A Publication of the Hawaii Department of Health's Immunization Branch

Hawaii Vaccines for Children Newsletter

Summer Edition / July 2024

VFC INFLUENZA UPDATE - ESS PERTUSSIS - HIR TALK TO THE CLINICIAN - QA EDUCATION - SCHOOL-LOCATED FLU
VACCINATION EFFORTS - HELP BOX - IQIP

2024-25 UFC Influenza Vaccine Supply Update: Prebook Your UFC Influenza Vaccine Now!

Following the October 5, 2023, Vaccines and Related Biological Products Advisory Committee (VRBPAC) meeting, FDA provided direction to manufacturers to transition to a trivalent flu vaccine formulation. As a result, all influenza vaccines available for the 2024-2025 influenza season will consist of trivalent formulations. For Frequently Asked Questions regarding the U.S. transition to trivalent influenza vaccines, please see: <u>Trivalent Influenza Vaccines | CDC</u>.

The following vaccines will be available for order and administration to VFC-eligible children during the 2024-25 influenza season.

2024-25 Inactivated Influenza Vaccine (IIV3)			
NDC	Trade Name	Presentation	Age Indication
19515-0810-52	FluLaval Trivalent, Preservative Free	0.5 mL PRE-FILLED SYRINGES	6 months through 18 years
49281-0424-50	Fluzone Trivalent, Preservative Free	0.5 mL PRE-FILLED SYRINGES	6 months through 18 years
70461-0654-03	Flucelvax Trivalent, Preservative Free	0.5 mL PRE-FILLED SYRINGES	6 months through 18 years
2024-25 Live Attenuated Influenza Vaccine (LAIV)			
NDC	Trade Name	Presentation	Age Indication
66019-0311-10	FluMist Trivalent, Preservative Free	0.2 mL pre-filled sprayers	2 years through 18 years

Hawaii VFC Prebooking for the 2024–25 influenza season began on July 1, 2024. Please refer to the email titled "2024-25 VFC Influenza Prebook" for the VFC prebook form and instructions.

Please consider the following information when determining your VFC influenza vaccine prebook amounts:

- Providers are encouraged to place orders for the FULL amount of VFC inactivated influenza vaccine (IIV3) and Live Attenuated Influenza Vaccine (LAIV) required by your practice for the 2024-25 flu season.
- VFC IIV3 may only be administered to VFC-eligible patients, aged 6 months 18 years. VFC LAIV may only be administered to VFC-eligible patients, aged 2 years 18 years.
- Priority will be given to providers that place their VFC influenza orders by July 31, 2024.

IMPORTANT: Be sure to complete a <u>VFC Vaccine Loss Reporting form</u> to initiate the return of excess expired 2023-24 influenza vaccine to the VFC vaccine distributor. Completed forms must be submitted to the Hawaii VFC Program no later than December 1, 2024.



Pertussis Cases on the Rise

Pertussis, or whooping cough, is an acute infectious disease caused by the bacterium *Bordetella pertussis*. The incubation period of pertussis is commonly 7 through 10 days, with a range of 4 through 21 days. The clinical course of the illness is divided into three stages: catarrhal, paroxysmal, and convalescent.

It is during the paroxysmal stage that the diagnosis of pertussis is usually suspected. Characteristically, the patient might have bursts, or paroxysms, of numerous, rapid coughs. At the end of the paroxysm, a long inspiratory effort is usually accompanied by a characteristic high-pitched whoop. During such an attack, the patient may become cyanotic. Children and young infants, especially, might appear very ill and distressed. Vomiting and exhaustion might follow the episode. The person does not appear ill between attacks.

Cases of whooping cough are on the rise across the United States. Approximately 5,000 whooping cough cases were reported this year, nearly three times as high as last year at the same time.

