

VACCINES FOR CHILDREN

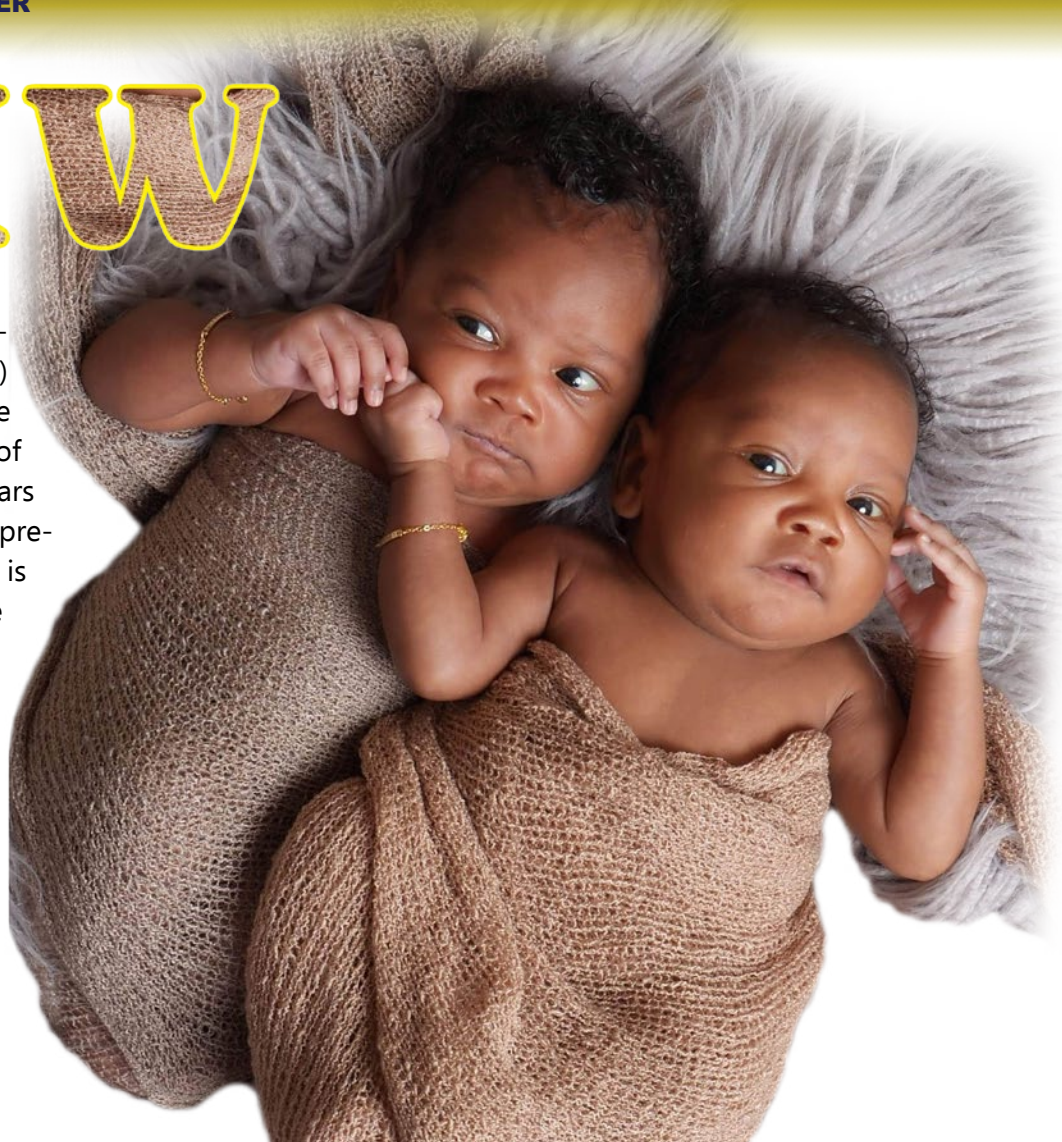


Dallas County
Health and Human Services

SPRING 2020 - NEWSLETTER

NIIW

National Infant Immunization Week (NIIW) is a yearly observance highlighting the importance of protecting children two years and younger from vaccine-preventable diseases (VPDs). It is also a time to showcase the achievements of immunization programs and their partners in promoting healthy communities. For over 25 years, hundreds of communities across the U.S. have joined forces to highlight the critical role vaccination plays in protecting our children, communities, and the nation's public health.



