

5/23/18 VT Immunization Advisory Committee

Phone attendees:

Deb Doyon, School Nurse, Caledonia County

Jennifer Gresham, AOE

Shayla Livingston, VDH

Clarence Davis, AHS

Christine Payne, MD

In person attendees:

Christine Finley, VDH

Karen Halverson, VDH

Paul Parker, MD, Richmond Pediatrics

Patsy Kelso, VDH

Review key findings of the 2018-19 Annual School Immunization Report and Child Care Report

<http://www.healthvermont.gov/disease-control/immunization/vaccination-coverage>

1. 2017 Annual Report
 - Any feedback on the report is welcome.
2. IMR data
 - Childhood coverage data at the county level (19-35 months).
 - EHR and VITL interface issues.
3. Child Care coverage
 - Coverage improvement, 93.1% compliant
 - Improvement noted in response and in coverage
4. Parent Educational brochure for Child Care Regulations
 - Purple pamphlet available online and for order
5. School coverage
 - Coverage improvement, K -12: 94.4% compliant
 - Kindergarten entry: 91.1% in 2017-18 from 85.8% in 2013-14
 - MMR coverage kindergarten: 94.1% in 2017-18 from 91.2% in 2013-14
6. Influenza
 - 20 school related outbreaks, no noted relationship to vaccine coverage levels
 - Coverage rates significantly higher among 6 months –4 years than 5 to 18 years.
 - 7. HPV coverage
 - 2014: 15 – 45 %
 - 2018: 30 – 60%
7. HPV coverage
 - Rates improving but significant difference between counties.
 - Franklin County had the lowest rate and a loss of pediatric providers. School based HPV clinics were held and supported by local providers. Clinics held at Missisquoi and Richford schools.

Discussion:

Coverage data:

Patsy: Coverage improvement noted in child care and school immunizations, but still room for improvement

Parent Ed for Religious Exemption:

Paul: What is the purpose of the educational material? Have we received feedback from parents about the content? Response: Feedback has been that the material needs to be more scientific, as well as contain more information on vaccine side effects.

Paul: Is there any systematic assessment of how material is perceived by parents? Has it changed minds? Like the way the measles outbreak at Disney has? Response: No local assessment, national level studies are occurring.

HPV rates:

Chris: Looking at the need in geographic areas smaller than the county level for school-based clinics.

Paul: Perceives school-based clinics as helpful, many kids access PCP for required sports physicals, but not otherwise. Clinic would be potentially beneficial.

Deb: Would love to see HPV clinic in her school. Lots of transient kids missing out.

Chris: Will follow up with Deb, Essex County is an area of concern.

Flu vaccine:

Chris: Inactive flu vaccine ordered for pediatric use. Flumist was not available at the time, so it was not ordered. FDA approval came two weeks later. Flumist effectiveness data is not expected until November. If efficacy looks good, will plan to order for the 2019-20 season.

Paul: While kids like Flumist, physicians will be hesitant to use it again due to disappointing efficacy history.

Access to health care:

Deb and Paul noted access to care not an issue.

Christine Payne: Access not an issue, but sometimes they run out of vaccine. Response: Chris will follow up with Katie Martinez to address issue, perhaps change ordering frequency.

Patsy: Vaccine supply should be addressed in Vaccinate VT.

Provider satisfaction

Chris: A provider satisfaction survey in collaboration with Harvard University will occur this summer. All are encouraged to complete the survey.