This is hope: First round of COVID-19 vaccine arrives in Ohio

Coronavirus vaccine: Who will receive it first and how it will be distributed in Ohio

Healthcare workers plead for community support; first county goes purple as COVID surge continues in Ohio

Local pediatrician weighs in on in-person K-12 classes this fall

DeWine issues curfew for Ohio’s businesses amid surge in COVID-19 cases

Getting caught up on childhood vaccines, flu shot could prevent ‘twin-demic,’ expert says

Columbus Health Commissioner: ‘Our kids should be back in school’

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President’s Message

Jill Fitch, MD, FAAP
President, Ohio Chapter, American Academy of Pediatrics

“Gratitude unlocks the fullness of life. It turns what we have into enough, and more. It turns denial into acceptance, chaos to order, confusion to clarity. It can turn a meal into a feast, a house into a home, a stranger into a friend.”
- Melody Beattie

Who would have thought that our lives would still be impacted by the COVID-19 pandemic and no doubt will continue to be for some time. For those of you who were able to attend our first all virtual Annual Meeting, I think it was an amazing feat by the staff and enjoyed by more people than we would have had in person. We had record breaking attendance. The virtual format, while not conducive to spur of the moment discussions held during in-person meetings, still offers the opportunity to network with your colleagues in the Ohio AAP. To highlight this, please see the article written by Josh Prudent on page 22. I think his experience highlights the value of the meeting from the trainee’s perspective. I personally enjoyed the early morning track led by our past president Dr. Judy Romano, providing us with much needed mindfulness through an introduction to yoga accompanied by her cat. The session continued with retirement advice for physicians by Shad Patterson and contract negotiation by Jolie Havens and Nita Garg from Vorys, Sater Seymour and Pease, LLP.

Most impactful was our session featuring our Store It Safe Campaign, which featured many people directly impacted by suicide and was led by Dr. Sarah Denny and Dr. Mike Gittelman. This section highlighted the growing concern of teen suicide, and with isolation from peers and school and the financial impact on families during the pandemic, we only expect the problem to rise. It is the second leading cause of death among teens, but it is preventable! If you have not already done so, please take a moment to join our pledge to prevent suicide at ohioaap.org/SISpledge and commit to reversing the trend of irreversible actions.

The upcoming holidays amidst this COVID-19 surge mean our personal and collective actions will have a huge impact on the spread of the disease. Educating our patients and our own families about the risk and practicing the simple measures of masking and physical distancing will decrease the spread. Vaccines are on the horizon to help curb the spread and may be released by the time you’re reading this! Educating our patients, families and friends about the importance of vaccination for COVID-19 but also other vaccines is paramount. This is especially true for those who are disproportionately affected in the Black and Latino populations, who suffer a higher rate of disease and more severe diseases. Together, we will need to work on messaging to dispel myths and misinformation surrounding this novel vaccine for COVID-19. I found this podcast featuring Paul Offit valuable: http://peterattiamd.com/pauloffit. CEO, Melissa Wervey Arnold, and myself will be meeting weekly with the Ohio Department of Health COVID-19 Vaccination Providers work group, which is a multi-disciplinary group with representation from hospitals, offices, dentists, long-term care facilities, community health centers, free clinics and health plans to formulate information and planning of Ohio’s COVID-19 vaccination plan.

As we move forward, the Ohio AAP will continue to support you through our #SafePedsHealthyKids Toolkit to encourage well care visits, provide education and support through our advocacy with the Ohio Department of Health, Governor DeWine’s administration and with National AAP, to ensure our patients and our practices are recognized during this time of turmoil.

I began this letter with the quote from Melody Beattie about gratitude for what we have. Developing an optimistic attitude is an important facet for resilience. Continue to be connected to friends, families and our patients since connection (even via ZOOM) is the most important predictor of resilience. COVID-19 remains a persistent threat to you, family and coworkers, and even though we are tired of the virus, it is not yet tired of us! Be safe, mask up and connect with family and friends in new ways this holiday season. We look forward to working with you in 2021 to improve the care of the children of Ohio.

Best regards,

Jill Fitch, MD, FAAP
Lawmakers Prepare to Wrap Up 133rd General Assembly

Danny Hurley, Lobbyist
Manager of Governmental Affairs, Capitol Consulting Group, Inc.

The Ohio General Assembly is preparing to close out what has been an unprecedented legislative session that has seen declining state revenues, a corruption scandal, and a heated debate over the state’s response to COVID-19. Lawmakers are now in the midst of a post-election Lame Duck session that will represent the final action of the 133rd General Assembly; any bill not enacted this year would need to be reintroduced next year.

Among the top healthcare priorities for Lame Duck is legislation to address unanticipated out-of-network healthcare costs, also called ‘Surprise Billing’. House Bill 388, sponsored by State Representative Adam Holmes (R-Zanesville), passed the Ohio House of Representatives unanimously in May and recently cleared the Ohio Senate Insurance and Financial Institutions Committee; the Ohio Senate is expected to take up the measure in December. Lawmakers may also finally wrap up a multi-year effort to enact Healthcare Price Transparency legislation by passing Senate Bill 97; sponsored by State Senator Steve Huffman (R-Tipp City), SB 97 passed the Ohio Senate unanimously last year and recently cleared the Ohio House Health Committee with strong bipartisan support.

On the injury prevention front, legislative Republicans have been cool to embrace two signature policy proposals championed by Ohio Governor Mike DeWine (R). The first is the Governor’s StrongOhio firearm legislation, which was introduced as Senate Bill 221 by State Senator Matt Dolan (R-Chagrin Falls). SB 221 was unveiled after last year’s tragic shooting in Dayton, though it has been held up in the Ohio Senate despite numerous calls for passage by the Governor. State Senators Stephanie Kunze (R-Hilliard) and Sean O’Brien (D-Bazetta) also introduced Senate Bill 285, which would make changes to laws related to distracted driving. DeWine hasn’t been as vocal about passage of SB 285, largely due to his focus on COVID-19.

Lawmakers are also keeping their Lame Duck tradition of considering controversial fireworks legalization legislation. House Bill 253, sponsored by State Representatives Brian Baldridge (R-Winchester) and Michael O’Brien (D-Warren), originally sought to allow for consumer grade fireworks to be discharged year-round. The bill passed the House in June and was recently amended in the Senate Transportation, Commerce and Workforce Committee to retain the statewide prohibition on discharge. Under its current version, the bill would allow local governments to authorize discharge between July 3rd and July 5th. While this does open the door for discharge, it is a significant improvement over previous versions of the bill. While the Ohio Chapter remains considered about fireworks discharge, we are neutral on the current version.

The General Assembly is likely to consider and possibly enact a handful of measures to protect patients from adverse prescription drug coverage decisions by health plans. These include House Bill 469 (Copay Accumulator Prohibition), sponsored by State Representatives Susan Manchester (R-Waynesfield) and Thomas West (D-Canton), House Bill 418 (Non-Medical Switching Prohibition), sponsored by State Representatives Randi Clites (D-Ravenna) and Sara Carruthers (R-Hamilton), and House Bill 482 (340b Protections), sponsored by State Representatives Randi Clites (D-Ravenna) and Susan Manchester (R-Waynesfield). Like HB 388, these bills enjoy strong bipartisan support and lawmakers appear committed to protecting patients.

