



## VCHIP CHAMP VDH COVID-19

August 11, 2021 | 12:15-12:45pm Call Questions and Answers\*

Wendy Davis, MD, FAAP, Vermont Child Health Improvement Program, UVM  
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### **VDH Immunization Program Update**

*Merideth Plumpton, Nurse Program Coordinator, VDH:* In anticipation of the approval of the COVID vaccine for the 2 – 11 year olds, VDH has begun planning. While we do not have a definitive timeframe, we have been told to expect approval between this fall to early winter. We also recognize primary care sites that see children will take a role in vaccinating this age range. There are different COVID resource centers around states. Pharmacies will be able to vaccinate kids 3 years old and older. There will be specific school-based clinics for the school-aged kids, and targeted community clinics as options for families. A survey was sent out last Friday about your office's plan for the 2 – 11 year olds and if COVID vaccine will be administered. 30 offices have responded and we would love to see a lot more. The deadline to submit the survey is Wednesday, August 18. We would also love for you to start the conversation now with patients and their families on what their plans will be. The second round of clinics are occurring now for 12-18 year olds in collaboration with the Agency of Education. Each geographic area will have at least 3 clinics targeted specifically to the students those areas in the upcoming weeks. The Immunization Program Manager position is currently interviewing.

### **Partnering with Vermont School Nurses to Support a Safe Return to School**

*Becca McCray, MSN, MA, RN, NCSN, VSSNA President:* We support everything that has been presented on universal masking through the school year. In regards to the student surveillance testing, we are waiting for better language on how the swabbing will be done. Through school nurse consultant, we have brought to the leaders' attention, that it is not a great scenario for school nurses to be swabbing. Stay tuned for updates. We continue to meander through contract tracing. As questions come up, we will continue to navigate through that together. We are also anxiously awaiting the algorithm that will be revised this week by Becca Bell, Bill Raskza, and Ben Lee. This will help explain to parents why their kids can't come to school sick. The COVID Coordinator role has been stripped a little bit from some school districts. We recommend that you reach out to your school district and advocate for a COVID Coordinator or a consistent school nurse at the decision-making table if you know your school district does not have one this year. This will allow consistency across the board. At the end of last year, the VSSNA changed the way our district reps ran. We have aligned it so that we will have district reps in each local office of health grouping. This allows a partnership between the school nurse liaison, the local health offices, and the groups that are meeting for consistent messaging. We would encourage the school nurse liaisons to also invite pediatricians to the table to maximize partnership at every level, leader and ground.

*Breena Holmes, MD, FAAP, VCHIP:* As much as we have identified in surveillance testing and contact tracing, we need much more clarification which will be forthcoming from our MCH colleagues. We are open to feedback on the algorithm. If there are glitches on the algorithm, please let us know by Thursday, August 12th.

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

## Questions/Discussion

**Q: I had a question regarding AOE guidance for voluntary testing in schools and how to coordinate this from the school nurse's office side. Will the school nurse's office be receiving guidance on how to do this?**

*A: Breena Holmes, MD, VCHIP: Heather, school nurses are seeking clarification about their role in surveillance testing. They are concerned about their capacity and we are suggesting students self-swab or have parents with them to do the swab. We have school nurse leaders on this call so if you want to elaborate on your question, feel free to do so.*

*A: Heather Link, MD, UVM Medical Center, Pediatric Primary Care (Burlington): Actually, this helps. I had a question from Winooski, but figured that guidance would be forthcoming. :) I was not too excited about trying to figure this one out. :) I am happy to see if there is a role to support this undertaking from a school based health care center.*

*A: Breena Holmes, MD, VCHIP (verbally): I would encourage them to speak with their VSSNA leaders.*

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: Personally, I think that we should not ask the school nurses to perform any surveillance testing. Students can do this and if necessary, with the help of their parents.*

*A: Heather Link, MD, UVM Medical Center, Pediatric Primary Care (Burlington): That helps!*

*A: Becca (Rebecca) McCray, MSN, RN, VT State School Nurses' Association: For any school nurses who are on the call please email any questions you may have to [covid-19@vssna.org](mailto:covid-19@vssna.org) and we will help navigate and get answers for you!*

**Q: Do we know the symptoms of these kids or underlying problems?**

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: I think the key issue is that the Delta variant is simply more infectious. At this juncture, I do not think there is data suggesting that children are presenting with different s/s than with infection with previous circulating variants.*

*A: Wendy Davis, MD, VCHIP: Leah: if you are asking about the symptoms for pediatric cases, yes, they are published in the weekly data summary. See an earlier slide when you check the PPT tonight.*

