

MEETING TITLE: Vaccine Advisory Committee (VAC) Quarterly Meeting

DATE: July 20, 2015

LOCATION: Kent DOH Offices

Facilitator/Chair:

Kathy Lofy Washington State Department of Health

Members Attending:

Jenny Arnold
Holly Blanton
Jeff Duchin
John Dunn
Peggy Jo Eaton
Robin Fleming
Lisa Johnson
Mary Alison Koehnke
Amy Person
Charron Plumer
Tara Tumulty
Susan Westerlund
Rachel Wood

Representing:

Washington State Pharmacy Association
American Indian Health Commission of Washington
Public Health-Seattle & King County
Group Health Cooperative
American College of Physicians
Office of Superintendent of Public Instruction
Washington Academy of Family Physicians
Washington Association of Naturopathic Physicians
Washington State Association of Local Public Health Officials
Tacoma-Pierce County Health Department
National Association of Pediatric Nurse Practitioners
Washington Academy of Family Physicians
Washington State Association of Local Public Health Officials

On Phone:

Vikki Davis Washington State Association of Local Public Health Officials
Kristi Rice Washington Chapter American Academy of Pediatrics

Washington State Department of Health Staff:

Linda Barnhart Washington State Department of Health
Chas DeBolt Washington State Department of Health
Jan Hicks-Thomson Washington State Department of Health
Scott Lindquist Washington State Department of Health
Danny O'Neill Washington State Department of Health
Michele Roberts Washington State Department of Health

Guest:

Joey Eavey Washington State Department of Health
Trang Kuss Washington State Department of Health
Paul Throne Washington State Department of Health
Carrie Glover WithinReach

Recorder:
Vanessa Mojica

Washington State Department of Health

| Discussion and Recommendations | Input, Decisions and Follow-Up |
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| <p><u>Introductions, Welcome, and Changes to Agenda</u> <i>Michele Roberts/Kathy Lofy</i></p> <p><u>Introductions</u> Two new members – this makes all seats on the committee full.</p> <ul style="list-style-type: none"> ➤ Holly Blanton, RN, representing the American Indian Health Commission of Washington <ul style="list-style-type: none"> ○ Clinic Manager and triage nurse, Port Gamble S’Klallam Tribe ○ Has worked as a nurse practitioner since 1984 ○ Has done work with communicable diseases, HIV/AIDS, TB, and immunizations ➤ Charron Plumer, RN, representing the Washington State Association of Local Public Health Officials <ul style="list-style-type: none"> ○ Program Manager in Communicable Disease Control division of the Tacoma-Pierce County Health Department ○ Has worked as a nurse practitioner since 1989 ○ Manages Public Health Nurse Consultants and the Vaccines for Children Program at TPCHD <p><u>Guests</u></p> <ul style="list-style-type: none"> • Ann Butler, Immunization Health Promotion Supervisor (DOH) • Joey Eavey, Assessment Coordinator (DOH) • Carrie Glover, Senior Policy Manager (WithinReach) • Barry Iverson, Flu Coordinator (DOH) • Trang Kuss, Public Health Nurse Consultant (DOH) • Paul Throne, Health Promotion Manager (DOH) | <p>All welcomed and new members introduced</p> |
| <p><u>Conflict of Interest Declaration</u> <i>Danny O’Neill</i></p> | <p>None Declared</p> |