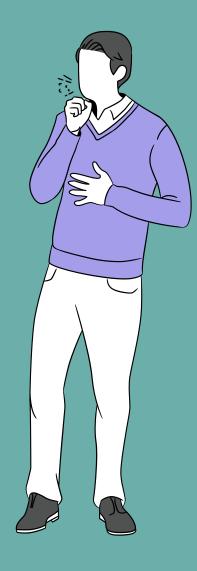
Since February 2024, the Hawaii Department of Health (HDOH) investigated increased community transmission of pertussis in West Hawaii. HDOH has identified a total of 24 cases of pertussis without travel-related exposure on Hawaii Island. Most reported cases are among children between the ages of 0-17 years who attend schools/care centers in the area.

The recent Pertussis outbreak in West Hawaii identified the need for increased vaccination amongst school-aged children.Immunizations required for school attendance, specifically vaccination for pertussis, were at a low level of completion.

There are two types of vaccines used today to protect against whooping cough: diphtheria, tetanus, and pertussis (DTaP) vaccine for babies and children younger than age 7, and tetanus, diphtheria, and pertussis (Tdap) vaccines for children aged 7 and older, adults and pregnant women.

Pertussis is endemic to Hawaii and should always be included in a provider's differential diagnosis. Due to vaccine-induced immunity against pertussis waning over time, staying up to date with vaccination schedules as recommended by the Advisory Committee on Immunization Practices (Immunization Schedules) is critical to reducing spread of pertussis in the community. Vaccination also protects against severe disease.

HDOH has created the <u>Pertussis Tool Kit</u> for Healthcare Providers to help implement effective strategies for prevention, infection control, timely diagnosis, and treatment, and patient and healthcare staff education.





Hawaii Immunization Registry (HIR)

The Hawaii Immunization Registry (HIR) would like to remind you of the importance of reporting VFC vaccine usage to the Hawaii Immunization Branch. When submitting the information on paper forms, please use VAVRs or newborn VAVRs to report VFC vaccine usage as explained by VFC Quality Assurance Team during the <u>Vaccines for Children Birthing Hospitals</u> presentation on June 25, 2024. For those who do electronic data exchange with our registry system, please ensure vaccination records get submitted under the correct vaccine administration location. This is important when your organization has multiple clinic sites administering state-funded vaccines. Improving documentation and reporting will result in more complete and accurate information at the provider level.



Talk to the Clinician - Back to School

The school year is starting soon, which means children starting 7th grade will need specific vaccinations to start the school year. It is also a great opportunity to schedule a well-child visit for that young adolescent patient.

Which immunizations are required to enter 7th grade for Hawai'i Schools? Why are these vaccines required for school entry?

In addition to the required immunizations for elementary school grades, children entering the 7th grade must also receive the Human Papillomavirus vaccine or HPV series, vaccination for meningococcal meningitis, and a booster dose of the combination vaccine for tetanus, diphtheria, and pertussis, also called Tdap. The timing of many childhood vaccinations and schooling are aligned with some specific opportunities for public health. Most children entering 7th grade have not had school entry requirements since kindergarten, which means some of the protection they had from earlier vaccine series has declined, especially the inactive vaccines. That is why Tdap booster is required for this age group. In addition, there are some vaccines that we do not routinely administer to children who are younger than 11 or 12 years old. Students starting 7th grade are usually between 11 and 13 years old, making it an ideal time to maximize vaccination for a variety of important diseases and conditions. Another window of opportunity for immunization usually happens when a child is an older teenager, and they might be starting college or entering military service.

Are there serious side effects associated with any of these vaccines?

Serious side effects from any vaccination are extremely rare. What is seen more often are mild side effects, such as pain at the injection site, some redness or swelling at the injection site, or even 1-2 days of some flu-like symptoms such as fatigue, muscle aches, or low grade fever. Teenagers may also have vasovagal reactions from injections or blood draws, and if a child has this history then parents should make sure they are well hydrated and have eaten something on the day of vaccination. They should be sitting or laying down on an exam table when the injection is given.

Side effects are different from allergic reactions, and if a child has had a severe allergic reaction to any previous vaccines, or is allergic to components of vaccines, they should be referred to an allergist prior to getting future immunizations. True allergic reactions to vaccines are very rare, but include things such as anaphylaxis, Stevens-Johnson Syndrome, and Toxic Epidermal Necrolysis. In addition, if a medical exemption is indicated for future vaccines, an allergist can provide detailed guidelines regarding which specific vaccines or vaccine components should be avoided/exempted.

