



## Nebraska Immunization Advisory Committee

Tuesday, June 4, 2019

8:30am until 11am

Staybridge Suites Lincoln I-80

2701 Fletcher Ave

Lincoln, NE 68504

### Final Minutes

*Please note quorum was not met at this meeting. No voting or decision-making was conducted.*

- At approximately 8:30am, Sara Morgan, DHHS Administrator II, offered a welcome statement to persons in attendance.
- Looking through the current NIAC membership list, a question was asked if Wendy Rau from the Nebraska School Nurses Association was still an active member. We will need to check with her regarding continued participation.
- Persons present indicated 20 or less committee members was a good size. It might be beneficial to amend the charter in order to reflect the size/makeup of membership. This would include adding diversity, and perhaps adding a school representative from Omaha. It would also be good to draw more attention to NIAC meetings, so more members can be physically present = quorum made.
- Sara Morgan offered some information to those present, including an introduction to Jeri Weberg-Bryce, who is the new DHHS Program Manager II for the Immunization Program. Unfortunately, Jeri was not able attend today, but will be present for the next meeting.
  - AFIIX practice utilized for site visits is being replaced by IQIP (Immunization Quality Improvement for Providers) starting July 1, 2019. Training for coordinators will be held at CDC in August 2019. All changes will be communicated with enrolled clinics. The main differences between AFIIX and IQIP are:
    - Cohorts are 2 year-olds and 13 year-olds, instead of 2 years old and 13 to 17 year-olds.
    - Emphasis on improving clinic practice to increase immunizations, instead of rates.
    - Follow-up is one year later.
  - The DHHS Immunization Program is now operating on a new grant period, which aligns with the state fiscal year. The shift in the grant period is expected to allow CDC to issue funds in one award, as opposed to incremental awards.

This will be beneficial not only for subawardees, but the state as well. 2019 awards will be non-competitive, and 2020 are to be competitive. A question was posed regarding adult funding; which can be tricky due to budgeting/etc. All subawardees are welcome to give Sara Morgan feedback.

- There have been some changes with DHHS Procurement Services that may have trickled down.
- Lynn Jones, Community Health Nurse Senior and VFC Coordinator for the DHHS Immunization Program, offered some information regarding 2019 provider re-enrollments. The re-enrollment period was held during February and March 2019, and again was completed in NESIIS. Currently, the VFC Program has 281 providers, and it typically stays around that number.
  - DHHS Community Health Nurse Senior, Shelley Konopasek, retired last month. Her position will be filled, but the nurse will be Lincoln based instead of Verdigre.
  - Compliance site visits are conducted once every 2 years. If a clinic needs extra assistance, visits may be conducted more often.
  - The updated Nebraska Immunization Program Provider Manual is currently in review, and will be available within the next few weeks.
  - The 16<sup>th</sup> Annual Immunize Nebraska Seminar was held at Creighton University on May 24, 2019. Dr. Raymond Strikas, Medical Officer for the CDC Immunization Services Division, was a keynote speaker. He touched base on vaccination rates for Nebraska. According to 2017 NIS (National Immunization Surveys) data, vaccine coverage for 19 to 35 mo. for the Combined Series (DTaP, Hep B, Hib, MMR, PCV 13, Polio, Varicella) the United States was 70.4%, and Nebraska 77.9%. 2017 NIS Teen Survey rates for Tdap in the United States was 88.7%, and Nebraska 92.3%. First dose HPV was 65.5% in the United States, and Nebraska 71%. Up-to-date, the United States was 48.6%, and Nebraska 58.3%. First dose Meningococcal Conjugate was 85.1% for the United States, and Nebraska 84.8%. Second dose was not available.
  - The 2016 Nebraska Behavioral Risk Factor Surveillance Survey looked at adult data. There were no comparisons, but Nebraska Pneumococcal vaccination rate for ages 65 and older was 75.9%.
  - Since the introduction of HPV vaccines (4 and 9 types), there has been a significant decrease in the covered strains infection rates. The prevalence of vaccine types decreased by 40% in women who were not vaccinated, which implies a 'herd' immunity.

