

Immunization Advisory Council

June 4, 2020

Attendees:

Christine Payne, MD Board of Medical Practice
Carol Hauke, RN School Nurse
Alicia Harrahan, AOE
Wendy Trafton, AHS Deputy Director Health Care Reform
Paul Parker, MD , Richmond Pediatrics
Karen Halverson, VDH
Amanda LaScala, VDH
Christine Finley, VDH

Review of 2019-20 school immunization rates

- K-12
 - The percentage of Vermont K-12 students receiving all required vaccines remains high, increasing from 94.5% last year to 95.1%. These are the highest coverage levels reported since K-12 data collection began in 2012. Coverage at individual schools varies widely.
 - The percentage of students provisionally admitted was 1.7%, a 0.6 percentage point decrease from last year. These students were not up to date on one or more required vaccines and did not have a signed exemption.
 - The percentage of K-12 students with a medical exemption remained stable at 0.2%. Religious exemptions decreased 0.1 percentage point, to 3.0%.
- Kindergarten
 - The percentage of Vermont public and independent kindergarten students receiving all required vaccines in the 2019-20 school year was 92.2%, an all-time high. This is an increase of 1.8% percentage points from last year, when coverage dropped slightly
 - 4.2% of kindergarteners were provisionally admitted (not up to date on all required vaccines and did not have a signed exemption), almost a full percentage point lower than last year. By first grade, provisional admission decreased to 1.8%. Research is showing that focusing on compliance with provisional admittance is having more of a positive impact on rates than exemptions.
 - The percentage of kindergarten students with a religious exemption decreased to 3.5%, down from 4.4% in 2018-19.

- Challenges remain in Lamoille county (83.2%), and Grand Isle (83.8%)
- The council asked what is underlying in Lamoille's rates. There are concerns about vaccine hesitancy in this community, limited access to primary care in parts of the county. The Department is working with school nurses, addressing provisional rates and partnering with AOE to ensure clear guidance is provided.
- All schools will receive their individual school rates next week, with a memo from Dr. Levine and Sec French. The information is posted on Health Department website.
- Kindergarten MMR
 - 94.5% of kindergarten students met the two-dose measles, mumps, and rubella (MMR) vaccination requirement. Measles outbreaks in the United States highlight the importance of maintaining high (93-95%) MMR vaccine coverage for herd immunity. Pockets of low coverage can make communities vulnerable to an outbreak.

Review Vermont data on vaccine doses administered in 2020, compared with 2019

- CDC reported a decrease in provider orders nationally. This is consistent with what we are seeing in Vermont. The Department reviewed Immunization Registry data and compared data for Feb-May 2019 to 2020.
 - Data indicated that the drops in vaccines administered were not as dramatic in the 0-36 months age group as provider efforts were targeted at this age group.
 - The 4-6 years old age group as well as 11-12 and 13-17 saw large drops in vaccine administered.
 - The Department will be conducting a survey to learn of any strategies that we can employ to help providers catch kids up for vaccines missed during the stay at home orders.
- What are providers hearing now?
 - CP: prioritized infants, starting to get older kids back in; fear from parents is starting to diminish,
 - PP: practice dependent, physician lead, saw all newborns through 2 years in the office, heard much variability among practices

Discuss ideas/planning for school-located vaccine clinics for flu, that could serve as a model for COVID vaccine clinics in the future. Discuss flu vaccination rates for children/teens.

CDC and the Department are concerned that having influenza disease and COVID occurring at the same time this Fall/Winter - potential to overwhelm the health care system

- The Department pre-booked pediatric and adult flu vaccine in February, but will receive additional doses from CDC to increase flu vaccination
- The Immunization Registry provided data on influenza vaccination rates (partial flu season)
 - 5-12 years old, 42.3%
 - 13-17 years old, 35.2%
- Chris and Amanda met with the AAP Board and were encouraged to work with local providers to consider offering school flu clinics
 - This past year, 4 practices partnered with schools to conduct school flu clinics
 - Others noted this may be very difficult to coordinate statewide
- Council feedback:
 - The Council suggested that the school is ideal place to vaccinate; school nurse is critical to success
 - CH: as part of freshman health talks about flu vaccine, education is important, they trust the school; barriers were consent forms
 - PP: varied reactions, some will not want their patients vaccinated elsewhere. If VDH takes it on, likely a better response. Increased rates will happen with VDH doing the clinics, but may impact providers bottom line
- The Department surveyed superintendents in January to solicit interest in school flu clinics
 - Every response was positive; many wanted “community” clinics where parents and children got vaccinated together PP: likes idea of community clinics but concerned about social distancing

The Department is actively working to develop a model that will work for families, provider practices and schools

- PP: Asked if we know if adult COVID adult vaccine would come out before the pediatric vaccine. The June ACIP agenda (6/24) will address COVID.

Comments/Issues from group

CH: school nurse sent letter to get well child visits and catch up on immunizations

Some states are considering changing school entry requirements for the coming school year. Vermont will maintain current requirements.

Ideas? We'd love to hear. Email us at ahs.vdhimmunizationprogram@vermont.gov