Lawmakers recently put the finishing touches on legislation to create a rare disease advisory council under the Ohio Department of Health. House Bill 412, sponsored by State Representatives Randi Clites (D-Ravenna) and Tim Ginter (R-Salem), is awaiting Governor DeWine’s signature after passing both Chambers with strong bipartisan support. The General Assembly may also pass licensure reciprocity legislation and consider a handful of interstate licensure compact bills. Finally, the Ohio Senate is expected to move House Bill 679; sponsored by State Representatives Adam Holmes (R-Zanesville) and Mark Frazier (R-Newark), HB 679 would expand Ohio’s telehealth coverage laws.

Legislators are also considering an override of Governor DeWine’s veto of Senate Bill 311, sponsored by State Senators Kristina Roegner (R-Hudson) and Robert McColley (R-Napoleon). SB 311 would limit certain quarantine and isolation orders issued by the Director of the Ohio Department of Health and would also allow the General Assembly to modify or overturn any orders issued by ODH as well. This is the second veto DeWine has issued on legislation that would limit his Administration’s powers related to managing the COVID-19 pandemic.
While both the DeWine Administration and General Assembly are concerned about the impact of COVID-19, there has been a growing debate over how aggressive the state response should be and what powers should be afforded to the executive branch. The Ohio Chapter has expressed opposition to SB 311 as it would not only impact Ohio’s handling of COVID-19 but would hinder how ODH responds to future and more common localized outbreaks of certain diseases.

While many of these issues are in flux, lawmakers have already enacted several positive pieces of legislation during the 133rd General Assembly. These include House Bill 8 (Foster Caregivers), sponsored by State Representatives Susan Manchester (R-Waynesfield) and Tavia Galonski (D-Akron), House Bill 11 (Tobacco Cessation and Prenatal Care), sponsored by State Representative Gayle Manning (R-North Ridgeville), and House Bill 606 (COVID-19 Civil Immunity), sponsored by State Representative Diane Grenfell (R-Chesterland).

It is going to be a very busy end to the 133rd General Assembly and we will do our part to advocate for pediatricians and the children they care for. Thank you to everyone who has taken time to write or call your state lawmakers as well as those pediatricians that have offered testimony at the Ohio Statehouse.

The Ohio AAP is excited to announce that John Duby, MD, FAAP is the 2020 recipient of the C. Anderson Aldrich Award for Lifetime Achievement in Developmental-Behavioral Pediatrics! The C. Anderson Aldrich Award recognizes a physician who has made outstanding contributions to the field of child development by the American Academy of Pediatrics. Congratulations Dr. Duby for this outstanding achievement and we thank you for your service and dedication to the health and wellbeing of Ohio’s children!
What a tumultuous yet exciting year it has been! Certainly no one could have foreseen the events of 2020 at the start of the year, but despite all of the difficulties the Ohio AAP Foundation was able to stay on track and accomplish so much this year. Despite a few setbacks and delays, the Foundation officially launched the Store It Safe (SIS) Adolescent Suicide Prevention Program this past November during the 2020 Ohio AAP Annual Meeting!

On November 20th, during a virtual event with over 350 attendees, the Ohio AAP launched the SIS Adolescent Suicide Prevention Program. Given the unique year it has been, we could not have picked a more important and necessary time to be launching this program. Teen suicide was a growing problem even before the significant impacts of the COVID-19 pandemic, which has seen stay-at-home orders and changes in school schedules create the perfect storm for increased mental health issues and suicide risk in teens. The teen suicide rate has increased by 56% over the past ten years and is the second leading cause of death for Ohio teens. The SIS teen program aims to identify teens with mental health concerns, provide appropriate interventions, and create barriers to the most lethal means for suicide.

We hope you were able to join us for the event, but for those who missed the launch, you can view a recording of the session at https://bit.ly/3m-mOZbd. The session brought together many partners including our members, injury prevention experts, mental health specialists, school administrators and teachers, and teen and parent advocates, all with the same goal of preventing teen suicide through safe storage practices. The event was a huge success thanks to the hard work and expertise of our panel of speakers. The day started with teen advocate, Jeremy Hardjono, who discussed his personal experiences as well as the program he started after the death of a close friend, the 1HELPS program. The panel also included mothers turned advocates, April McMillan and Denise Meine-Graham, who shared their work to save lives after the passing of their sons through the He Who Laughs Foundation and Franklin County LOSS program respectively. And of course we cannot forget the Ohio AAP Injury Prevention Medical Directors, Drs. Mike Gittelman and Sarah Denny, who have been the Ohio AAP champions of this cause since the launch of this initiative in 2015. Together they were able to speak to attendees on the data of this growing problem and discuss program goals and next steps to be involved.

Also, thanks to many of your generous donations during the event, we were also able to raise $7,800! All funds raised will go towards the further spread of the Store It Safe program, including the purchase of lock boxes for families in communities across Ohio that cannot afford them.

Now that the program has officially launched, there is still plenty for all of us to do. The Ohio AAP Injury Prevention team has put together a comprehensive plan of resources, educational content and opportunities so you can help reverse the trend of irreversible actions. Visit http://ohioaap.org/sisteen for the below information and resources!

• FREE Store It Safe educational handouts & rack cards for providers, parents and caregivers, and teens
• Store It Safe education modules that can be viewed from the safety of home to gain additional knowledge on the program and how to incorporate the work into your practice
• Store It Safe social media toolkit with suggested posts and images to share messaging on preventing teen suicide
• The opportunity to receive free gun lock boxes through our gun box application process
• And most importantly, the Store It Safe Pledge! If you haven’t already taken the pledge to reverse the trend of irreversible actions, do so today to help prevent teen suicide!

The year may be winding down, but we have a lot to be grateful for and even more to look forward to in 2021. Early next year, the Foundation will begin distributing the free gun lock boxes to applicants, helping further spread the SIS message and prevent teen suicide.
The 2021 Put A Lid On It! Bike Helmet Safety Program will also be gearing up to begin accepting applications. 2020 saw the 10th Anniversary of the program, but because of the many setbacks from COVID-19, the team thought this momentous occasion wasn’t properly celebrated. The program will be holding a “10th Anniversary Redo” in 2021 for a chance to properly celebrate the past achievements of the program, which has donated over 65,000 free helmets to Ohio’s children. The Goofy Golf Event and Fundraiser, which helps support the bike helmet program, has also been finalized and is scheduled for May 14, 2021 at Royal American Links. For more information or to register today, visit http://ohioaap.org/Goofygolf.

The Foundation remains as committed as ever to supporting the Chapter and helping improve the lives of Ohio’s children and families and looks forward to the exciting work that is still to come. The rest of the Foundation Board and I appreciate your continued support and dedication towards pediatrics, and we hope to “see” you all soon.

The Ohio AAP would like to thank Dr. Norm Christopher for his many years of service and leadership to the chapter. We are forever grateful for Dr. Christopher’s time, guidance, expertise, and continuous dedication to the health and safety of Ohio’s children. We celebrate his time at the Ohio AAP and wish him all the best on his next adventure!

Pediatric Vision Screening QI Program Successes, Takeaways, and Resources

Early vision screening is an important and essential element in school readiness and overall child health. Uncorrected vision problems can impair child development, interfere with learning, and even lead to permanent vision loss. The medical home is an important site of vision screening, referral, and eye health care coordination.