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VACCINES FOR CHILDREN



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Safe families, healthy lives.
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SPRING 2020 - NEWSLETTER

Maintaining Childhood Immunizations During COVID-19 Pandemic

The COVID-19 pandemic is changing rapidly and continues to affect communities across the United States differently. Some of the strategies used to lower the spread of disease in communities include postponing or cancelling non-urgent elective procedures and using telemedicine instead of face-to-face encounters for routine medical visits.

Ensuring the delivery of newborn and well-child care, including childhood immunization, requires different strategies. Healthcare providers in communities affected by COVID-19 are using strategies to separate well visits from sick visits. Examples include:

- Scheduling well visits in the morning and sick visits in the afternoon.
- Separating patients spatially, such as by placing patients with sick visits in different areas of the clinic or another location from patients with well visits.
- Collaborating with providers in the community to identify separate locations for holding well visits for children.

Because of personal, practice, or community circumstances related to COVID-19, some providers may not be able to provide well-child visits, including provision of immunizations, for all patients in their practice. If a practice can provide only limited well-child visits, healthcare providers are encouraged to prioritize newborn care and vaccination of infants and young children (through 24 months of age) when possible. CDC is monitoring the situation and will continue to provide guidance.

ImmTrac2 Updates Coming in April 2020

The "Related Links" tab in ImmTrac2 (see below) will be changed to point to our User Training webpage, allowing us more easily updated training information.



A link to the Vaccine Adverse Event Report System (VAERS) will be added to the ImmTrac2 application home page. VAERS (<https://vaers.hhs.gov/>) is the website used to report adverse reactions to vaccinations.

GUIDANCE FOR CLEANING & DISINFECTING

PUBLIC SPACES, WORKPLACES, BUSINESSES, SCHOOLS, AND HOMES

1 DEVELOP YOUR PLAN

DETERMINE WHAT NEEDS TO BE CLEANED. Areas unoccupied for 7 or more days need only routine cleaning. Maintain existing cleaning practices for outdoor areas.

DETERMINE HOW AREAS WILL BE DISINFECTED. Consider the type of surface and how often the surfaces are touched. Prioritize disinfecting frequently touched surfaces.

CONSIDER THE RESOURCES AND EQUIPMENT NEEDED. Keep in mind the availability of cleaning products and personal protective equipment (PPE) appropriate for cleaners and disinfectants.

2 IMPLEMENT

CLEAN VISIBLY DIRTY SURFACES WITH SOAP AND WATER prior to disinfection.

USE THE APPROPRIATE CLEANING OR DISINFECTANT PRODUCT. Use an EPA-approved disinfectant against COVID-19, and read the label to make sure it meets your needs.

ALWAYS FOLLOW THE DIRECTIONS ON THE LABEL. The label will include safety information and application instructions. Keep disinfectants out of the reach of children.

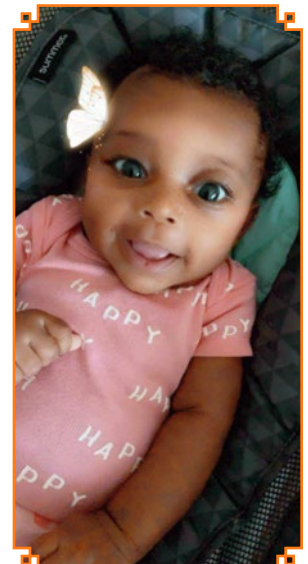
3 MAINTAIN AND REVISE

CONTINUE ROUTINE CLEANING AND DISINFECTION. Continue or revise your plan based upon appropriate disinfectant and PPE availability. Dirty surfaces should be cleaned with soap and water prior to disinfection. Routinely disinfect frequently touched surfaces at least daily.

MAINTAIN SAFE PRACTICES such as frequent handwashing, using cloth face coverings, and staying home if you are sick.