- Shingrix is expected to be in short supply throughout 2019. GSK has increased production.
- A new mobile app was announced, PneumoRecs VaxAdvisor, in which providers can check pneumococcal vaccination recommendations, and eliminate the challenge of interpreting and synthesizing multiple vaccination recommendation statements:  
<https://www.cdc.gov/vaccines/vpd/pneumo/hcp/pneumoapp.html>
- CDC will be publishing a new version of the Pink Book in December 2019. They also offer a webinar series. Find more information here:  
<https://www.cdc.gov/vaccines/ed/webinar-epv/index.html>
- The Advisory Committee on Immunization Practices will be meeting on June 26 and June 27, 2019, to discuss new data and possible changes regarding vaccine recommendations. Registration is not necessary to listen to the meeting via phone or watch via the live meeting: <https://www.cdc.gov/vaccines/acip/meetings/index.html>
- Sean O’Leary, MD, was another keynote speaker at the Immunize Nebraska Seminar. He spoke on strategies for dealing with vaccine hesitant parents. The percentage of refusing all vaccines was only 1.3%. In 2008, those who utilized an alternative schedule was 54%. He mentioned there’s an increasing frequency to spread-out vaccines. Nebraska has a low rate of non-medical exemptions, 1.5% for kindergarten vaccination rates. Regarding vaccine communication, it should focus on developing interventions on how people actually think, rather than how they ought to think. He also spoke about the costs of vaccine hesitancy with increased levels of under vaccination; which contributes to outbreaks of preventable diseases. Another cost is the increased pain and trauma for a child. 84% of physicians feel it’s harder for children when they are repeatedly brought back to the office, rather than being administered multiple vaccinations at once.
  - A technique that can be utilized when speaking with parents involves using the presumptive approach, as opposed to a participatory one. This is not a new idea, but possibly works because it takes pressure off and normalizes. A study from the 1990’s suggested that university students were more likely to receive an Influenza vaccination if they were told that most students had also received one.
  - Motivational interviewing can be a technique for providers to help elicit change using the principles of autonomy, empathy, debunking the myth without reinforcing it, and turning the focus from side effects to the disease.

- Dr. Meera Varman gave a presentation regarding implementation strategies to improve vaccination. She mentioned using NESIIS as a tool to look at vaccine records, the 'plan-do-study-act' cycle, and having a vaccine champion in your office.
- Catherine Heck, Omaha Public Schools Health Services Director, spoke on Nebraska School Immunization mandates.
- Dr. Raymond Strikas offered a second session on vaccine administration. He spoke about any preventable event that may cause or lead to inappropriate use or patient harm. Such events may be related to professional practice and immunization products. He touched base on VAERS and some of the errors: inappropriate schedule, storage, incorrect dosage, wrong vaccine, and best practices for improvement.
- Blake Hendrickson, DHHS Epidemiology Surveillance Coordinator, also spoke at the Immunize Nebraska Seminar about vaccine preventable diseases and outbreaks in Nebraska.
- This informal meeting then led to general discussion. Myra Stoney, Director for the Southwest Nebraska Health Department, mentioned one of her staff members recently listened to a podcast regarding Measles. More information regarding the podcasts can be found here: Vaccines Part 1: [https://podcast.app/vaccines-part-lets-hear-it-for-maurice-e59272847/?utm\\_source=ios&utm\\_medium=share](https://podcast.app/vaccines-part-lets-hear-it-for-maurice-e59272847/?utm_source=ios&utm_medium=share). Vaccines Part 2: [https://podcast.app/vaccines-part-have-you-thanked-your-immune-system-lately-e59870154/?utm\\_source=ios&utm\\_medium=share](https://podcast.app/vaccines-part-have-you-thanked-your-immune-system-lately-e59870154/?utm_source=ios&utm_medium=share). Measles: [https://podcast.app/measles-the-worst-souvenir-e53481207/?utm\\_source=ios&utm\\_medium=share](https://podcast.app/measles-the-worst-souvenir-e53481207/?utm_source=ios&utm_medium=share)
  - Tiffany Hansen, Director for the Dakota County Health Department, is periodically in touch with a school priest who is pro-vaccination. It might be worthwhile to reach out and see about him spreading advocacy.
  - Barb Martinez, RN for LLCHD is offering school-based vaccinations at two LPS elementary schools on their 'Back-to-School Nights'. This will also be offered at select middle schools during their 'Curriculum Night'. The health department will also be extending their hours.
  - Myra Stoney mentioned they offer school-based clinics off site after school.
  - Dr. Heather Christianson with Complete Children's Health posed the question if there's been any kick-back from PCP's if kiddos are not going in for regular check-ups?
- Individuals sitting in the general public section were given an opportunity to speak.
  - Merck & Co., Inc. has a meeting this month. A question was posed if HPV could be offered to AIP? Could it be covered? The answer is it's harder to

obtain and is a pricey vaccine. Is there any HPV-related data DHHS has that could be shared? Yes, there is Nebraska level HPV data. Additionally, Michelle Hood with DHHS was looking at HPV immunization impact on cancer rates; but is no longer with the DHHS NESIIS Team. This project could resume once her replacement is hired and the team is at full capacity.

