

TO: Vermont Health Care Providers and Health Care Facilities
DATE: January 11, 2024
FROM: Mark Levine, MD, Commissioner, Vermont Department of Health

Increased Patient Volumes in Emergency Departments Straining Vermont Health Care Systems

Respiratory viral activity and nirsevimab update

BACKGROUND

A surge of respiratory illness is straining health care systems across Vermont. To help reduce this burden, clinicians can encourage patients to remain up to date on vaccinations, test and treat for respiratory illnesses appropriately, and remind patients to avoid others when sick.

In Vermont, significantly increased activity of respiratory syncytial virus (RSV), along with co-circulation of influenza virus, rhinovirus, COVID-19, and other respiratory viruses, is causing a high incidence of respiratory illness. This surge of illness is straining health care systems across the region, causing bed shortages, staffing shortages, and long wait times for medical care. Long wait times in Emergency Departments have been attributed to high patient volumes in inpatient settings, both in hospital inpatient settings and in long-term care and behavioral health facility types.

REQUESTED ACTIONS

Providers and Healthcare Facilities

Primary Care Practices and Urgent Care Centers should consider communicating availability of office hours outside of normal business hours (extended hours and weekend hours for sick visits) to patients and provide information related to the types of injuries and illnesses appropriate for primary care or urgent care, as alternatives to an Emergency Department visit.

Long Term Care Facilities or Congregate Living Facilities who have access to in-house medical care should prioritize on-site medical care whenever available and indicated. If on-site care is not available, consider Primary Care Practices and then Urgent Care Centers before Emergency Department Level of Care.

Consider the use of Telehealth as a resource for patients who may be effectively seen in a virtual setting and when in-person options are not available or necessary. Telehealth may also be available for physician consult in some cases.

Vaccinations

All eligible Vermonters should stay up to date on respiratory syncytial virus (RSV), influenza and COVID-19 vaccinations.

- Everyone 6 months and older is recommended to receive an annual influenza vaccine.
- Everyone 6 months and older is recommended to receive the COVID-19 vaccine type and number of updated (2023–2024 Formula) COVID-19 vaccine doses based on age and vaccination history.
- Given the recent increase in nirsevimab supply and the manufacturers’ plan to release additional doses in January, CDC advises healthcare providers to return to recommendations put forward by CDC and the Advisory Committee on Immunization Practices (ACIP) on use of nirsevimab in young children. Infants and children recommended to receive nirsevimab should be immunized as quickly as possible. RSV activity remains elevated nationwide and is increasing in parts of the country.
 - All infants aged less than 8 months and children aged 8 through 19 months at increased risk of respiratory syncytial virus (RSV), are recommended to receive a single dose of nirsevimab.
 - Pregnant people 32 through 36 weeks gestation should receive RSV vaccination through January. Pfizer Abrysvo is the only vaccine recommended for use in pregnant people. Administration of both nirsevimab and RSV vaccination for pregnant people is not needed to protect most infants.

Non-Pharmaceutical Interventions

Staying home while sick, masking and other measures can help keep others safe.

- All persons with acute respiratory symptoms should stay home while ill, especially students and those who work in health care, child care or long-term care, even if they have tested negative for SARS-CoV-2 and other etiologies.
- All persons with respiratory symptoms should wear a mask and practice social distancing when around others.
- People may consider masking and social distancing when around young children or medically-vulnerable people.
- All persons should cover their mouth using a tissue or bent arm—not their hand—when they cough or sneeze and should wash their hands frequently throughout the day.
- Infants under the age of 6 months are most at risk for severe RSV disease. Families of young infants should be counseled to practice good hand hygiene. Types of contact that increase the risk of RSV transmission to infants include holding, kissing or touching the hands or face of an infant. These types of contact should be limited to essential caregivers as much as possible during RSV season.

To be removed from the HAN or have your information updated please email the Vermont HAN Coordinator at: vthan@vermont.gov.

HAN Message Type Definitions

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation; may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.

Info Service Message: Provides general correspondence from VDH, which is not necessarily considered to be of an emergent nature.