CONTINUE PRACTICES THAT REDUCE THE POTENTIAL FOR EXPOSURE. Maintain social distancing, staying six feet away from others. Reduce sharing of common spaces and frequently touched objects.

For more information, please visit [CORONAVIRUS.GOV](https://www.coronavirus.gov)



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Dallas County Health and Human Services Vaccines For Children Program

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Pneumococcal Conjugate Vaccine (PCV13)

PCV13 is now recommended on the basis of shared clinical decision-making rather than routinely for all adults aged 65 years or older who have never received PCV13. This simply means that together, the patient and provider can decide whether PCV13 is right for that specific person. This change applies to older adults who do not have an immunocompromising condition, cerebrospinal fluid leak, or cochlear implant. PCV13 is still routinely recommended for older adults with those conditions who have never previously received a dose. In addition, CDC continues to recommend PPSV23 routinely for all adults aged 65 years or older.

Considerations for Shared Clinical Decision - Making Regarding Use of PCV13 in Adults Aged ≥ 65 Years

□ PCV13 is a safe and effective vaccine for older adults. The risk for PCV13-type disease among adults aged ≥ 65 years is much lower than it was before the pediatric program was implemented, as a result of indirect PCV13 effects (reduced population carriage and transmission). The remaining risk is a function of each individual patient's risk for exposure to PCV13 serotypes and the influence of underlying medical conditions on the patient's risk of developing pneumococcal disease if exposure occurs.

□ The following adults aged ≥ 65 years are potentially at increased risk for exposure to PCV13 serotypes and might attain higher-than-average benefit from PCV13 vaccination; providers/practices caring for many patients in these groups may consider regularly offering PCV13 to their patients aged ≥ 65 years who have not previously received PCV13:

□ Persons residing in nursing homes or other long-term care facilities.

□ Persons residing in settings with low pediatric PCV13 uptake.

□ Persons traveling to settings with no pediatric PCV13 program.

Incidence of PCV13-type invasive pneumococcal disease and pneumonia increases with increasing age and is higher among persons with chronic medical conditions like chronic heart, lung, or liver disease; diabetes; or alcoholism; and those who smoke cigarettes. While indirect effects from pediatric PCV13 use were documented for these groups of adults and were comparable to those observed among healthy adults, the residual PCV13-type disease burden remains higher in these groups. Providers/Practices caring for patients with these medical conditions may consider offering PCV13 to such patients who are aged ≥ 65 years and who have not previously received PCV13.



Beat The Rush!

Back-to-school Requirements

The 2020-2021 school year will be starting before we know it! The 2020-2021 vaccine requirements are located on the Forms and Publications-School Immunizations webpage:

<https://www.dshs.texas.gov/immunize/school/publications.aspx>



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TVFC/ASN Programs Site Visits Suspended Amidst COVID-19 Response in Texas

The rapid spread of COVID-19 in Texas and across the US has many of Texas Vaccines for Children (TVFC) & Adult Safety Net (ASN)-enrolled providers focusing on their patient and staff's safety while in the clinic. In line with the current CDC social distancing recommendation for COVID-19, DSHS has suspended in-person site visits for TVFC/ASN enrolled providers beginning March 19 2020, until further notice. The suspension includes: TVFC/ASN Compliance-only visits, TVFC Combination visits (IQIP and Compliance), and TVFC/ASN storage and handling visits. For TVFC/ASN-

enrolled providers who have already received a compliance and IQIP visit, compliance with vaccine storage and handling requirements must be maintained. In keeping with current policy, enrolled providers must continue to monitor temperatures of all storage units (refrigerators and freezers) that contain TVFC/ASN vaccine and continue to submit their monthly reports by the 5th of each month. Because in-person visits cannot be conducted, monthly reports should be reviewed extensively to verify that providers are complying with the required vaccine management protocols.



DSHS Immunization Newsletter Subscriptions

<https://www.dshs.state.tx.us/immunize/Immunization-News/The-TVFC/ASN-Digest/>
<https://www.dshs.state.tx.us/immunize/Immunization-News/The-Upshot/>

VACCINES FOR CHILDREN PROGRAM

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Parts or full contents used within this newsletter were extracted from the publications of the Centers for Disease Control and Prevention and the Texas Department of State Health Services website.



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