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| <p>Updates/Request <i>Michele Roberts and Kathy Lofy</i></p> <p>Program Updates</p> <p>II. Updates</p> <ul style="list-style-type: none"> • Program Updates <ul style="list-style-type: none"> ○ See written handouts • Update on Child Profile and IIS Transition <ul style="list-style-type: none"> ○ Transition complete as of 07/01 ○ Team building is continuing for IIS and IT work ○ Child Profile team is complete ○ Help Desk transitioned to STC. We've hit a few stumbling blocks but working through them to improve the process. • Center for Public Affairs <ul style="list-style-type: none"> ○ The Center for Public Affairs is a newly formed part of the department, combining policy, communications and partnerships. The pilot project for this new center is to develop recommendations to the agency Executive Team that address immunization compliance and reporting. While this is work that is already happening in our office, we felt this was a great opportunity to give help continue to identify what things the department could do to improve the out of compliance problem. We will discuss the proposed recommendations today, and follow up with our immunizations partners after all feedback has been submitted and the Executive Team determines which recommendation(s) to implement. • Legislative and Budget Updates <ul style="list-style-type: none"> ○ Vaccines for children in the Child Health Program (part of Apple Health) were funded at \$2.3 million; that keeps the universal Childhood Vaccine Program whole. This was a successful effort because these funds were in the house, senate and governor's budgets. ○ SB5143: This bill, requiring the Department of Health to provide education about immunization to expectant parents, was passed out of the Senate and was voted out of House Health and Wellness Committee. This bill did not require anything new to be done by the department, and did not receive a floor vote. ○ HB2009: A bill to change Washington's exemption law to | <p>Two VAC members discussed ESSB 5557. Some of the benefits discussed included additional access to vaccines and the likely increase in immunization rates that Washington may see as a result of the passage of the bill</p> <p>There was a brief discussion about the use and timing of immunoglobulin in high risk persons exposed to measles. ACIP recommends administration of immunoglobulin within six days but allows permissive use after.</p> <p>Two VAC members discussed whether ACIP recommends a Tdap booster for adults that are in close contact with infants. There is a question of cost-effectiveness for this vaccine due to the short duration of immunity achieved.</p> |

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| <p>remove the personal belief exemption. This bill did not pass out of the House, and the department is working with internal workgroups, stakeholders and legislators over the interim to determine the best options for increasing immunization rates.</p> <ul style="list-style-type: none"> ○ ESSB 5557: This bill requires that pharmacists be reimbursed by health care plans for services rendered that address the ten core functions of health care, which includes vaccinations as a preventative measure. This bill was voted out of the Senate and House committees after amendments addressing the core functions for which reimbursement is required. Both the House and Senate voted to approve the bill, and Governor Inslee signed the bill on May 11, 2015. ● Adult vaccines – We are working to use the available 317 funding for vaccine for vaccines for adults that are insured or underinsured. See program updates for more details. ● Immunize Washington Update This program recognizes provider clinics that reach immunization rates above 70%. 42 clinics so far have received this recognition. <p><u>Communicable Disease Epidemiology Update</u> <i>Chas DeBolt</i></p> <ul style="list-style-type: none"> ● Measles - 5-case community outbreak in Clallam County <ul style="list-style-type: none"> ○ Cases were contagious late January to early March ○ During the outbreak the woman who later died was identified as a potentially exposed contact ○ Had been present at a health care facility 7 days earlier at a time when a contagious measles case was also present ○ One death, in Clallam county ● Pertussis - 21 cases hospitalized <ul style="list-style-type: none"> ○ 11 (52%) hospitalizations in infants <1 year old ○ 8 (73%) hospitalizations in infants <4 months old ○ 5 (24%) required ICU admission ○ 17 cases diagnosed with pneumonia ○ 3 in infants <1 year old ○ No deaths | |

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| <p>Chas provided updates on current outbreak information, including detection and containment efforts.</p> <p><u>Vaccine Update</u> <i>Jan Hicks-Thomson, Kathy Lofy</i></p> <ul style="list-style-type: none"> • 9vHPV Roll-out Update • Meningococcal B - Discussion and Adoption • The most current MMWR has not yet been published. VAC will vote on meningococcal and influenza recommendations by email when the ACIP recommendations are published. <p><u>Flu Update</u> <i>Ann Butler Barry Iverson Jan Hicks-Thomson and Kathy Lofy</i></p> <ul style="list-style-type: none"> • Flu Communication Outreach • Flu vaccine supply • Review Updated Recommendations • Clinical Guidance <p>Decision Point – 2015-16 Flu Clinical Guidance</p> <ul style="list-style-type: none"> • LAIV preference • High Dose • Discussion and adoption <p>Should ACIP recommendations be accepted as written? What else should be considered?</p> | <p>There was a discussion about the previous preferential recommendation for FluMist, a vaccine administered by nasal spray. Members discussed the ineffectiveness of FluMist and what may have made it less effective, including environmental factors like storage temperatures. Members also discussed the possibility of providing information for high-dose flu vaccine for seniors, which was tabled until the ACIP recommendations are published. Once published, the VAC members will vote on these vaccine recommendations. Staff training for health care providers and vaccine supply ordering were also discussed in relation to the timing of the recommendation.</p> |

