



## Statewide Advisory Commission on Immunization

### Meeting Minutes

September 13, 2017  
6:30 p.m. to 8:00 p.m.

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#### I. Attendees

##### Members and Staff:

Dr. Diana Abney (chair), Dr. Anne Bailowitz, Dr. David Blythe, Dr. Monique Soileau-Burke, Charles Flemming, Toby Gordon, Victoria McIntyre, Alicia Mezu, Robert Sadowski, Kurt Seetoo, Sara Vazer, Roseann Velez, Yen Dang

##### Guests:

Tom Bateman (Pfizer)

#### II. Welcome and Introductions

Dr. Diana Abney, Chair of the Commission, called the meeting to order at 6:34 p.m. and welcomed meeting participants. All Commissioners and guests introduced themselves.

#### III. Approval of Minutes

Minutes from the June meeting were presented. Minutes approved by consent.

#### IV. Commissioner Seats

Kurt Seetoo reported that we have one new member, Yen Dang, who is filling the recently vacated Pharmacy seat. We have some candidates for the open consumer seat. We have not heard from Dr. O'Donovan and Tiffany Tate, whose terms expired in 2016, as to whether they will be remaining on the Commission. If they cannot be reached, we would need to ask that they provide a designee. Dr. Abney would like to get a youth/young adult as a consumer added to the board. Since the Commission is in statute, we would need to approach MDH to change the law to add seats. Dr. Abney will pursue this unless there are objections from the Commission. Dr. Blythe did not object and supports it. If there are any other suggestions for seats, please let Dr. Abney know so that we can submit our suggested changes at one time.

#### V. Vaccination Rates in Maryland

Dr. Abney presented on AdultVaxView from the CDC website. Maryland does a good job with vaccinating children but we do not do as well with vaccinating adults. Using this application, you can look at different vaccines, age groups, and other variables. Then you can click on the map to see the rate for each state or territory and compare rates. Dr. Abney looked at the 2015 rates for pneumococcal immunization adults 18-64 years

as an example. In Maryland, that rate is 34.2%. The highest is Oregon at 39.8%. It is Dr. Abney's desire to work to improve these rates. One problem is that many adult providers do not carry vaccines. Pharmacists being able to vaccinate has helped improve these rates. Dr. Abney sees a need to increase awareness. Dr. Soileau-Burke reports that they have the vaccine in their office but often there are payment issues since insurance may not cover it. Dr. Abney asked if pharmacists take insurance. Tom Bateman reported that they do. Alicia Mezu also reported that they took her insurance at Rite Aid for flu shots. Dr. Abney wondered if there is a way that the Commission can do to get the word spread to direct adults where they can receive vaccine. Dr. Abney suggested that maybe we can get a provider letter from the Secretary of Health listing recommended locations for adult vaccines (e.g. local pharmacy, local health department, employee health of large businesses). Dr. Soileau-Burke thinks this is a good idea since she often has parents ask her where to get vaccines. Dr. Abney asked Dr. Blythe if we would be able to get a letter signed by the Secretary. Dr. Blythe thought that would be fine. Dr. Abney suggested that we also include information about bringing record of vaccination back to the adult's health care provider. Kurt Seetoo and Dr. Blythe reminded the Commission about ImmuNet that pharmacists do record vaccinations into ImmuNet. Dr. Blythe reports that ImmuNet is integrated into CRISP and has the capability of bidirectional exchange. Efforts are underway to make this more widespread. Dr. Abney suggests a first step: approach MDH to write a provider letter stressing the importance of adult vaccines, urging providers to carry adult vaccines or provide some resources to patients about where to get the vaccines, and encourage adult patients to bring back proof of vaccination to their provider if received elsewhere.

Dr. Abney also presented on VaxView how well we are doing with most childhood and adolescent vaccines. For adolescents, we are not doing as well with HPV, flu, Meningitis B vaccine. Dr. Abney asked for suggestions to raise adolescent vaccines rates? Dr. Bailowitz shared report about the MD AAP HPV project. On Sept 26 there will be a dinner meeting in Bel Air that will look at the improving HPV rates. In October there will be a similar talk at a site to be determined. The president of MD AAP, Dr. Abney, Dr. Bailowitz will be attending a special meeting to focus on lessons learned regarding HPV improvement efforts. Currently there is a group focusing on Quality Improvement for adolescent vaccines specifically meningitis and HPV. Dr. Abney participates in a study group that is going to look nationally at intervention and control to help increase HPV vaccine rates. Dr. Abney suggested that we need to reach out to family practice and obstetrician colleagues to encourage them to give HPV to their patients. Many teenagers often leave their pediatrician at 16-17 years old and go to family practice, adult primary care and/or OB/GYN for their care. These practices can catch those that did not receive HPV through their pediatrician.

## VI. **Simple Social Media**

Dr. Abney presented on a social media clip that her Public Information Officer (PIO) created for their health department Facebook page. It was simple to do with no need for fancy sets. Others can use this as an example for colleagues to promote vaccinations. Social media is a tremendous way to reach children/adolescents. Children/adolescents are watching on these venues and will approach their parents to get vaccinated. People do not read the papers anymore. Social media is the new method to get information out. Dr. Abney suggested that perhaps some others would be willing to make a few videos to give to MDH to put on their Twitter and Facebook pages. Dr. Abney asked Dr. Bailowitz if AAP would be interested in doing something like this. Dr. Bailowitz agreed. Maybe insurance or manufacturers may be helpful with these as well unbranded. Tom Bateman talked about the National Foundation of Infectious Disease website which has a number of social media tools that can be used. The CDC website also often has downloadable materials as well.

## VII. **Open Discussion**

Alicia Mezu reported that MD may be receiving many displaced students from Hurricane affected areas. These students would be considered "homeless" as they did with Katrina. Does MDH have any guidance? Dr. Blythe said that handling them the same way we did for Katrina would be the general guidance but we would look into this. Dr. Abney asked that we share through HO memos, provider letters, and MSDE. Question was raised about the registries in Florida and Texas and if they would allow someone here have access to their registry? MDH can look into this. Alicia Mezu will provide this information back to the superintendents.

Dr. Abney asked Dr. Blythe for a flu update. Dr. Blythe reported that we have seen cases of flu in Maryland, mostly type A. We are not officially in the flu season. The cases have not reported travelled so it is likely that they were locally acquired. He reports that he is unsure if this indicates an early flu season. Flu is around so it is not too early to get a flu shot. Australia had a relatively heavy season that was a little more severe with H3N2 infections. Dr. Abney asked if the vaccine is the same as last year. Dr. Blythe reported that the H1N1 component has changed but the other three strains are the same. Live attenuated vaccine (LAIV) is being used outside of US but not recommended here by CDC. Effectiveness of the LAIV is still being studied.

Date for the next meeting will be November 8, 2017 at 6:30 PM.

Dr. Soileau-Burke would like to have a talk about Men B at the next meeting. Dr. Abney agreed.

## **Motion to adjourn**

Meeting adjourned at 7:38 PM