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# Whale's Tales

A newsletter for the MOBI  
and TIES Trainer

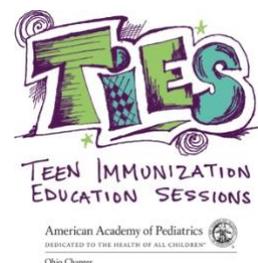
## Program Team:

Rebecca Brady, MD, FAAP – MOBI Medical  
Director

Robert Frenck, Jr., MD, FAAP – TIES  
Medical Director

Lory Sheeran Winland, MPA – Director of  
Immunization Programs

Beth Barker MSN, RN – Nurse Educator



# March 2020

Welcome to Whale's Tales, a periodic newsletter written for MOBI and TIES trainers. Whale's Tales reports the pertinent information about statewide training activities, trainer experiences, challenges and immunization information that impacts the trainer and course participant.

## From the Medical Directors:

### **COVID-19**

Since the initial notification about the novel coronavirus (COVID-19) in Dec 2019 in Wuhan, China, the virus as of Feb 27, 2020 has been attributed to causing over 80,000 cases in 37 countries throughout the world, although most cases are in China. The death rate is currently estimated at 2%. However, that number is dropping as we learn more about the infection. One issue is that COVID-19 likely has a wide spectrum of disease with only the more severe seeking medical attention. While this could be scary as it means there is a lot more case of COVID-19 than currently recognized, the good news is that if most people do have a milder form of the illness, the death rate and rate of serious illness is likely far lower than currently thought.

It also is important to keep the situation in context. Compared to the 80,000 cases of COVID-19 in the world (and only 15 cases in the US), this season over **32 MILLION cases of flu** have occurred **in the US alone**. Additionally, as compared to the 2700 deaths worldwide due to COVID-19, this season in the US over 18,000 people have died from the flu and over 300,000 have been hospitalized. Of the deaths in the US due to flu, over 100 have occurred in children who were in good health before getting the flu.

We don't know how big a problem COVID-19 will be in the US. It certainly will exceed the 15 cases currently reported. But, that doesn't mean we should panic nor should we significantly alter our lives. As COVID-19 is spread by droplet and direct contact; the best method to protect yourself is washing hands for at least 20 seconds in soap and water,

covering coughs and sneezes with tissues that are immediately thrown away.

While facemasks and eye protection are important for healthcare providers evaluating people with respiratory infections, facemasks are NOT recommended for the public as after wearing for about 15 minutes, masks lose their effectiveness and need to be changed.

As information about COVID-19 is evolving rapidly, you can get up to date information from the Centers for Disease Control and Prevention ([www.CDC.gov](http://www.CDC.gov)) or the World Health Organization (<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>).

Please visit <http://ohioaap.org/projects/mobi/> to access an easy-to-understand infographic around COVID-19.

Thank You,  
Dr. Robert Frenck

## **2020 Immunization Schedule –Changes & Guidance**

The 2020 child and adolescent immunization schedule is now available and the following is a summary of the changes related to specific vaccines:

- *Haemophilus influenzae* type b vaccination  
Catch-up vaccination is not recommended for previously unvaccinated children 5 years (60 months) or older who are not at high risk.
- Hepatitis A vaccination  
All children and adolescents 2 through 18 years of age who have not previously received hepatitis A vaccine should receive catch-up vaccination and complete a 2-dose series.
- Hepatitis B vaccination  
The “special situations” section of the hepatitis B note contains information regarding populations for whom revaccination may be recommended.

In general, revaccination is not recommended for persons with a normal immune status who were vaccinated as infants, children, adolescents, or adults.

Revaccination may be recommended for certain populations, including:

- Infants born to hepatitis B surface antigen-positive mothers
- Hemodialysis patients
- Other immunocompromised persons

More detailed revaccination recommendations are available at: [www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/hepb.html](http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/hepb.html)

- **Meningococcal ACWY vaccination**

Guidance has been added regarding adolescent vaccination for children who received Men ACWY prior to age 10 years.

If the child is at increased risk of meningococcal disease (e.g., those with complement deficiency, HIV, or asplenia), follow the booster dose schedule.

If the child is not at increased risk of meningococcal disease (e.g., those who received a single dose for travel to a country where meningococcal disease is endemic), then administer a dose at age 11-12 years and a dose at age 16 years.

- **Meningococcal B vaccination**

Men B booster doses are now recommended for:

- Persons  $\geq 10$  years with complement deficiency
- Those who receive complement inhibitor therapy
- Persons with asplenia
- Persons who are microbiologists
- Persons determined by public health officials to be at increased risk during an outbreak

Additional guidance is available at:

[www.cdc.gov/vaccines/acip/recommendations.html](http://www.cdc.gov/vaccines/acip/recommendations.html) and [www.cdc.gov/vaccines/acip-recs/vacc-specific/mening.html](http://www.cdc.gov/vaccines/acip-recs/vacc-specific/mening.html)

- **Poliovirus vaccination**

For children receiving series containing the oral polio vaccine (OPV), the total number of doses needed to complete the series is the same as that recommended for the U.S. IPV schedule.

Only trivalent OPV counts toward the U.S. vaccination requirements. Doses of OPV administered before April 1, 2016, should be counted (unless specifically noted as administered during a campaign). Doses of OPV administered on or after April 1, 2016, should not be counted.

Additional guidance is available at:

[www.cdc.gov/mmwr/volumes/66/wr/mm6606a7.htm?s\\_cid=mm6606a7\\_w](http://www.cdc.gov/mmwr/volumes/66/wr/mm6606a7.htm?s_cid=mm6606a7_w)

- **Tdap and DTaP vaccination**

Dose 5 of DTaP is not necessary if dose 4 was administered at age 4 years or older AND at least 6 months after dose 3.