Through funding from the Ohio Department of Medicaid, The Preschool Vision Screening Learning Collaborative brought together key partners including The Ohio Chapter, American Academy of Pediatrics (Ohio AAP), Prevent Blindness Ohio (PBO), The Ohio Department of Health (ODH), and The Ohio Colleges of Medicine Government Resource Center (GRC) to prevent vision loss in preschool age children by supporting pediatric primary care providers in increasing screening rates, improving billing practices, and increasing referral to an eye care specialist for preschool age children who do not pass a vision screen. As part of the project, primary care practices were trained in evidence-based approaches to screening and referral and provided with up-to-date vision screening equipment.

Key Lessons Learned:

• Most participating primary care providers were using out of date vision screening eye charts.
• Most participating primary care providers were not completing a full vision screening, including observation AND screening for distance visual acuity when the project began.
• With brief and targeted education and training, providers can effectively and efficiently incorporate vision screening and referral into their office workflow.

Takeaways for Primary Care Providers:

• Be sure to stay up-to-date on ODH-approved vision screening practices and equipment. PBO offers FREE training and equipment, valued at $950. Go to: http://www.wiseabouteyes.org/copy-of-train-the-trainer-course-for-more-information
• Many instrument-based screeners such as the SPOT and Go Check are NOT approved by ODH because the science-based evidence on which they base a pass does not meet the threshold for ODH standards of approval. The National Center for Children’s Vision and Eye Health at Prevent Blindness America has an Expert Advisory Panel that has published the information on instrument-based screening that can be found here: http://nationalcenter.preventblindness.org/instrument-based-vision-screening/

The project launched in January 2020 and continued through October 2020. While the COVID-19 pandemic provided unexpected challenges, the project achieved a high degree of success with project aims being met and participating practices reporting a high degree of satisfaction with the project.

The Ohio AAP hopes to continue quality improvement projects around vision screening. If you would be interested in participating in a future wave of the PVS learning collaborative please contact the project manager, Kristen Fluit at kfluitt@ohioaap.org.
The Parenting at Mealtime and Playtime (PMP) Program

Funded by the Ohio Department of Health and launched in 2014, PMP has impacted over 85,000 children in Ohio. PMP is transitioning from a quality improvement project to an education-based training program. PMP will be launching trainings on supporting the well-child visit and practice management during COVID-19.

Participants will be prepared to:
- Discuss protocol implementation for supporting the well child visit and practice management techniques during COVID-19
- Develop skills to support well child visits and manage the practice effectively

Target Audience: Pediatric or family medicine primary care, sub-specialists, hospitalists, general physicians, nurses, residents, medical students, practice receptionists, medical assistants, nurse practitioners, physician assistants, psychiatrists, psychologists, community members, allied health and all other stakeholders in the health of Ohio’s children.

CME/MOC Statements: The Ohio Chapter, American Academy of Pediatrics (Ohio AAP) is accredited by the Ohio State Medical Association to provide continuing medical education for physicians. The Ohio AAP designates this live activity for a maximum of 3 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. Successful completion of this CME activity, which includes participation in the activity, with individual assessments of the participant and feedback to the participant, enables the participant to earn 3 MOC points in the American Board of Pediatrics’ (ABP) Maintenance of Certification (MOC) program. It is the CME activity provider’s responsibility to submit participant completion information to ACCME for the purpose of granting ABP MOC credit. MOC Part II credit will be entered into the CME data portal entitled PARS and will be shared electronically with the ABP within 30 days of the activity date.

WELL-CHILD VISIT SUPPORT SERIES
- Wellness During a Pandemic: Rising Importance and Unique Opportunities
  - December 10th at 12:00 pm
- Playing at Home Inside
  - February 8th at 2:00 pm
- Mental Health: Store It Safe Teen Suicide Prevention Program, Screening Tools, & Rising Stress Levels

PRACTICE MANAGEMENT SERIES
- What To Do if Your COVID-19 Plan is Affected
  - January 14, 2020 at 12:00 pm
- How To Use Social Media & Engage Families
  - January 21st at 12:00 pm
- Leadership, Culture, & Communication in the Era of COVID
  - February 24th at 10:00 am
- How to Navigate Screening Questionnaires

PMP toolkit & Journal Club launching in January 2021!

REGISTER:
HTTP://OHIOAAP.ORG/PMP-EDUCATIONAL-TRAINING-SERIES/
2020: More Challenges with Maintenance of Childhood Vaccination Coverage

Rebecca C. Brady, MD, FAAP
Medical Director, Maximizing Office-Based Immunization (MOBI) Program, Ohio AAP

The National Immunization Survey-Child, United States monitors coverage with vaccines recommended for children age < 24 months to protect against 14 potentially serious illnesses. The results of the 2017-2019 survey for vaccination coverage by age 24 months among children born in 2016 and 2017 have recently been published. The coverage estimates can be found in the table at the bottom of the page.

The combined 7-vaccine series includes > 4 doses of DTaP, > 3 doses of poliovirus vaccine, > 1 dose of measles-containing vaccine, the full series of Hib (> 3 or > 4 doses, depending on product type), > 3 doses of hepatitis B vaccine, > 1 dose of varicella vaccine, and > 4 doses of PCV. Coverage was lowest for influenza vaccine > 2 doses (58.1%) and the combined 7-vaccine series (70.5%). Coverage for DTaP > 4 doses (80.6%) and PCV > 4 doses (81.7%) also remained low.

The emergence and rapid expansion of the COVID-19 pandemic throughout the United States in March-April 2020 led to stay-at-home orders, declines in well-care visits, and receipt of fewer routine childhood immunizations. In response, many vaccine providers adjusted their office operations by scheduling sick and well-child visits in different locations and at different times of the day. Patients were encouraged to wait in their cars until they were called in for their appointments. A May 2020 survey of 1,933 practices participating in the Vaccines for Children Program found that 1,727 (89%) were currently open, including 1,397 (81.1%) offering immunization services to all children, and therefore, these children would need to be referred to other practices.

Presently, Ohio is experiencing record daily highs in COVID-19 cases. Extra effort will be urgently needed to maintain and achieve high levels of coverage with recommended childhood vaccinations. Receipt of influenza vaccination is especially important to avoid overwhelming the health system with the effects of cocirculation of the SARS-CoV-2 and influenza viruses.

Here are some helpful recommendations for vaccine providers:

- Communicate with children and their families that the practice is open and able to provide a safe environment for well-care visits and receipt of vaccinations.
- Use a reminder and recall system to let parents know that their children are due or overdue for vaccines.
- Utilize standing-orders and nurse-only visits for vaccine receipt.
- Consider offering additional evening or weekend clinic times for vaccination-only visits.
- Administer all needed vaccines to children during every clinic visit, provided there are no medical contraindications to vaccine receipt.
- If the practice is unable to provide needed vaccines, then assist the parent in finding another site such as a health department so the child can receive vaccines in a timely manner.

For those who are familiar with the MOBI Program, these are all Vaccination Best Practices. During the COVID-19 pandemic, attention to these best practices offers the best strategy to catch Ohio’s children up on needed vaccines and prevent disease.

Ohio AAP recommends pediatric practices schedule a Maximizing Office-Based Immunization (MOBI) and a Teen Immunization Education Sessions (TIES) annually to stay up-to-date on immunization best practices. These trainings can now be done virtually, include valuable COVID-19 information, are scheduled at your convenience, provide free office resources, and offer 1-hour CME for each training. For more information or to schedule your training, please contact Lory Sheeran Winland, MPA, Director of Immunization Programs, at lwinland@ohioaap.org.