WHY IS IT IMPORTANT FOR CHILDREN TO GET A PHYSICAL EXAM BEFORE STARTING 7TH GRADE? IF A CHILD IS HEALTHY AND HAS NO CHRONIC CONDITIONS, WHY SHOULD THEY STILL HAVE A ROUTINE PHYSICAL?

Adolescence is a time of tremendous physical, emotional, and social change. During this time, there are a variety of factors and behaviors that can directly impact the long and short term health of your teen. Obesity, disordered eating habits, smoking, vaping, sexual activity, sexual identity, anxiety, depression, avoidable injuries from riding a bicycle or swimming – or even being able to ask questions about how their body is changing, and wondering what is normal or not, are all important topics that get addressed during a routine well-visit.

By the start of 7th grade, many children have some level of independence and autonomy with some daily decisions. This can be very varied, but includes having a smart phone, making decisions about what to eat for breakfast or lunch at school, deciding whether they want to participate in school activities such as sports or theater, and the peer groups they socialize with at school. This age-group is also a wonderful opportunity for a child to begin developing health-literacy, which includes understand how some behaviors can have positive or negative impact on their health. Establishing healthy eating habits as a teenager will likely mean you have healthy eating habits as you get older. Understanding any medical conditions they might have, such as asthma, food allergies, or diabetes, are important as they are becoming young adults and navigating daily decisions. Even knowing that it is OK to ask your healthcare provider questions about your changing body, is a part of becoming knowledgeable about your health – or developing health literacy.

WHERE CAN PARENTS GET MORE INFORMATION ABOUT THE SCHOOL HEALTH REQUIREMENTS?

Parents and guardians of children who will be entering 7th grade should make an appointment with a healthcare provider for their child to receive a physical exam and the required immunizations as soon as possible.

For more information, visit vaxtoschooolhawaii.com.

See here for a link to an informative Vax to School interview on Hawaii Matters.

Additional Source:

https://www.khon2.com/wake-up-2day/hawaii-keiki-immunization-health-requirements-as-school-nears/amp/



QA Education

Storage Units

Effective and VFC Program-recommended vaccine storage units can make storing and handling VFC vaccine much easier on all the staff who manage them. There are several types of vaccine storage units available on the market including household and commercial units, but our program highly recommends investing in Purpose-Built or Pharmaceutical units as these are made specifically to store vaccine. We understand that financial constraints can sometimes restrict the purchasing of these types of units and our team is here to help guide you through this process of procuring new unit, if needed.

Just a reminder to those VFC providers still utilizing both the freezer and refrigerator section of a household combination unit to store vaccine that we will no longer be allowing the use of the freezer portion come **July 30, 2024**. If you are a provider that offers frozen vaccine, a stand-alone unit must be purchased.

We ask that any provider looking to purchase a unit please consult the VFC Quality Assurance Team prior to purchasing to ensure that the unit satisfies all program requirements.

Temperature Monitoring

All units storing VFC vaccine are required to have a Temperature Monitoring Device (TMD). An accurate temperature history that reflects actual vaccine temperatures is critical for protecting your vaccines. The CDC and our VFC Program recommends the use of one Digital Data Logger (DDL) for daily temperature monitoring. A staff member should be checking the minimum, maximum and current temperature of each VFC vaccine storage unit at least once each workday. These temperatures should be logged either using the HDOH VFC Program Temperature Log or some other form of daily logging (i.e. Bluetooth temperature logging via SensoScientific, Accuvax or AwarePoint).

Completed monthly temperature logs should be submitted to Hawaii.VFC@doh.hawaii.gov at the beginning of each month regardless of VFC vaccine order placement.

Temperature Excursions

Just a reminder that all temperature excursions require immediate follow-up and should be reported to the HDOH VFC Program upon discovery. Delaying the reporting of a temperature excursion may lead to delays in the processing of VFC vaccine orders. Should you have any questions regarding temperature excursions, please reach out to any member of the VFC Quality Assurance Team (contact info can be found on the <u>first page of the HDOH VFC Toolkit</u>).