The Tdap note has been updated to allow either Td or Tdap as an option for the decennial tetanus booster doses and catch-up series doses in persons who have previously received Tdap.

For children who received doses of Tdap or DTaP at age 7 through 10 years:

- A dose of Tdap or DTaP administered at 10 years of age may now be counted as the adolescent Tdap booster.
- A dose of Tdap or DTaP administered at 7 through 9 years of age should not be counted as the adolescent dose, and Tdap should be administered at 11-12 years.

Thank You,  
Dr. Rebecca Brady

## **From Lory:**

### **MOBI/TIES Trainer Survey**

We want to hear from you on how to improve the MOBI and TIES program. Please take a few minutes to answer some questions about the trainer portal, slides/resources, Train-the-Trainers, etc. Your feedback will be used to shape the program next fiscal year and beyond. We appreciate your time!

<http://ohioaap.org/mobi-ties-trainer-survey/>

## **MOBI/TIES Slides & Resources – Updated**

We are currently working on the next round of slide and resource updates for MOBI and TIES; these should be completed by the end of March. Please look for a notification via the listserv to let you know when the updates will be available online and in the attendee packets.

Here are a few of the changes:

- Replace 2019 Immunization Schedule with 2020 Schedule
- Create summary slides for 2020 Immunization Schedule changes
- Update TIES slides with new Tdap recommendations
- Clarify slides with new NIS data, since these are still confusing
- Replace VFC consultant map & ImpactSIIS Trainer map with updated version

## **Make-Up & Annual Train-the-Trainer**

- If you are a new trainer or if you were unable to attend our previous MOBI/TIES Train-the-Trainer sessions, please plan to attend our upcoming make-up **Train-the-Trainer** on **Wednesday, March 18, 2020**.

The training will be held at the Ohio AAP office (94-A Northwoods Blvd, Columbus 43235). Registration will begin at 9:30am and the training will end at approximately 4:00pm. Lunch is NOT provided, however there are several restaurants in close proximity. *Attendance at a Train-the-Trainer is required.* Please feel free to contact me with any questions.

Register here: <http://ohioaap.org/TTT>

- Please save-the-date for our **Annual Train-the-Trainer on Wednesday, July 22, 2020** at the Ohio University Dublin Integrated Education Center (same location as last year). More information to come, but please mark your calendar now!

## **Adolescent Immunization QI Project**

The American Academy of Pediatrics (AAP) is pleased to announce the launch of an adolescent immunizations learning collaborative convened through the National AAP Chapter Quality Network (CQN). In collaboration with five AAP chapters (including the Ohio Chapter), the CQN Improving Immunization Rates for Adolescents (IIRA) project will employ quality improvement techniques and clinical education/training to increase adolescent immunizations in pediatric clinical practices using the Model for Improvement. The primary goal will be to increase rates of the vaccines recommended by the CDC Advisory Committee on Immunization Practices (ACIP) schedule for adolescents between 16 and 18 years of age.

**About the Project:** Practices will have the opportunity to participate in a learning collaborative based on the Institute for Healthcare Improvement's Breakthrough Series Collaborative Model, which includes four practice learning sessions (2 in person, 2 webinars), and six practice webinars in collaboration with other practices in their region. Project participants will have access to subject matter experts, curriculum, and QI coaching. Practice teams will implement process changes into their practices by conducting small tests of change and collecting practice-level data (Plan-Do-Study-Act cycles). Practice participation will begin in April 2020 and continue through April 2021. Eligible participants will receive Maintenance of Certification Part 2 and Part 4, and Performance Improvement Continuing Medical Education (PI CME). This project is funded through Pfizer and Sanofi Pasteur.

If you have any TIES practices who may be interested, please pass along this information.

**For more information:** Contact Lory Sheeran Winland, Project Manager, at [lwinland@ohioaap.org](mailto:lwinland@ohioaap.org) or (614) 846-6258

**Deadline to enroll:** April 30, 2020

## **MenB – Letter to VFC Providers from ODH**

In a letter sent by the Ohio Department of Health in December 2019, it is recommended that all Ohio VFC providers maintain some MenB vaccines for VFC eligible patients aged 10 through 18 years of age. The American Academy of Pediatrics encourages pediatricians to discuss the availability

of the MenB vaccine with *all* families and to make the decision to vaccinate together.

Please review the technical recommendations from the current ACIP recommended update for MenB vaccines at: <https://www.cdc.gov/mmwr/volumes/66/wr/mm6619a6.htm>.

For more information, please see the February 12 edition of Ohio AAP Today: <http://ohioaap.org/ohioaap-article/what-you-should-know-about-menb-vaccines-for-teens-new-qi-opportunities/>

## **From Beth:**

### **Get Vaccinated Goals – How Can Ohio AAP Help?**

Hello Fellow Trainers!

As we begin to wind down this fiscal year of MOBI/TIES and IQIPs I wanted to reach out and see how things are going in the scheduling department? I know that we all have goals for scheduling these programs in order to meet our objectives, but at times it can be difficult to get these practices to sign up. I have heard from trainers about the difficulties in getting local practices, who perhaps really could use a MOBI & TIES don't necessarily see these programs as beneficial. What can we do here at Ohio AAP to support you and assist you in getting more practices to schedule?

Please feel free to reach out to me directly with ideas or questions as well as to Lory Sheeran-Winland our Director of Immunization Programs. We want to support trainers in all aspects of the MOBI/TIES programming and that includes getting practices to schedule.

Contact Information:

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Lory Sheeran-Winland MPA: [lwinland@ohioaap.org](mailto:lwinland@ohioaap.org)

Thank you,  
Beth Barker MSN, RN