For complete article, including references, visit www.ohioaap.org/OHPeds/articles.

<table>
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<th>Vaccine/Dose</th>
<th>Coverage % (95% CI)</th>
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<tr>
<td>DTaP &gt; 4 doses</td>
<td>80.6 (79.4 to 81.8)</td>
</tr>
<tr>
<td>Poliovirus (&gt; 3 doses)</td>
<td>92.1 (91.4 to 92.9)</td>
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<tr>
<td>Haemophilus influenzae type b (Hib) full series</td>
<td>79.9 (78.6 to 81.1)</td>
</tr>
<tr>
<td>Hepatitis B birth dose</td>
<td>76.3 (75.0 to 77.5)</td>
</tr>
<tr>
<td>Hepatitis B &gt; 3 doses</td>
<td>91.4 (90.5 to 92.2)</td>
</tr>
<tr>
<td>Varicella &gt; 1 dose</td>
<td>90.0 (89.1 to 90.9)</td>
</tr>
<tr>
<td>Pneumococcal conjugate vaccine (PCV) &gt; 4 doses</td>
<td>81.7 (80.5 to 82.8)</td>
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<tr>
<td>Hepatitis A &gt; 2 doses by age 35 months</td>
<td>76.9 (75.2 to 78.5)</td>
</tr>
<tr>
<td>Rotavirus by age 8 months</td>
<td>75.3 (74.1 to 76.5)</td>
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<tr>
<td>Influenza &gt; 2 doses</td>
<td>58.1 (56.7 to 59.5)</td>
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<tr>
<td>Measles, mumps, rubella &gt; 1 dose</td>
<td>90.7 (89.8 to 91.5)</td>
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<tr>
<td>Combined 7-vaccine series</td>
<td>70.5 (69.1 to 71.9)</td>
</tr>
<tr>
<td>No vaccinations</td>
<td>1.2 (1.0 to 1.4)</td>
</tr>
</tbody>
</table>
Thank you to all of our members, attendees, speakers, and exhibitors for a record-breaking two days of virtual education! You helped make Ohio AAP’s first ALL VIRTUAL Annual Meeting a huge success!

Past Ohio AAP President, Dr. Judy Romano started off the day with a resident and early career physician pre-annual workshop focusing on physical and financial health with a yoga session!

We learned about key legal issues any new physician SHOULD know in the Negotiating Your Employment Agreement workshop presented by Vorys, Sater, Seymour and Pease LLP.

The Ohio AAP officially launched the Store It Safe Teen Suicide Prevention Program during the Reversing the Trend of Irreversible Actions Fundraiser.

Teen advocate Jeremy Hardjono shares his personal experience and the #1HELPS program he helped create after the suicide of his friend.

AAP CEO, Mark Del Monte, JD, joined us from Washington, DC as our keynote speaker to discuss important post-election and COVID-19 updates!
Brain break with Reh the cheetah from the Columbus Zoo, courtesy of Ohio AAP President Jill Fitch!

Dr. Alex Kemper joined us for a look back on important studies published over the past year that changed the way we practice in Ohio.

The COVID-19 Pediatrics Panels reviewed lessons learned and success as well as what comes next with Ohio AAP President Elect, Dr. Chris Peltier and Dr. Robert French, Dr. Mike Chamberlin, and Dr. Mick Connors.

Outgoing District V Chair, Dr. Rick Tuck started off day two with a "virtual Annual Breakfast" to discuss 2021 billing and coding changes.

The Panel of Emerging Science in Play, Hunger Cues, and Food Allergies led by Dr. Sarah Adams and joined by Dr. Ben Price & Crysten Skebo.

Interconception care was at the forefront during our Preventing Infant Mortality Between Pregnancy panel hosted by Dr. Mike Gittelman, Dr. Jamie Macklin, & Dr. Lizbeth Lazaron.
Congratulations
2020 Award Winners

Governor Mike DeWine
Amy Acton, MD, MPH
Special Achievement Award for Protecting Ohio’s Children and Families During the 2020 COVID-19 Pandemic

Mike Gittelman, MD, FAAP
Immediate Past-President Award 2018-2020

Ohio AAP Put-a-Lid-on-it Bike Helmet Safety Program
Sarah Denny, MD, FAAP • Mike Gittelman, MD, FAAP
Hayley Southworth, MS • Olivia Simon
Leonard P. Rome, MD, FAAP Award

Representative Beth Liston, MD, FAAP
Ohio House of Representatives
Antoinette Parisi Eaton, MD, FAAP Advocacy Award

Nicole Baldwin, MD, FAAP
William Cotton, MD, FAAP
Pediatrician Advocate Award

Robert Murray, MD, FAAP
Elizabeth Spencer Ruppert, MD, FAAP
Outstanding Pediatrician of the Year Award
Thank You to Our Generous Sponsors

Champion Level ($5,000 and Above)

Abbott Nutrition  aetna  OHIO BEEF COUNCIL  buckeye health plan  CareSource

Ohio Children’s Hospital Association

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Advocate Level ($2,500-$4,999)

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Jill Fitch, MD, FAAP  PCC  VORYS

Thank You to Our Exhibitors!
This year has brought to the forefront the harsh realities that exist in our society, including structural inequalities and prejudices that many underrepresented groups in our communities face every day. The Ohio AAP Chapter realized that as a leader in the field of Pediatrics and as a trusted resource to our members and those in the community, we could have a positive impact on this growing problem. Through the new Diversity and Inclusion Equity Representative we hope to strengthen diversity and inclusion not only in Ohio AAP membership but also through the impact of the chapter’s work on children and families of all backgrounds.

Ohio AAP is proud to announce Jordee M. Wells, MD, MPH as the new Diversity and Inclusion Equity Representative! Dr. Wells is an Assistant Professor of Pediatrics in the Division of Emergency Medicine at Nationwide Children’s Hospital and The Ohio State University College of Medicine. She also serves as the Director of Diversity, Health Equity and Inclusion for the Division of Emergency Medicine. Dr. Wells received her Bachelor of Science in Biology and Bachelor of Arts in Classical Civilizations from Howard University, Doctor of Medicine from the University of Connecticut School of Medicine, and Master of Public Health from The Ohio State University College of Public Health. She completed her general pediatrics residency and clinical fellowship in pediatric emergency medicine at Nationwide Children’s Hospital. As a Principal Investigator in the Center for Innovation in Pediatric Practice at The Abigail Wexner Research Institute at Nationwide Children’s Hospital, her research interests include health policy, social determinants of health, population health and reducing health disparities in pediatric emergency care.

As a dedicated child health advocate, Dr. Wells serves on the Child Health Advocacy Council at Nationwide Children’s Hospital and on the YMCA’s Head Start Health Advisory Committee. She also continues to provide both written and oral testimony at the local, state and federal level on various child health initiatives including the Tobacco to 21 Act and Dextromethorphan regulation on behalf of the Ohio AAP.

Dr. Wells is looking forward to sharing her expertise on diversity and inclusion efforts with Ohio AAP members. Her previous work on building awareness, targeted recruitment, fostering supportive environments and improving outcomes for patients will be an asset to all of Ohio’s children. Welcome to the team Dr. Wells, we can’t wait to see the great work we can accomplish together!

