

Legislative Session Update:

Our funding request for improving public health reporting in schools made it into the final state budget. This funding invests in an immunization validation tool in the State's Immunization Information System (IIS) and rolls out this IIS School Module statewide. The immunization validation tool is an IIS interface that will electronically determine if a child meets all immunization requirements for school entry using data from the child's immunization records. The School Module, a tool within the IIS, will allow schools to easily and accurately determine whether a student is in compliance with school immunization requirements.

Senate Bill 5143 passed during the legislative session. The bill directs the department to make resources available to expectant parents about childhood immunizations. This is part of our regular work with parents.

State Board of Health (SBOH) Update:

- The SBOH met in March and voted to accept the Technical Advisory Group's (TAG) recommendation to not require meningococcal conjugate vaccine as a school requirement. The board also voted to reconsider the TAG criteria for inclusion of vaccines required for school and child care entry.
- Board members at the March meeting voted on petitions submitted by school nurses to change the current WAC on conditional status to the way it was written in 2009. The prior rule required students to start a series of vaccinations before entering school. After 2009, the Board revised the rule to accommodate military students and allowed 30 days after enrollment to start their immunization series. This change applied to all students except those met the homeless definition. The Board denied the petitions to change the WAC at this time and voted to establish a stakeholder workgroup to further examine the issue.
- The Board granted authority to the department to proceed with updating the WAC to point to the 2016 ACIP immunization schedule. Currently the WAC points to the 2013 schedule.
- Michele had an opportunity to give an overview of immunization activities to board members in April. She shared general information about our work to improve immunization rates over the lifespan. She also gave an update on the 2015-16 school immunization data and the School Module.

General Vaccine Supply Update:

Pentacel Shortage:

We expect the Pentacel vaccine shortage to continue through June. Our allocation is about 70% of the usual up-take for the vaccine. Sufficient single antigen and alternate combination vaccines are available, and providers should continue to vaccinate children based on the ACIP schedule. Provider vaccine ordering reflects that providers have made adjustments to their vaccine orders, primarily replacing Pentacel with Pediarix.

- **Childhood Flu Vaccine Selected for the 2016-2017 Season:**

We finalized our childhood flu vaccine pre-book with the CDC for the 2016 – 2017 flu season. We pre-booked about 16% more vaccine for 2016 – 2017 than providers ordered in 2015 – 2016. The Childhood Vaccine Program will provide the following products for the 2016 – 2017 season:

- Fluzone Pediatric, Quadrivalent .25mL preservative free prefilled syringe
 - children 6 through 35 months of age
- Fluzone Quadrivalent 5mL multi-dose vial
 - children and adolescents 3 through 18 years of age
- FluMist Quadrivalent single dose sprayer
 - children and adolescents 2 through 18 years of age
- Fluarix Quadrivalent, .5mL preservative free single dose syringe
 - Prioritize for pregnant adolescents

Provider Vaccine Choice:

Twice a year we give providers the opportunity to change the vaccine brands they use in their practices. The April Vaccine Choice process is open April 15 through May 6. Providers who want to change their vaccine products should contact us for help doing so. The next vaccine choice period will be in October.

Online Vaccine Incident Reporting and Returns:

Within the next few months we will move from a paper process for reporting of vaccine incidents and returns to online reporting in the IIS. This process will reduce the paper and faxing used during the return process. It gives an e-mail option for the receipt of return labels, streamlining that process and making it much faster than the current snail mail process. It reduces the amount of data entry state staff do to meet CDC reporting requirements by allowing us to upload files created in the IIS. We want to start the new process with most LHJs by July 1, 2016. This will reduce the workload associated with flu vaccine returns.

New IIS Tools to Save Time for Providers:

In the next several months, we will introduce new tools that support provider vaccine ordering in the IIS. The tools will autofill some data fields providers must enter before they place an order. The data includes vaccine used in the prior month, and inventory on hand. CDC requires the inventory data be submitted to their system with each order. A second tool calculates a recommended order quantity for providers. This tool takes some of the guess work out of determining how much vaccine to order. It will reduce over and under ordering. Both these tools support best practices in vaccine order management.