**Re: Stephanie Winters, Vermont Medical Society: AAPVT Chapter will be working on setting up family forums again like we did in the spring! Let me know, [swinters@vtmd.org](mailto:swinters@vtmd.org), if you would be interested in working with us to present!**

*C: Merideth Plumpton, RN, Vermont Department of Health: That is fantastic, Stephanie.*

**Q: How are people talking about/understanding the rates which are rising in Vermont similar to prior spikes even when we have such a high vaccine rate? I know Delta is more contagious, but I am feeling a little...disheartened.**

*A: Wendy Davis, MD, VCHIP (verbally): One thing to keep in mind is that it is still quite a minuscule proportion because we have vaccinated so many individuals in Vermont. That is one way to talk about it as well as reinforcing the safety and efficacy of the vaccine.*

*A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: Hi Michelle, it is hard not feel a least a bit disheartened. I think this just speaks to Delta's ability to find unvaccinated populations. It is important to remember that breakthrough infections remain rare and when they do occur, protection from hospitalization/severe illness remains excellent.*

*A: Michelle Dorwart, MD, UVM Medical Center: Thanks, Ben!*

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: We are still the "safest" state in the nation. The vaccine works extremely well at preventing severe disease. Most disease is in people who are unvaccinated.*

*A: Michelle Dorwart, MD, UVM Medical Center: Thanks, Bill! Of course I am continuing to encourage vaccination, but every once in a while I feel a bit fatalistic about it! But, so thankful for Vermont and you all!*

**Q: When we are immunizing children in our office against COVID-19, there are sometimes extra doses that we discard, up until now. Given the concern about booster doses recently in the news, rather than throw away extra doses at the end of the day that we could not otherwise use, should we be offering a booster dose to our staff or ourselves? We have not done this yet but wondering if this is a better use of extra doses, rather than throwing them away.**

*A: Merideth Plumpton, RN, Vermont Department of Health: Hi Kristian, thank you for the thoughtful question. There has been a lot of media attention surrounding booster doses over the last few weeks. There is currently no recommendation from the FDA, CDC, ACIP or the Health Department for booster doses. CDC pointed out to us that the vaccine is being used under a EUA and if providers stray from the EUA recommendations they have increased liability if there is an issue. ACIP is meeting this Friday about booster doses for immunocompromised individuals. We hope to have more information after that meeting.*

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: We have discouraged off use of the vaccine, particularly when only under EAU. Vaccine waste remains a huge and unresolved topic (for me--and I am only speaking for myself here).*

*A: Merideth Plumpton, RN, Vermont Department of Health: That is feeling of many providers.*

*A: Kristan Outwater, MD, Brattleboro Primary Care, Pediatrics: Vaccine waste is a concern for me as well, and I know that I might be asking my question a month or two early, given how quickly things change with COVID-19! Thank you for your replies and clarifications!*

**Re: Judy K. Orton, MD, Green Mountain Pediatrics: Issue, at least locally in Bennington, with families seeking testing on their own is testing at the Rescue Squad goes to Broad Institute. PCP's do not get the results (which there currently is no work around). I understand they are going to do increased verbiage about families letting PCP's know if they test positive. I will continue to work with local school nurses on 2-way communication so if they find out about a positive, they will also reach out to the PCP. And even if you have access to VITL the results are not put into VITL (or at least timely) and you still need to know if a patient tested. So, if you don't know, you can't look it up.**

*C: Breana Holmes, MD, VCHIP (verbally): Ilisa Stahlberg took this up the chain and the contact tracers are now asking families of people who have COVID-19 to let their PCP know. The biggest challenge is the system's people think that the PCP can check VITL and based on a survey, that is not really child health. Many of you do not have access to VITL. We did create an email that physicians and others could email or call someone at the health department to ask about results on a patient. We have not been able to confirm if that email still has a human at the end of it. If anyone has that email, please email it to me. Ilisa and I will check on its accuracy.*

**Q: Off topic, but our office at Mt. Ascutney does NOT have the Pfizer vaccine still. Vaccine supplied by the state, at what point WOULD we get Pfizer?**

*A: Merideth Plumpton, RN, Vermont Department of Health (verbally): Mary, you would need to order it yourself. If it is something you want for your office, you would order it the way you would order any vaccine.*



**Re: Becca (Rebecca) Bell, MD, UVM Medical Center: Here is something I wrote about back to school that you may want to share with families, <https://rebeccabell-md.medium.com/going-back-to-school-during-delta-a262a9812b7f>**

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