School Located Flu Vaccination Efforts

It is through partnerships between DOH, several Community Vaccination Providers, and the coordination of stakeholders, that school-located vaccination clinics can continue to be critical tools towards increasing vaccine equity and building vaccine confidence in school and community settings.

As we prepare to begin planning and hosting school-located vaccination clinics for staff, students, or their broader communities during the 2024-2025 school year, DOH is seeking Community Vaccination Providers to conduct community and/or school-located vaccination clinics. Please email or call our DOH Community Vaccination Program Specialist, Bridget Anthony, if you are interested in partnering to conduct a vaccination event. We thank you for your support in this effort.

Email: bridget.anthony.nsw@doh.hawaii.gov Phone: 808-927-9294



Here is additional information regarding Vaccine Loss Reporting:

- https://health.hawaii.gov/docd/for -healthcare-providers/vfc-vaccinereturns-and-wastage-in-thehawaii-immunization-registry-hir/
- https://health.hawaii.gov/docd/file s/2024/01/VFC-Vaccine-Return-Instructions.pdf

If you have any questions, please call (808) 586-8300 (Oahu) or 1-800-933-4832 (toll-free).

Or, please send a detailed e-mail message to:

hawaiivfc@doh.hawaii.gov.

Thank you!

Help Box

Do you have VFC vaccine that has expired and/or spoiled? Or, VFC vaccine that has been opened or partially administered to a patient with doses leftover? We are here to help!

For Vaccine Loss Reporting, here are a couple tips:

1. If the vaccine is expired and/or spoiled: Vaccine Loss Reporting can be processed under "Manage Returns" via the Hawaii Immunization Registry (HIR).

Or, your organization can complete and submit a "<u>Vaccine Loss Reporting Form</u>," either via Fax (808) 586-8302 or e-mail hawaiivfc@doh.hawaii.gov for Hawaii VFC Program processing. NOTE: After processing the return request(s), your organization's VFC Primary Coordinator will receive the return label(s) via e-mail, which is an automated message sent by UPS with the label(s) to print for the box or boxes of expired/spoiled vaccine to be shipped.

2. If the vaccine vial is opened or partially administered with doses leftover, the opened vial would be considered "wasted" and cannot be returned. It can be reported under "Manage Wastage" in HIR. Or, your organization also has the option to complete and submit a "Vaccine Loss Reporting Form" to the same Fax number or e-mail address (in Step #1).

NOTE: After processing, the vaccine must be discarded at your organization's discretion.









8 Months with IQIP in Hawai'i

We would like to extend a heartfelt Mahalo to all providers and clinics in Hawai'i who have participated in the IQIP Program. While the concept of IQIP isn't new, its implementation in our state is, and we're proud to have the support and involvement of providers dedicated to employing Quality Improvement (QI) strategies. These strategies ensure that our Keiki are not only safeguarded but also kept up-to-date with their vaccinations, as per the Advisory Committee on Immunization Practices (ACIP) Schedule.

Providers play a crucial role in ensuring timely vaccinations, and your dedication to protecting our Keikie is invaluable. We're here to assist you throughout your IQIP journey and hope to see more providers join us in safeguarding all of Hawai'i's Keiki!

For more information about the IOIP Program, or to schedule your Initial Visit, please contact Danrie Miral at the Department of Health today!

email: danrie.miral.nsw@doh.hawaii.gov

> phone: (808) 470-9541

IQIP is CDC's national, Vaccines for Children (VFC) provider-level immunization quality improvement (OI) program.

IQIP promotes and supports the implementation of providerlevel strategies designed to increase on-time and efficient vaccination of children and adolescents.

IQIP is a 12-month process where public health representatives and VFC providers collaborate to identify QI strategies to increase vaccine uptake by improving and enhancing vaccination workflow.

Hawaii Department of Health Immunization Branch **VFC Program**

Militaria

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