- The DHHS Every Woman Matters Program receives data whenever pre-cancerous breast and cervical lesions are found. This program helps eligible women 40 to 74 years old to receive preventative screening. Find more information here: <http://dhhs.ne.gov/Pages/Every-Woman-Matters.aspx>
- Galaxosmithkline Consumer Healthcare mentioned ACIP has a packed agenda and registration is full. Would be worthwhile to watch the public comment. We need people to be brave and pro-vaccine. There have been 3 outbreaks of Men B. It was suggested a good time for this committee to meet would be after ACIP meetings. Are we preparing for potential outbreaks? The answer is DHHS has an ongoing maintenance plan that involves the Public Health Preparedness and Emergency Response team and local channels. Myra Stoney mentioned from a local health department standpoint, they conduct practice drills, and have found practicing in conjunction with flu shot clinics is helpful. She also relayed some information regarding a child that was suspected of having Measles, and was advised to stay at home. Unfortunately, they did not and possibly exposed 236 people. Thankfully, the child did not have measles- but it might be good to work on quarantine and isolation protocol in these instances.
- Tiffany Hansen mentioned they are well versed in quarantine and isolation. They also offer handouts and have individuals available who speak other languages than English. They practice all hazards planning, and her staff have a clear understanding of protocol. It was mentioned if the handouts Tiffany provides could be disseminated to other organizations?
- Michelle Isaacson, BSN, RN, CPN with Children's Physicians, mentioned Iowa has had a large amount of anti-vaccination activity lately. Think about AAP and AFP. Iowa has an upcoming conference that's held every 2 years.
- It was mentioned that it would be great to strengthen our partner network.
- Dr. Heather Christianson mentioned the HPV commercials now airing on television are impactful. It would be nice if the CDC would consider airing a commercial. It was stated they tend to provide training to state employees to disseminate down, instead of offering a national message.

- Barb Martinez mentioned that if a vaccination is given; to praise the parent, provide more education regarding the disease they are preventing, and let them know they are also protecting the public.
- There was a short discussion regarding posters/signage displayed in areas of public viewing (clinics, health departments, etc.) and the benefits they may offer to alert, educate, or inform.
- Galaxosmithkline Consumer Health mentioned EverThrive Illinois, who works to improve the health of women, children, and families over the lifespan: <http://www.everthriveil.org/>
- Pharmaceutical representatives asked if there is anything they could assist with in the field? A question was posed if posters, signage, or tools might be available that are not otherwise advertised on their website. It was mentioned that the IAC has a lot of supplies.
- Galaxosmithkline Consumer Health mentioned that the flu season has arrived in Australia. Information from the Immunisation Coalition may be found here: <https://www.immunisationcoalition.org.au/news-media/immunisation-coalition-position-statements/>
- 2019 Influenza Statistics from the Immunisation Coalition: <https://www.immunisationcoalition.org.au/news-media/2019-influenza-statistics/>
- For those wishing to purchase data loggers, please visit Control Solutions, Inc.'s website: <http://www.vfcdataloggers.com/>
- The discussion then moved to Millennials and how they can be reached in this digital age. Tiffany Hansen mentioned she has a small focus group consisting of 15 to 17 year olds. The health department has an Instagram page and posts monthly. They mention if their page is followed, they will then follow that individual back. Snapchat is also a highly-used platform, and filters may be purchased that are not expensive. What other platforms can we utilize to educate? YouTube was suggested. A 'selfie station' was also suggested that could be easily constructed so a patient could easily snap (Snapchat) that they got vaccinated before leaving a clinic. What about creating more apps that could easily downloaded to devices. Bexsero offers a text reminder service: <https://www.bexsero.com/sms/index.html>
- We need to cater to Millennials and meet them where they are. This meeting concluded at 11am with the indication this last topic would warrant further discussion.

-SRB