

Chair: Lydia (Mimi) Luther

Wednesday, Sept. 2, 2020 2- 4 PM

Via Zoom

Voting Members Attending: Mark Bajorek, Kim Bartholomew, Kate Blair, Corinna Brower, Donald Dodson, Richard Donovan, Matthew Green, Sasha Grenier, Ann Loeffler, Suzanne McClintick, Ann Occhi, Mark Siegel, Jamie Smith, Sara Sterns, Abbie Strom

Non-Voting Members Attending: Paul Cieslak, Stacy de Assis Matthews, Mimi Luther, Mallory Metzger, Collette Young

Welcome

Presentation on Oregon immunization data

2019-2020 school and children's facility immunization and exemption data

- 700,000 children in school/child care
- 3,600 programs where immunizations required
- 21,596 Exclusion orders sent (~3%)
- 3,268 Children excluded (~1 per 200 children)
- Non-med rate: 6.9% - slight decrease over previous year

Immunization data since COVID-19; ALERT IIS comparison 2019-2020

- Reduction in access to care
- Most providers limited access to routine care, but continued to see infants early in pandemic
- COVID effect: have immunizations decreased? ALERT IIS data for 2019 vs 2020 for Jan thru Aug each year for DTaP, MMR, Tdap and 1st dose HPV
 - Rates drop in March, April and May, while June rates are about even.
 - Rates for July and August are slightly lower.
- Strategies to address rate dip:
 - Provide early notification to families missing documentation of immunization or exemption.
 - Let families know where and how to get vaccines this year.

- Decrease the peak of immunization services this winter by spreading demand throughout the fall.
- Use school required vaccines as an opportunity to give all recommended vaccines—including influenza

Discussion:

- Was pharmacy data included in numbers? *Yes, and Pharms were one of closed businesses, so contributed to fewer shots.*
- Shots are down is the take-away message. *Yes, and will need help from all across the board to catch up.*

Discuss the immunization requirements for this school year

Introduction

Thanks to committee for their work. Immunization is crucial to controlling disease spread. Do not like to see progress lost due to current pandemic. Also, a lot of work needs to be done before we see COVID-19 vaccine, and even longer before see sufficient quantities to even consider as school requirement.

Distance learning: requirements and exclusion—what are your thoughts and concerns?

- Question about whether current requirements would hold if kids are not going to be on site. MESD has been entering records already for Mult Co schools.
- Questions about whether immunization requirements will be suspended for a time this year.
- PSU – off campus students not needing to fill measles requirement.
- Questions around would access to remote learning shut off if do not have shots.
- Would info be forthcoming about how to get imms.
- Consistent messaging needed for facilities and families.
- Work with families now so won't be excluded when schools are able to resume in person.
- SBHCs have limited hours, and availability to provide support.
- Parents not feeling pressure to get kids immunized now with them staying at home.
- Include early learning in messaging.
- Practice visits have dropped off, but well child visits have not.
- Will closure continue into February? Would exclusion day need to be pushed back?

Thoughts?

- Geographic differences in school opening timelines. Each district has to plan for a variety of scenarios.

- Limited in person learning happening across the state now.
- Consider risks of changing dates and resulting confusion. Consistent dates would be easier for parents, to keep things as stable as possible.
- Is there data on the number of students affected? Yes, could look at data between this year and last. Also, school information systems have data that could help shed light on picture.
- Encourage schools to do immunization data entry as soon as possible to stay on top as things change. Will also help show where need is greater, but not all districts have the same capacity to enter data.

What are you planning to do differently this school year regarding immunizations?

- Appreciate have robust tracking system in ALERT IIS. Will be pulling in different staff to assist this year, and they will be looking up records at home.
- School districts are encouraged to have virtual parents' night. Could that be an opportunity to interface with parents, and include preventative health information as well.
- Virtual learning sometimes expands interactions, and having material available would be helpful in spreading the information.
- Nurses are busier; most sites have some onsite staff so working on safety there and managing online work, too.
- While COVID is in the forefront, other diseases like chicken pox or pertussis are circulating.
- Be creative and innovative in looking at ways to address the gaps. Would counties have resources to do onsite clinics, for example? Recognize it's not always on the top of the list for districts. Think about how to support partners. Not a single answer; may need to do a variety of approaches to reach target populations.

How can we increase vaccination in the fall and early winter to reduce the impacts of exclusions on students and work on local public health and schools?

- Any information that schools can pass out to families. Avoid asking districts to create the messaging.
- Providers have capacity to see kids, but there may be a need to help with connecting patients to providers.
- Message that there will not be a change in immunization requirements and now's the time to get started.

- Any talk of drive-thru clinics for flu and other vaccines like Tdap? Yes, a couple of Multco practices are looking at doing them.
- Many families need a variety of services beyond immunization, so drive-thru may not be ideal for all.
- Find opportunities to connect with teachers to help pass the message.
- Reach out with ideas: Oregon.imm@dhsosha.state.or.us

Review the criteria used to make recommendations for school/children's facility/college immunization requirements.

This committee has developed a set of criteria for adding to school immunization requirements. (see below)

Would like to convene a workgroup to look at integrating equity into criteria. Volunteers?

What kind of timeline? *Sometime in the 6 months*

Richard Donovan, Ann Occhi, Donalda Dodson, Sasha Grenier, Corinna Brower volunteer.

Criteria for Reviewing Vaccines for Potential Inclusion in Oregon School/Facility/College Immunization Requirements

7/2018

ACIP CONSIDERATIONS FOR INCLUDING THE VACCINE ON THE RECOMMENDED **schedule**

1. What is the vaccine effectiveness as measured by immunogenicity and population-based prevention?
2. What is the safety profile for this vaccine?
3. How cost effective is the vaccine from a societal perspective?

Disease Burden

4. Does the vaccine prevent substantial morbidity and mortality? Considerations: 1. disparities in disease burden among groups such as group living, racial and ethnic disparities, and geographic variation. 2. potential to reduce the number of cases of disease, or the potential to prevent outbreaks.
5. How effective is the vaccine in reducing the risk of disease transmission? Consider transmission in a child care, school, or college setting and in the community at large.

Vaccine Coverage and Supply

6. What is the current vaccine coverage rate in the target population in Oregon? Consider the impact a mandate could have. If uptake and acceptance are very high, the requirement would have little impact, and if very low, the requirement would face a lot of resistance.
7. Is there a stable and adequate supply of vaccine?

Impacts to stakeholders

8. What additional funding would be needed to pay for the vaccine and administration? Consider the impact on public providers, local public health authorities, private providers, and the state.
9. What is the administrative burden on schools, children's facilities and colleges? Consider resources needed to update computer systems, collecting immunization records, and notifying parents.
10. What is the burden of compliance for parents/caregivers and students? Consider timing with other recommended vaccines, impact of exclusion on higher grades, and cost to families.