CDC Immunization Champion Award

The Department of Health, Office of Immunization and Child Profile and the Immunization Action Coalition of Washington (IACW) are pleased to announce our selections for the **2016 CDC and IACW Immunization Awards**. This year, CDC is honoring Dr. John Dunn as CDC Childhood Immunization Champion! In addition to working three days per week as a pediatrician, Dr. Dunn also serves on the Washington Vaccine Association, the Vaccine Advisory Committee, the Vax Northwest Oversight Committee, and chairs the Immunization Program at Group Health. He is a recognized local expert on vaccines and conducts research on vaccine hesitancy through Vax Northwest and Group Health

Research Institute. Dr. Dunn has been instrumental in conveying the need to think differently about immunization conversations through empathy and trust-building.

2016 Immunize Washington Awards

Immunize Washington is a partnership between public health, health plans and other organizations, to recognize providers for outstanding immunization coverage rates for children and adolescents.

There are two award levels:

- Gold for providers who have coverage rates of 80% and higher
- Silver for providers who have coverage rates of 70-79%

This is the second year of the award. This year, the number of nominations tripled and the number of award winners doubled. 138 providers qualified for the award. In addition, 60 providers qualified but did not nominate themselves.

Immunize Washington awardees receive a certificate signed by the Governor, Secretary of Health, and Director of Health Care Authority. They also receive a window cling that they can proudly display on their door or window, showing that they are high immunizing provider.

Training and Conference Opportunities

- **National Adult and Influenza Immunization Summit**

The annual meeting of the National Adult and Influenza Immunization Summit (NAIS) will be held in Atlanta, Georgia on May 10–12, 2016.

<http://www.izsummitpartners.org/summit/2016-naais/>

- **The National Conference on Immunization Coalitions and Partnerships**

The National Conference on Immunization Coalitions and Partnerships (NCICP), formerly the National Conference on Immunization and Health Coalitions, is a gathering of coalition leaders, staff and board members; public health workers and experts; and community advocates. The conference occurs every two years. The 12th National Conference will be held in Indianapolis, IN on May 25-27, 2016. <http://healthcoalitionsconference.org/details/>

IIS and Child Profile Transition Update:

- We're now receiving death data from the Center for Health Statistics on a weekly basis instead of monthly. The increased frequency allows us to update the IIS more often and turn off Child Profile Health Promotion mailings for parents of children who have passed away in a more timely way than ever before.

Health Promotion Update:

- We released our first annual Washington Immunization Scorecard in March. The Scorecard is included in this packet. The Scorecard presents selected immunization measures with comparisons to prior year data and state goals. It is intended to provide key stakeholders like legislators, agency executives, partners and the public with a snapshot of Washington's immunization performance. Immunization measures and data sets were determined by clinical and data specialists at OICP and will remain stable from year to year. A section for "hot topics" at the top of the second page will be updated with current issues of importance at the time of each annual Scorecard's publication.

- This spring, we plan to release our first annual Kindergarten Report Cards to schools across the state. A sample report card is included in this packet. We post kindergarten immunization data each school year to our website. To further emphasize the importance of kindergarten immunization, we are reaching out to elementary school administrators with school-specific data in the form of a report card. The report card will show how well a school is doing for overall vaccine coverage, individual coverage, and in comparison to Washington state average coverage. We plan on sending the report cards during the week of May 2nd. Along with the report card, we are including resources and action steps to help schools increase their coverage rates.

Consumer Access

- Consumer access to immunization records via MyIR is proving to be a popular service. About 860 people have registered to view their own and their family's records through a secure portal that receives these data from the IIS.
- A MyIR ad campaign launched on March 21 in the Seattle metro area. Consumers now have the option to self-authenticate themselves and register for MyIR without needing approval from a healthcare provider or our office. The ad campaign highlights this new registration option and also promotes MyIR to parents of kids starting kindergarten. The campaign will run through May 2016.

HPV Grant Update:

Staff continue to work with partners to educate providers and the public about the importance of HPV immunization as cancer prevention. On-going health promotion includes social media for cervical cancer awareness month (January), expanding Immunity Community to Spokane, community screenings of *Someone You Love*, HPV awareness and prevention campaign targeting HIV positive and negative young gay and bisexual men and transgender persons, and work with the AIHC to create tribally-driven health promotion materials. We will also continue to offer provider training webinars through spring 2017. The HPV task force will meet quarterly in 2016. Task Force members continue to value the opportunity to both learn and network.

Hepatitis Awareness Month May 2016

A social media campaign with weekly twitter and Facebook messages will run each week in May. The goal of the campaign is to increase awareness of hepatitis B vaccination and testing for pregnant women, babies, school age kids, expectant parents and all citizens of Washington with engaging photos, videos, facts and web resources that promote online discussion.