We've been presenting that information to this group for weeks, but it's time for us to ask ourselves why.

**Q: How will these recommendations be operationalized at the practice level? Who will take role of assessing and evaluating our practice and promoting accountability?**

*A: Wendy Davis, MD, VCHIP:* We are so fortunate to have pediatric leaders in this arena in Vermont, one of whom is Dr. Andrea Green. Dr. Green leads the work serving immigrant children in the UVM Children's Primary Care practices. She was also on the task force for Bias and Discrimination. She also worked with a subgroup to develop a specific set of recommendations for pediatric practices. That's one of the things we will bring to you on Wednesday. These recommendations are really about examining your own practice through the framework these two task forces from the AAP pulled into these documents. They are quite well-organized so that you can take them and look at your own practice and see where your strengths are and where you may have opportunities for improvement. Echoing what the Governor said today, it's all of us in practice taking on this issue, taking a step back, taking the framework, looking at your practice through this lens, taking accountability and responsibility, and deciding how it gets operationalized at your practice level.

\*Note: This is a paraphrased synopsis of the call and is not a word-for-word transcription.

*A: Lewis First, MD, UVM Children's Hospital & LCOM Dept. of Pediatrics:* This issue is a priority for us as individuals, in our offices, at the UVM Children's Hospital, in our State, and in the country. I was struck by an email sent out by LCOM Dean Page with the statement, "Health cannot exist where justice cannot prevail." That's very true today. Even though we may think that this issue is enormous for us to get our arms around and do something about, the action plan that Dr. Green will be distributing allows us to answer the question, "What can I do to address my implicit biases?" The Implicit Association Test (IAT) is wonderful way to do a self-awareness of where we're at. The offices and looking at your office with a new eye this morning in term of what's on the walls and what is not. What are the steps, not only for us, but also for our staff, to determine what does welcoming really mean? How do we really understand the cultures that we don't understand? Can we invite our families to help educated us to make sure that we are more welcoming and inclusive in achieving the equity that we may think we have, but clearly from when you look at COVID-19 and look at other data from our state and states around the country, we are not there yet? What can we do as leaders and pediatricians to go out and educate the community, like in schools or community groups, not only the media? People can turn to us, and we can feel like it's not out of our reach. I look forward to having this dialogue with our department as well in a way that aligns. We have to align and show what we can do with our families by partnering with them and putting together an approach for our state that is not just about our department or our children's hospital. If you start saying "someone else is going to do it," then we're going to continue to see what's happening in this country. The beauty of being here in Vermont and upstate New York is that we can get our arms around this issue with some very simple steps to start and then start to grow it through AAP, through VCHIP/CHAMP, and each other. That's where I'm sitting. I think this is an opportunity. I think this is an awareness and an awakening. I hope that everyone on this call doesn't see it as out of our reach, but well within and something that we should approach long before we have a solution to COVID-19.

*A: Becca Bell, MD, UVM Children's Hospital:* We really need to find Vermont voices and look at the story of people in color living in Vermont because that really brings home the experiences that folks have who are our patients and our neighbors. Kiah Morris speaks about this very eloquently and powerfully. There have been stories on VPR and Brave Little State where they've addressed this issue and have interviewed Vermonters. I'd be happy to curate a list if folks want to send me other story sources. Starting with listening is always a good place to start, especially listening to local community about their experiences. To keep this issue from feeling overwhelming, we an AAP policy statement, and the chapter would like to set up a task force of anyone who is interested in a very practical way of looking at the recommendations listed in the AAP policy statement and think about what might be helpful in terms of bringing those recommendations to one of these calls. We want to get an idea about what pediatricians in the state are doing around these recommendations in their practices. When I looked through it this weekend, there were tools that were noted in the policy statement that I'm not familiar with, but maybe other folks on this call are and are using them in your practices. We want to try to gather best practices and what people are doing across the state. The idea for the task force is to make this very practical and action-oriented for our practices. A lot of resources have been gathered, but we may want to make them more specific to Vermont pediatricians and families. We need to gather resources for our families of color who are experiencing discrimination. We also need to educate our white families on how to talk to their kids about their privilege and the existence of racism. I wanted to find out who on this call is interested in participating in this task force. We will talk about it more at our Board meeting on Wednesday, as it's an ongoing discussion. I do think there are action-oriented steps we can take to move towards making Vermont a more welcoming place.

**Q: Is testing for returning college students completely voluntary? I saw my son's new apartment this weekend and of the dozens of people moving in and out, I was the only one wearing a mask.**

*A: Breana Holmes, MD, VDH:* Yes, I assume voluntary because they are off campus apartments, right? UVM and Champlain are fully committed to the testing but have no enforcing authority.

**C:** If folks want to review, here's the link to the AAP Policy on Racism and It's Impact on Child and Adolescent Health: <https://pediatrics.aappublications.org/content/144/2/e20191765#sec-6>.

**C:** BOR. R. YANG, EXECUTIVE DIRECTOR AND LEGAL COUNSEL, VERMONT HUMAN RIGHTS COMMISSION:  
Bor Yang provides an Implicit Bias training that is extremely helpful. Here's the blurb and it was extremely helpful when I participated in it last year. "The Implicit Bias Training explores how we unconsciously attribute certain qualities to members of a particular race, gender, sexual orientation, disability, etc. We discuss how these associations are formed, the impact they have on our behavior, and how we unconsciously evaluate others despite our best intentions. The training challenges us to be introspective, consider our own biases and ways we can consciously and effectively challenge these biases through practice and mindfulness."

**C:** VT-LEND has a strong curriculum and training on implicit bias, as well. MaryAlice Favro and Mercedes Avila are leads within UVM.

**C:** Stephanie Winters, Vermont Medical Society: VMS will be coming out with a press release in the next couple of days as well.