



VCHIP CHAMP VDH COVID-19

July 24, 2020 | 12:15-12:45pm Call Questions and Answers*

Wendy Davis, MD, FAAP, Vermont Child Health Improvement Program, UVM Breena Holmes, MD, FAAP, Director of Maternal & Child Health, Vermont Department of Health (VDH)

VDH Updates – Immunization Registry Improvements

A new tool via a webservice with forecasting function added to the Vermont Immunization Registry. It provides clinical decision support for immunization and supports all routinely administered vaccine groups from birth-adulthood. It's based on the ACIP (CDC schedule).

Publications and Media Articles

Governor Scott signed an order today effective August 1, 2020 to strengthen existing mask mandates and will require masks in public places both indoors and outdoors where physical distancing isn't possible. He spent time giving his rationale, reminding folks to look at the data and realize that the science is real.

AAP/Other Updates

From the AAP Daily Briefing, which should be in your inbox, there is a lead article on how the lack of pediatric data is complicating school reopening plans. In Vermont, we are fortunate to have VDH looking at pediatric data.

AAP – VT is issuing a press release in development to encourage prioritization of in-person attendance for preschool through grade 5 and for all students with special needs. Schools have been rolling out plans that have all children, grades K through 12, on a hybrid schedule with only 2 days per week of in-person instruction. We anticipate the release of this guidance on Monday, July 27, 2020. Please continue discussions with your schools/districts about how models can evolve over time and be re-evaluated, even if initial plans have been released. CDC also issued updated guidance, "Preparing K-12 School Administrators for a Safe Return to School in Fall 2020 (updated July 23, 2020)." We are also trying to refine the Vermont school guidance based on feedback and comments.

Questions/Discussion

Q: Return to school plans?

A: Nathan White, MD, Richmond Pediatrics: I'm at Richmond Pediatrics this month and families have told us that Harwood is going to be doing one in person day per week.

A: Monica Ogelby, Clinical Services Director, VDH: Harwood Union is 1 day per week in person for all ages. A: Libby (Elizabeth) McDonald, APRN, UVMCH Pediatric Primary Care (Burlington): It's all Harwood Union Supervisory Union, including elementary (Thatcher Brooke).

A: Breena Holmes, MD, VDH: There is a bright spot. Jeanne Collins, the superintendent of Rutland Schools who is on the task force, has had the experience of being with Drs. Lee and Raszka and is opening full time K-2. She said on a call yesterday that if all goes well, she could consider going up to grades 3 & 4. It's getting a little interesting as we talk about the data under the age of 9 or 10 and that's not a full elementary school, because 6^{th} graders tend to be over ten.

A: Colleen Moran, MD, Appleseed Pediatrics: K-8 CVU district is 2 days in-person and 3 days remote. Lamoille currently plans to open K-12 5-full-days.

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





A: Libby (Elizabeth) McDonald, APRN, UVMCH Pediatric Primary Care (Burlington): Twinfield is also opening full time!

A: Kate Goodwin, RN, CPNP, Lakeside Pediatrics: The Schoolhouse in South Burlington is digging deep into their outdoor programming and planning to have kids, preschool through 8th grade, there 5 days a week. A: Alex Bannach, MD, North Country Pediatrics: Some of our elementary schools are opening full time, still

waiting to hear from others.

A: Miki Beach, VCHIP: CVU has also released plans to go to full in-person within 6 weeks if all goes well.

A: Lori Racha, MD, UVMCH Pediatric Primary Care (Burlington): CVU is a 6-week plan.

A: Sarah Weidhaas, MD, Springfield Health Center: Springfield District is looking at 2 days per week in person.

A: Kristy Trask, RN, Care Manager, Primary Care Pediatrics: Essex/Westford school District is 3 days remote and 2 days in-person, for all ages and grades.

A: Alex Bannach, MD, North Country Pediatrics: One of our high schools is only going to do 2 days in person and 3 days remote. It mostly sounds like it's due to logistical challenges (spatial restrictions) but they already determined to gradually get special education students in full time.

A: Michelle Shepard, MD, UVMCH Pediatric Primary Care (Williston) & VCHIP: The entire CVSU is 2 days in person, no wiggle room, as noted in communication to families. CVSU is the superintendent group that includes some of Chittenden county and Franklin county.

A: Stacy: Milton is 2 days in person with other days remote learning.

A: Roya Mansoorani, MD, Northwestern Medical Center Pediatrics: Most of Franklin county schools are 2 days in person and 3 days on-line.

A: Deanne Haag, MD, Northwestern Pediatrics: K-12 in Franklin County is 2 days in person, 3 days remote. They are alternating groups in school, Monday-Tuesday group and Thursday-Friday group, to reduce the total number of students at once. Working parents and child care providers are worried about how this will work.

Q: I am leading Rock Point School, a small (20-30 students) day and boarding high school. We are well into planning and are seeing ways that we can open. Who are the best people to run our plans by to get the best medical/science based perspectives on our plans?