Thank you to our Store It Safe Event Sponsors

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**Ohio Children’s Hospital Association**

Saving, protecting and enhancing children’s lives

**Anthem**

Mike Gittelman, MD, FAAP & Family

**krile COMMUNICATIONS**

Jill Fitch, MD, FAAP

Chris Pellicer, MD, FAAP

**MOLINA HEALTHCARE**
Everything You’ve Been Wanting to Know About the COVID-19 Vaccine

Q&A with Bob Frenck, MD, FAAP, Ohio AAP TIES Medical Director

What is the youngest age that will be able to receive any of the COVID-19 vaccines?
Currently, the youngest is 12 years of age. However, we have been sent protocols from 2 different Sponsors with the age going down to 5 years of age. Some companies have talked about going down to 12 months or less, but no protocols have yet been sent.

Any thoughts or predictions on WHEN we will start vaccinating kids?
The clinical trials for children will likely start in late Winter to early Spring. In children, we are doing “Immunological Bridging Studies” - the numbers will be smaller and results available sooner (maybe within 2-3 months of enrolling). Thus, I still think it possible that we will have licensed vaccines for at least some pediatric age groups before the 2021-2022 school year.

What about patients who have tested positive whether symptomatic or not OR have positive antibodies - is there a plan whether they will be able to receive the vaccine?
Good question. That still needs to be decided. From small scale studies in adults, the frequency and type of side effects were the same whether or not you already had COVID-19.

Where do pediatricians fall in the distribution?
I think all health care providers seeing patients are seen as a single category. But the final decisions will come from the State Health Departments. The decision will also partly depend on how many doses of vaccine are available.

When will they use this same vaccine technology to come up with a universal influenza vaccine?
That would be great! One thing in favor of the COVID-19 vaccine is that the spike protein seems to be essential to the virus. The essential protein for flu looks to be the stalk protein. However, it has been difficult to get a good antibody against the stalk protein. Maybe new technologies will improve our ability to make a vaccine against the stalk protein.

Can you tell us more about the very low temperatures needed to keep the vaccines stable?
Pfizer informed us that they are currently looking at the stability of the vaccine at warmer temps. My guess is we will find that the Pfizer vaccine will have storage requirements similar to Moderna. However, tests will need to be conducted to be sure.

What temperatures are needed to store vaccines?
Currently, Pfizer is listed as -70C, Moderna is -20C, and Astra Zeneca is refrigerated. However, I think companies will be looking at the ability to safely store the mRNA vaccines at warmer temps and there will be a workable solution as to the storage requirements.

How do you recommend talking to families about potential long-term risks that can’t be known yet due to the vaccine creation timeline?
All the vaccines are targeting the spike protein. The mRNA vaccines are using mRNA that is degraded soon after it is translated into spike protein. So, there should not be any long term effects of the mRNA. The Astra Zeneca vaccine is using an adenovirus that is replication incompetent, meaning that the virus can’t live and grow in us. The Sanofi and NovaVax vaccines are protein vaccines, very similar to the flu vaccine. The end result is that while the technology is new, there is no evidence to indicate there is long-term harm from the vaccine candidates.

Are you concerned about how polarized the public is about science, especially prevention including vaccines?
I am concerned about the general breakdown in the trust of science and how public health measures are being viewed as political issues instead of safety issues. However, we need to keep up the fight and continue to be strong advocates for the health of children, particularly preventive medicine such as vaccines. If we don’t keep up the campaign to educate and inform parents, we will be putting the health of children at risk.

For additional immunization information visit the Ohio AAP’s Fast Vax Facts website at http://fvf.ohioaap.org.
Did you know…?

• Women often stop their own medical care for the first 18-24 months after child is born
• Moms may minimize their own health concerns, not realizing they affect newborn health outcomes
• Pediatricians are viewed by families as the trusted advocate for their child’s health
• Maternal depression is worse during a pandemic and disproportionately exaggerated in disadvantaged populations
• Providing multivitamins with folic acid to women of childbearing age increases consumption of daily multivitamins from 25 to 70 percent
• About 75% of women who stop smoking in pregnancy resume within 1 year after delivery
• The most crucial period for modifying birth outcomes is before a woman becomes pregnant

If you participated in the Healthy Mom, Healthy Family educational series in November, you may have heard these facts. Over 200 providers from around Ohio were engaged in this program, learning how behavioral risk factors for mothers can impact infant mortality and the health of entire families. Following education, many providers have asked how they can implement changes to make improvements in interconception care, or maternal health between pregnancies.

The Ohio AAP will launch the Healthy Mom, Healthy Family Quality Improvement Learning Collaborative program in early 2021, a new approach to improving family health and preventing infant mortality. Based on the lessons of the Implicit Program, an initiative piloted by the Family Medicine Education Consortium and supported by the March of Dimes, the new Healthy Mom, Healthy Family program will help providers improve the health of the entire family by addressing maternal health in pediatric well-child visits. This project will empower pediatricians and healthcare providers to discuss 4 behavioral risks affecting future outcomes: family planning/birth spacing; smoking cessation; multivitamin use; and maternal mental health.

The Healthy Mom, Healthy Family project will provide practices with tools and training to more fully screen mothers for health risks at infant well-child visits, such as maternal depression and smoking cessation. The Ohio AAP will provide practices with resources for those with identified needs, such as multivitamins. Practices can sign up now, and will begin the quality improvement (QI) project activities in January 2021 for a full kick off in February 2021.

Benefits to participating project practices include:

• Easy screening tool and no chart review data collection
• Up to $1,000 in resources for your patients – like multivitamins, board books, technology assistance, and printed materials
• Learn to implement the 5As to promote behavior change for lifelong health – Ask, Assess, Advise, Assist, Arrange
• Networking opportunities with providers interested in infant mortality or interconception care
• Personalized quality improvement coaching and Ohio AAP resources
• Participants in the 12 month collaborative earn up to 50 points of MOC Part IV credit in 2021

Registration is now open for practices to engage in the Healthy Mom, Healthy Family program. Contact Hayley Southworth with questions at hsouthworth@ohioaap.org or visit: http://ohioaap.org/implicit-toolkit/
Each day 4 children die from child abuse, neglect and injury. Thousands more suffer from injuries, abuse and toxic stress. What if you could incorporate screening and referral for problems like drug abuse, alcoholism, food insecurity, maternal depression, accidental injuries, unsafe sleep, and more in your practice?

The Ohio AAP’s Injury Plus SEEK Program is planning a wave 3 launch of the program in January 2021. **Wave 3 will allow providers to complete all activities via distance, and reduces chart reviews through new virtual screening tools.** The Injury Plus SEEK program teaches physicians how to implement a hybrid of the Ohio AAP’s Injury Prevention Screening Tool and the nationally recognized SEEK Tool, allowing physicians to more efficiently and effectively screen for child abuse and mental health risks, as well as the most common injury risks for children birth to five years of age. Additional benefits to participating practices include:

- Training, tools and talking points to assess and help address risky behaviors and psychosocial problems
- Maintenance of Certification Part IV and CME
- Family safety resources for distribution to patients
- Community resources for family referrals

To learn more or to register visit http://ohioaap.org/seek. For additional questions please contact Hayley Southworth at hsouthworth@ohioaap.org or at (614) 846-6258.
Dairy delivers a unique nutrient package. Milk’s nine essential nutrients can be difficult to replace. Did you know it takes 17 cups of raw kale to get the same amount of calcium in 3 cups of milk? But it’s not just about the calcium. See how protein, vitamin D and B vitamins stack up.