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| <p><u>School Immunization Data Update</u> <i>Joey Eavey and Trang Kuss</i></p> <ul style="list-style-type: none"> • Out-of-compliance data and school reporting Joey Eavey presented the newly released 2014-2015 school data and discussed trends in immunization coverage. See <i>presentation</i>. <p><u>School Immunization Policy Discussion</u> <i>Carrie Glover and Michele Roberts</i></p> <p>Carrie gave an update on stakeholder workgroup, led by Representative Robinson, looking at school immunization policy options.</p> <p><u>Center for Public Affairs Recommendation</u></p> <p>Recommendations on improving out-of-compliance and exemptions were provided prior to the meeting and VAC members have until July 24th to submit their comments on the proposals. (Discussion)</p> <p>Michele discussed the Center for Public Affairs and share and get input on possible strategies for addressing vaccine coverage in school-aged children.</p> <ul style="list-style-type: none"> ○ We are working to better understand the actual rates of students out of compliance. DOH is also at the table on a body of work with exemptions. The Center for Public Affairs is working with stakeholder groups in preparation for a mid-August presentation to the Secretary of Health. Work has focused their efforts on five key areas: Funding and promoting use of the School Module for the IIS, requiring medically verified immunization records, cleaning up the existing immunization data, developing and promoting model policies for school administrators, and developing a | <p><u>School Data:</u> A VAC member asked about reasons for out of compliance with immunization requirements. The Department of Health is aware of two counties that reviewed their rates and found that most students had been vaccinated, but lacked proper documentation. This past school year, Spokane School District required schools to make sure their students were in compliance and approximately 50% of students who were noted as out of compliance lacked documentation of immunizations. VAC members were in agreement that improving out of compliance rates would more easily help schools during an outbreak.</p> <p>Questions were asked about poverty data and access. DOH noted that Kindergarten and poverty data indicated no significant correlation. Lack of access may be an issue.</p> <p>DOH also noted private school coverage is lower, but there are more students out of compliance in public schools than in private schools.</p> <p>VAC members discussed the school immunization policy options and the 2015 legislative session with HB 2009. It was noted this was a bipartisan bill, but never made it to floor for vote. In 2016, the bill could be reintroduced. Some ideas were</p> |

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| <p>comprehensive health partnership with OSPI and DEL. VAC members have been provided with the five initial proposals and have until July 24th to provide their written feedback.</p> | <p>presented by VAC members for addressing exemptions and not all VAC members agreed with all strategies:</p> <ul style="list-style-type: none"> • Limit duration of all exemptions to 3 years k,3,6,9 (grades) • Valid medical exemptions only for measles • Enforce childcare and school requirements • Publicize rates on the school websites • Provide training for schools and childcare to validate childhood compliance • Renew personal exemptions every two years • Renew philosophical exemptions every year so a health care provider can have the discussion every year. • Consider reimbursement issues if exemptions need to be renewed every year. • Support statewide use of the IIS School Module to help identify school children who are out of compliance or exempt. <p>A VAC member noted that states that eliminated the philosophical exemptions are Mississippi and West Virginia. They have higher coverage rates; California and Vermont have also recently voted to eliminate philosophical exemptions and are hoping to see the same results.</p> |

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| <u>Public Comment</u> | No comments |
| <u>Meeting Quality Improvement</u> | Members reported a good discussion, great organization, maybe too much detail on the programmatic updates, and difficulty hearing presenters and questions. |
| <i><u>Next meeting: October 15, 2015 at SeaTac Conference Center From 11:00-2:00 PM</u></i> | |