A: Wendy Davis, MD, VCHIP: What we've been encouraging all of our listeners to do is to connect with their schools. We will try to identify someone who can be an ongoing advisor for you. Thank you so much for extending your interest in the other direction. My email: wendy.davis@med.uvm.edu.

Q: It's also concerning that they are likely suspending after school programs in Springfield.

A: Breena Holmes, MD, VDH: That's news to me but I've been back and forth with the head of VT Afterschool, her name is Holly Morehouse, and she is on it and she is so upset about the way things are rolling out this week. I'm going to join her huge consortium of youth serving programs next week to talk about Drs. Lee and Raszka and data and kids and try to get at least younger kids in care.

Q: Colleen Moran, MD, Appleseed Pediatrics: In Lamoille, we are getting LARGE numbers of requests for provider notes for parents to NOT have patients attend in-person school. Thoughts?

A: Jill Rinehart, MD, UVMCH Pediatric Primary Care (Williston): We added to the press release, "In rare cases, vulnerabilities of children or their family members may warrant discussion with health care professionals in their medical home to assess the risks and benefits of in-person attendance." A nice segue to the task force recommendations for CSHN access to education.

Q: Thoughts on the mask mandate language around exceptions for developmental appropriateness?

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A: Becca Bell, MD, UVM Medical Center: With regard to developmental appropriate age for facial coverings, I have found this line helpful from the childcare guidance, "Facial coverings are developmentally appropriate when children can properly put on, take off, and not touch or suck on the covering". Would be great if the mandate could include that.

A: Stephanie Winters, Vermont Medical Society: He did say kids under 2 or those developmentally or medically unable; that language came directly from this call.

Q: Can you help us understand where this "deep clean" theory arose? It is not part of any guideline. What is the rationale for having schools empty on Wednesdays?

A: Wendy Davis, MD, VCHIP: The recommendations and data don't really support that in school.

A: Breena Holmes, MD, VDH: That may be more of a planning day because it's very hard for teachers to teach $\frac{1}{2}$ remote and $\frac{1}{2}$ in person. It appears from our review that they would rather describe it as a public health measure than something about that.

A: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: I cannot believe that we are emptying buildings. We need kids in the building! I will not accept that as a public health measure.

A: L.E. Faricy, MD, UVM Medical Center: I agree with Dr. Raszka on both points! The fact that this hybrid model is so exacting for teachers that they need an entire day each week for planning is telling. But, they should name that instead of saying the "deep clean" is necessary because this will drive more non-evidenced based anxiety around building cleanliness.

A: Monica Ogelby, Clinical Services Director, VDH: From a contact tracing standpoint, it's unlikely that even if sitting 6-feet apart from one another, if there's a positive case in a classroom, that the entire classroom will all be contacts anyway. They'll eventually accumulate 15-minutes within 6-feet of one another no matter what, during the infectious period.

Q: If kids can't be in school because of issues then why can they go to school daycares?

Q: Updates on return to sports?

A: Miki Beach, VCHIP: CVU is allowing fall sports: cheerleading, cross-country, field hockey, football, golf, soccer, and volleyball.

A: Leah: The Vermont principals are also not going to allow sports at this time, even though camps have been allowed. That information came from MAUSD. I work at this school district. The email CVSD and MAUSD sent out also said kids could not start work outs at school preseason because of COVID.

A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: That is correct. Nothing until school starts. I don't think that message is intended to mean that there will be no sports at all (as far as I am aware).

A: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: Target date is August 1 (I think). Things were fairly smooth until we realized that schools were only having in person classes twice a week. So, that led to some soul searching.

Q: I'm curious about data for camps that have been held this summer. I don't believe masks for campers were "required", and I haven't heard of issues of increased spread. Clarifying, (not saying to not require masks), just curious about spread.

A: Breena Holmes, MD, VDH: We've had sporadic camp counselors and camp adult staff test positive with no outbreaks ensuing. Some kids were told to quarantine, some kids have been tested, some have not, and it's back to business as usual. In general, we've had one-off cases of a camp counselor or adult staff without a kid in the group acquiring.

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A: Alex Bannach, MD, North Country Pediatrics: I just talked to our summer camp yesterday and it is going very well, they were happy. Masking inside and distancing outside turned out to be a non-issue. Some kids that missed because of URI symtoms but parents were very supportive and appreciative.

A: Monica Ogelby, Clinical Services Director, VDH: The contact tracing team has not been able to confirm that any kids have given it to each other in a camp or child care setting. Fingers crossed it stays that way!

Q: Is anyone on the call working with South Burlington SD?

A: Kate Goodwin, RN, CPNP, Lakeside Pediatrics: We are (Lakeside Pediatrics) are working with the school nurses directly.

A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: Yes, I am in touch with David Young. Want to help me?

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