Milk’s nutrient profile is tough to match. Encourage people to read the nutrition facts label on milk and milk alternatives to better understand what is in their pour. These flash cards provide an at-a-glance look at the nutrition and ingredient profiles of milk and a variety of milk alternatives.

Dairy foods play an important role in diets of expectant moms, infants and children. The 2020 Dietary Guidelines Advisory Committee’s Scientific Report includes historic recommendations for expectant moms and children from birth to 24 months. Yogurt and cheese were recognized as complementary feeding options for infants 6-12 months. And food patterns for toddlers 12-24 months include 1.5 to 2 daily servings of dairy foods (e.g., whole milk, yogurt, reduced-fat cheese). These recommendations align with American Academy of Pediatrics’ guidance represented in this Guide to Feeding Your Baby for the First Two Years.

The Committee also notes milk and yogurt are good sources of iodine, a potential nutrient of public health concern for pregnant women, as iodine needs increase by more than 50 percent during pregnancy and prenatal iodine deficiency may lead to irreversible neurocognitive defects and lower childhood IQ.

Dairy foods are affordable, nutrient-rich contributions to the diets of children and adults. It only costs about $0.66* for one serving of nutrient-rich, low-fat milk. (*Based on IRI DMI Custom Database, Multi Outlet + Conv, 2020 through 2/23/20. Based on gallon equivalents – National average.)

Farmers care for their cows and the environment. Every day dairy farmers strive to leave the planet in better condition for the next generation. Check out our website to learn more about their commitment to the environment. To learn more join our virtual field trip and video on the commitment to ensure milk is free of antibiotics.

Dairy is linked to reduced risk of inflammation. Not only are dairy foods, including milk, yogurt and cheese, filled with essential nutrients our bodies need, but they also may help reduce inflammation. Learn more here.

Looking for more information on how dairy nourishes people while responsibly caring for our planet and animals?

Join the Dairy Nourishes Network. Members of the network receive the latest dairy research, resources and recipes, as well as opportunities for free continuing education.

Dairy nourishes

Helping people thrive throughout the lifespan.

Dairy foods, like milk, cheese and yogurt, play a foundational role in the Dietary Approaches to Stop Hypertension (DASH) diet and the Dietary Guidelines for Americans’ Healthy Vegetarian, Healthy Mediterranean-Style and Healthy U.S.-Style eating patterns. From their unique nutrient package, to research linking dairy foods to improved bone health - especially in children and adolescents - and to reduced risk of cardiovascular disease, type 2 diabetes and lower blood pressure in adults, dairy foods help people thrive.

Learn more online at USdairy.com or Drink-Milk.com
As we approach the end of 2020, it is time to take a step back and consider where we have been and where we are going during this momentous year. Strikingly, the AAP has continued to move forward on all fronts, while facing the challenges of COVID, racism/equity, mental health, and the transition to being an effective virtual organization.

Not to be lost, is remembering that the AAP has been dedicated to the health and well-being of children for 90 years. The planned celebration of this event has been pre-empted by the continuing challenges of COVID, which have preoccupied our organization, your professional lives, and our families. It is inspiring to celebrate our history of dedication to children, families, and to the pediatricians who serve them. Through the past year the Academy has continued to advance the pillar activities of Policy, Education, and Advocacy. Our virtual leadership, with Sally Goza our president, and Mark DelMonte, our energetic and dedicated CEO, has kept us on track and moving ever forward.

Nowhere, has this been more apparent than with the daily demanding issues of COVID, addressed with a proactive, vigilant approach. Keep in mind that the extensive AAP COVID resources and updates are available at aap.org, easily accessed by clicking on the COVID banner. Here you can view all guidance and access help for your practice, town hall video discussions, webinars, and other timely updates.

With the upcoming change in national leadership, the AAP has updated the Blueprint for Children, which has been important in our advocacy efforts. There is now a companion advocacy piece directed to the Biden/Harris administration.

This has also been the first year for the Board Committee on Equity. A proactive Board Equity Agenda has been established, as well as, the year one equity and diversity goals. Our District V Diversity and Inclusion Champion is also involved with moving equity, diversity, and inclusion (EDI) issues forward. Look for more as the national AAP, District V, and the Ohio Chapter advance these critically important initiatives.

This December marks the completion of my six years of service representing District V on the AAP Board. Lia Gaggino, from Michigan, will be replacing me. She is wonderfully qualified, articulate, passionate, and dedicated to the AAP. I thank you for the incredible opportunity of representing you as we jointly pursued the mission of the AAP, dedicated to the health of all children.

As I depart, I wish you the best and encourage each of you to be involved at the local, chapter or national level as we all speak out for and serve children and families.
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July 1, 2020-November 30, 2020

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Thank You for Helping Us
“Close the Lock” on Store It Safe Fundraising!

Our grassroots funding effort launched to build the Store It Safe Adolescent Suicide Prevention Program was able to achieve our goal of $86,126 in ten months thanks to the generosity of our leaders, members, and partners.

Here’s what’s Next...

If you are committed to preventing teen suicide, take the Store It Safe Pledge by visiting https://ohioaap.org/SISPledge. Take the pledge today and agree to be a part of the solution by screening teens for depression at every wellness visit, providing appropriate intervention resources, and offering gun lock boxes or discussing the importance of safe storage with teens and their families. The Ohio AAP Store It Safe program is committed to reversing the trend of irreversible actions and has recently released new educational handouts, online education modules, and the opportunity to receive FREE gun lock boxes for your practice or organization. To learn more or to access these great resources visit http://ohioaap.org/sisteen.
Dear Health/Medical/Public Health Partners,

I am writing to you to clarify that ultra-cold storage is NOT required to enroll as a COVID-19 vaccination provider. We continue to receive feedback that indicates some confusion about this issue.

If this misunderstanding has prevented you from enrolling as a COVID-19 vaccination provider, please enroll now. Go to the State of Ohio’s “OH|ID” webpage at https://ohid.ohio.gov and follow the steps outlined in the attached enrollment job aid and checklist.

With potential federal approval of one or more COVID-19 vaccines in the coming weeks, it is critical that we develop a strong network of vaccine providers across the state.

While the Pfizer/BioNTech COVID-19 vaccine requires ultra-cold storage, it will be shipped to enrolled vaccination providers without this capability in a storage container with dry ice if/after the vaccine receives federal approval. Vaccination providers must then replenish the storage container with fresh dry ice according to manufacturer guidelines that will be provided. The Ohio Department of Health (ODH) has prepared the attached fact sheet (“COVID-19 Ultra-Cold Vaccine Planning Considerations”) which includes considerations for handling the shipping container, dry ice packaging and the ultra-cold vaccine itself.

Assuming that the U.S. Food & Drug Administration (FDA) approves the Pfizer/BioNTech application for emergency use authorization for their COVID-19 vaccine, the Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices (ACIP) must issue recommendations on how to use the vaccine, including who it should be offered to and in what order, before the vaccine can begin to be administered. Both FDA approval and CDC ACIP recommendations are likely to occur in December. We must be prepared to then begin administering the vaccine immediately to individuals who are identified in the first vaccination phase and choose to receive it. The vaccine supply is expected to be limited initially, and Ohio will first vaccinate individuals who are most at risk, including high-risk healthcare workers, those who work in long-term care facilities/nursing homes, and first responders.

Pfizer and BioNTech announced on Nov. 18 that data from their Phase 3 study of nearly 44,000 people has demonstrated that their vaccine was 95% effective in helping to prevent COVID-19. The companies submitted an emergency use authorization application with the FDA on Nov. 20, and the FDA has announced that its Vaccines and Related Biological Products Advisory Committee will meet on December 10 to discuss the request. More details are available at https://www.pfizer.com/news/hot-topics/our_covid_19_vaccine_study_what_s_next.

Moderna announced on Nov. 16 that data from its Phase 3 study of more than 30,000 participants in the U.S. has demonstrated that its vaccine, which does not require ultra-cold storage, was 94.5% effective in helping prevent COVID-19. Moderna plans to submit an emergency use authorization application with the FDA in the coming weeks. More details are available at https://investors.modernatx.com/news-releases/news-release-details/modernas-covid-19-vaccine-candidate-meets-its-primary-efficacy.

AstraZeneca announced on Nov. 23 that data from its Phase 2 &3 studies of more than 23,000 participants in the United Kingdom and Brazil has demonstrated that one particular dosing regimen of its vaccine was 90% effective in helping prevent COVID-19. The company says that the vaccine can be stored, transported and handled at normal refrigerated conditions for at least six months. More details are available at https://www.astrazeneca.com/media-centre/press-releases/2020/azd1222hlr.html.


Working together as COVID-19 vaccines become available, we can protect Ohioans and end this pandemic. Please accept my appreciation for your steadfast work and dedication through these challenges.

Sincerely,

Stephanie McCloud
Director
Ohio Department of Health
Resident Focus

Ohio AAP 2020 Annual Meeting
Trainee Involvement
Joshua Prudent, MD
Pediatric Resident, PL-2, Nationwide Children’s Hospital
District 5 Resident Representative, AAP Section on Pediatric Trainees

My wife and I often joke that we are “without a homeland”. Growing up and meeting each other in California, then working in Minnesota and then Pennsylvania, then doing graduate/medical school in Maryland, and now continuing with residency/post-doctoral training in Ohio...In summary, we are a modestly well-traveled couple, at least when it comes to US states that we’ve lived in.

However, one of the biggest downsides to frequently moving to a different state – an experience I suspect many trainees are familiar with – is a sense of detachment from the issues facing our local communities. As a pediatric trainee, I should have some awareness of the unique socioeconomic barriers to good healthcare facing my patients’ families; awareness of the legislative goals in my state congress to address these barriers; and awareness of my advocacy allies among the pediatrician and larger healthcare community. But you cannot get a full view of these things through the standard day-to-day of medical school or residency or fellowship. You must seek them.

The Ohio AAP offers the opportunity and resources to be this well-rounded, well-grounded pediatrician advocate for your patient community, with the annual meeting being rich with advocacy training, legislative discussion, top-tier networking with other pediatricians and pediatric trainees and even training to help ensure your financial health. This year’s November meeting did not disappoint in any of these regards, and I hope that many of my fellow pediatric trainees were able to join.

One particular session that I would want Ohio’s medical students, residents, and fellows to be aware of is the Store It Safe launch event. This novel campaign from our state’s AAP chapter is a tour-de-force of both mental health and injury prevention advocacy. I am especially in awe of the alliance that created the program, bringing together firearm owners, physicians, and public health officials to form a united front against unintentional deaths and suicide among children.

My fellow pediatric trainees should not delay in getting involved with the Store It Safe campaign and joining the Pledge to help address this issue. (To find out more about the Store It Safe program turn to page 6 or visit http://ohioaap.org/sisteen. Personally, I aim to promote the campaign at my own institution, as well as among other trainees across AAP’s ten districts. I look forward to future Ohio AAP meetings and more opportunities to advocate for children.

S.I.S.
Store It Safe
preventing suicide among adolescents in Ohio

Take the Store It Safe Pledge to make a difference in preventing teen suicide!

Visit http://ohioaap.org/SISPledge to take pledge
• Receive free educational handouts for providers, parents, and teens
• View educational modules for additional information on the program and implementation
• Be the first to receive additional resources and Store It Safe updates

Free Gun Lock Box Distribution!

The Ohio AAP is excited to announce the availability of a limited supply of gun lock boxes to partners who promote Store It Safe in their communities. These boxes have been piloted for use by pediatric practices in Ohio, and are intended to be provided to families with teens as a method of assisting with suicide prevention by reducing access to lethal means.

Submit an application today at http://ohioaap.org/store-it-safe-lockbox-application for the chance to receive free resources.
9 Holes of Golf Fun!
Guests will enjoy an evening of networking, golfing and fun activities on each hole in this non-traditional 9-hole outing. Not the greatest golfer?! Perfect, grab a few friends and join us! Come, have fun and help us support Ohio AAP’s Put-a-lid-on it Bike Helmet Safety Program! SPOTS ARE LIMITED, SO REGISTER NOW!

Unable to attend the whole event? Attend the happy hour for ONLY $35!

Friday, May 14, 2021
5:00 PM Happy Hour • 6:00 PM Tee-off!

Royal American Links, 3300 Miller Paul Rd, Galena, OH 43021
$300 per foursome  $100 per person
• Green fees and cart for 4
• Dinner and 2 drink tickets

Since it was introduced in 2011, the Ohio AAP’s Put-A-Lid-On-It! Bike Helmet Program has grown to be one of the Chapter’s farthest reaching community programs. In eight years, this program has:
• Provided 57,000 bike helmets to Ohio children in need
• Expanded to more than 600 partners, representing law enforcement, legislators, schools, public health departments, and community groups
• Earned over 160 million media impressions in Ohio and nationally

Sponsor Levels

Presenting Sponsorship – $3,000
• Company name on ALL promotional materials
• Registration for two foursomes
• Customized carts
• Sponsorship of appetizer station
• Sponsorship of the 9th hole
• Full page ad in the summer issue of Ohio Pediatrics
• Two banner advertisements in the Ohio AAP Today e-newsletter

Signature Sponsorship Options
Limited quantities—all available on a first come, first served basis. Each Signature Sponsorship option includes signage at the sponsored area during the event, admission for one foursome or four attendees ($300 value) and recognition on the Ohio AAP website. Sponsors may also purchase additional foursomes for $250.

Tee-Off Food & Beverage Sponsor – $1,500
• Provides food and two complimentary drinks for 75 attendees during happy hour prior to tee-off

Late Night Bite Sponsor – $1,000
• Provides food and drinks for 75 attendees at the presentation of prizes to the winning teams

Hole Sponsor – $600
• Selection of a goofy theme for your hole!
• Registration for one foursome
• Sponsorship of one hole (2-8)

Fed. ID No. 31-1700823
For more information, contact Olivia Simon at osimon@ohioaap.org or (614) 846-6258

All levels of sponsorship will receive recognition on OhioAAP.org. To register, visit www.OhioAAP.org/Glowball.

Many Thanks for Your Continued Support of the Ohio AAP!
Injuries remain the leading cause of death and disability in children 1-16 years of age. In 2016, a study done by the CDC showed that more than 60% of deaths in children were the result of an injury. Many injuries to children occur in the home setting and are the result of burns, drowning, falls, non-accidental trauma, recreational activities, poisonings, playground and road traffic injuries.

On March 13, 2020 the United States declared a National Emergency concerning the novel coronavirus known as SARS-CoV-2 (COVID-19). Within one month, nearly all 50 states had enacted “shelter-in-place” orders requiring residents to stay within their homes and practice social distancing. This resulted in a nationwide shut down of schools and closures of playgrounds, daycares, and all places of business not deemed “essential”. As a result, families are staying at home more, resulting in more home-based injuries, and turning to outdoor activities as a means of socially distanced recreation resulting in more recreation-based injuries. Medical professionals have anecdotally noticed increases in domestic violence, non-accidental trauma in children, and home and recreational injuries.

During these unprecedented times, all providers need to acknowledge that children are at a greater risk for home and recreational injuries. Thus, as providers, pediatricians must educate families about age-appropriate risks and counsel them about proven safety actions.

See highlights for a review of existing publications on pediatric injury during COVID-19 that may help pediatricians when discussing injury anticipatory guidance with families.

Fractures – With the cancellation of school activities and organized sports, orthopedic surgeons have reported a reduction of fractures; however, there is an increase in fractures related to bicycle and trampoline injuries.1

- Trampolines should only be used one at a time to reduce the risk of injury.
- Adults and children riding bikes should be aware of safe cycling practices and ALWAYS wear a helmet.

Burns – A study in England looked at burn visits to a pediatric burn center and compared visits March 16th – June 3rd, 2020 (during the Stay at Home Order to the same period in 2019. Investigators found more burn visits presenting to EDs from house fires, yet the most common burns were the result of scald injuries.

- Families should be reminded not to carry hot coffee or tea near infants and children.
- Small children should not remove hot liquids from the microwave.
- Families should review fire safety plans and make sure smoke and carbon monoxide detectors are in good working order.

Dog Bites – A study at one Children’s Hospital noted a three-fold increase in the number of ED visits for dog bites since the stay at home order was implemented. Toddlers and children ages 5-9 are at highest risk of dog bites.4

- Infants and children should always be supervised around dogs.
- Children should not disturb dogs while eating, sleeping or caring for puppies.
- Teach children not to startle or pull on dogs.

Poisonings – The CDC published an article looking at data from the 55 Poison Control Centers in the US. The data showed a sharp increase in calls during March 2020 related to exposures to cleaners and disinfectants.3

- Families should be counseled on safe storage of cleaning products, medications, and other potentially hazardous substances. Children < 5 years old are at highest risk.
- Keep the number to the poison center next to the phone – 1-800-222-1222

Child Abuse – A study done at Johns Hopkins showed an increase in the proportion of traumatic injuries caused by child abuse during the pandemic compared to the same time period in 2019 and 2018. All the injuries were caused by blunt trauma.5

- Parents should remain diligent in who else is caring for their child.
- Pediatricians should help families identify safe links to their community, culture or religion to increase resiliency

Anxiety/Depression – We are just beginning to see the mental health effects of COVID 19 in our children and adolescents. The CDC published an article assessing Mental Health, Substance...
We are now enrolling practices into a new Injury + SEEK QI program. If you are interested in participating, please contact Olivia Simon at osimon@ohioaap.org.

For more information about how best to implement injury prevention into your daily routine, please visit the Ohio AAP website at http://ohioaap.org/injuryprevention.


Ohio AAP is pleased to announce an upcoming webinar offering CME focusing on vaccine hesitancy within your practice, specifically in the age of COVID-19. Date to be determined, but we will be offering two timeslots mid-to-end of March. More details to come – please mark your calendars now! For additional information, please contact the Director of Immunization Programs, Lory Sheeran Winland at lwinland@ohioaap.org.
# Ohio AAP Program Partners

Ohio AAP Acknowledges the following partners in support for Ohio Pediatric Programs

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Funding</th>
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<tbody>
<tr>
<td>Maximizing Office Based Immunizations/Teen Immunization Education Sessions</td>
<td>$400,000 (ODH)</td>
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<tr>
<td>Parenting at Mealtime and Playtime Education Program</td>
<td>$174,350 (ODH)</td>
</tr>
<tr>
<td>Smoke Free Families QI Program</td>
<td>$402,000 (GRC)</td>
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<tr>
<td>Preschool Vision Screening QI Program</td>
<td>$137,000 (Prevent Blindness Ohio Affiliate)</td>
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<tr>
<td>Child Abuse and Neglect Prevention Summits</td>
<td>$35,025 (Ohio Department of Public Safety, Office of Criminal Justice)</td>
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<tr>
<td>Lead Screening QI Program</td>
<td>$265,000 (ODH)</td>
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<tr>
<td>Population Health Pilot QI Program</td>
<td>$175,000 (United Healthcare Community Plan of Ohio)</td>
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<tr>
<td>Store it Safe Firearm Safety Pilot Project</td>
<td>$75,000 (Ohio Division of Emergency Services)</td>
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<tr>
<td>Chapter Quality Network (CQN) Improving Immunization Rates for Adolescents QI Project</td>
<td>$40,000 (American Academy of Pediatrics)</td>
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<tr>
<td>Ohio Parents Advocating for Vaccines</td>
<td>$20,000 (Unrestricted Education Grant)</td>
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<tr>
<td>Atopic Dermatitis QI Program and Regional Trainings</td>
<td>$350,000 (Nationally-Funded Quality Improvement Grant)</td>
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<tr>
<td>Practice Transformation Program: Improving Nexplanon Provision in Adolescents</td>
<td>$266,000 (Nationally-Funded Quality Improvement Grant)</td>
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<tr>
<td>HPV QI Program</td>
<td>$150,000 (Unrestricted Education Grants)</td>
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<tr>
<td>Interventions to Minimize Pre-term and Low Birth Weight through Continuous Improvement Techniques (IMPLICIT) QI Program</td>
<td>$1.2 Million</td>
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<tr>
<td>Teen Vaping Program for Juvenile Justice Caseworkers &amp; IMPLICIT Virtual Trainings</td>
<td>$25,000 (Aetna)</td>
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<tr>
<td>Polarticular Juvenile Idiopathic Arthritis (pJIA) – Building a System of Care to Improve Patient Compliance and Provider Connections in the Medical Home</td>
<td>$200,000 (Unrestricted Education Grant)</td>
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<tr>
<td>AAP and CDC Project Firstline Infection Prevention and Control</td>
<td>$15,000 (CDC and American Academy of Pediatrics)</td>
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Ohio Chapter,
American Academy of Pediatrics
94 Northwoods Blvd. Ste. A
Columbus, Ohio 43235-4721

Upcoming Events and Education

JANUARY 14, 2021
PMP Series: What to do if your COVID-19 plan is affected, Webinar

JANUARY 21, 2021
PMP Series: How to use social media and engage families, Webinar

JANUARY 29, 2021
Virtual Winter Executive Committee Meeting

FEBRUARY 8, 2021
PMP Series: Playing at home inside, Webinar

FEBRUARY 24, 2021
Atopic Dermatitis Training, Webinar

APRIL 23, 2021
Spring Education Meeting, TBD

MAY 14, 2021
Goofy Golf, Royal American Golf Course, Galena, Ohio

OCTOBER 29-30, 2021
Ohio AAP Annual Meeting, Hilton Polaris Columbus, Ohio