Chief Chat— As the deadline for the annual Aid To Local (ATL) application process draws closer, we would like to remind Local Health Departments (LHD), Federally Qualified Health Centers (FQHC) and Rural Health Centers (RHC) of a few items. First and foremost, all LHDs are reminded to please refer to the Immunization Action Plan (IAP) information page in the Kansas Grants Management System (KGMS) for detailed instructions regarding applying for the IAP as well as the Memorandum of Understanding (MOU) for vaccinating under-insured children. All LHDs are required to start and complete at least the first two questions in the IAP applications regardless of how you chose to apply for the IAP funds. The first two questions ask you to declare if and how you are applying for the funds (directly through IAP or in combination with the Maternal Child Health application) and also if you intend to vaccinate under-insured children through an executed MOU with an FQHC or RHC. If you are applying for the IAP through the MCH, you will only complete the first two questions on the IAP application then submit it. If you are applying for the IAP directly through the IAP, you will complete the remaining questions and submit the IAP application along with the budget. All applications and the completed MOU are to be submitted to kdhe.atl@ks.gov.

The MOU between FQHC/RHC and LHDs is strictly an acknowledgement from an FQHC/RHC that a LHD may administer public vaccine to under-insured children on their behalf when they present to the LHD. This does not mean that the FQHC/RHC is referring their clients to the LHD for these vaccines or that the LHD is the only place for these vaccines to be administered. This MOU was created through an agreement of the Health Resources and Services Administration (HRSA) and the Centers for Disease Control and Prevention (CDC) to assure access to vaccines for all under-insured children, acknowledging that not all of these children have easy access to an FQHC/RHC. This MOU increases the access to vaccines by enlarging the net of providers throughout the state. There are three pages to the MOU and all must be submitted for the MOU to be complete. The third page is for listing the prescribing providers at the LHD. All MOUs are being collected and will be signed by the VFC Manager at KDHE immediately after the ATL application process is completed on March 31st. A copy of the fully signed MOU will be returned to the LHD for your records and for sharing with the FQHC/RHC who co-signed with you.

On February 21, the U.S. Department of Health and Human Services published an article online titled The Rise in Acute Hepatitis B Infection in the U.S. Authored by Rhea Racho, Hepatitis B Foundation, and Kate Moraras, Hepatitis B Foundation and Hep B United, the article links the opioid epidemic in the U.S. to the risk of contracting infectious diseases such as hepatitis B (HBV), hepatitis C (HCV), and/or HIV through injection drug use. In summary, “low rates of hepatitis B vaccination coverage among adults and increasing rates of injection drug use are fueling a raise in acute hepatitis B infections in the United States.” We encourage you to review this article and consider how you may increase adult vaccination rates in your practice where applicable.

Have a great week and thank you for all you do each day to immunize Kansans!

Phil Griffin, Deputy Director, Bureau of Disease Control and Prevention
VFC Question of the Week–

Q: The Daylight Savings time change will be happening soon. Please remind me how to change the data logger time.

A: The data loggers time should be updated to Daylight Savings time on Monday March 12th. You can find the instruction on how to change the time in Video Part 3. You can find this video on our website at: http://www.kdheks.gov/immunize/datalogger_information.htm

Our recommendation is to review the video prior to the time change so you can quickly change the time when you check the temperatures Monday morning.

DID YOU KNOW


2017-18 Influenza-like Illness Surveillance–

The Influenza-like Illness Surveillance Network (ILINet) sites are monitoring patients for influenza-like illness (ILI) – symptoms include a fever (> 100 degrees F) and the presence of a cough and/or sore throat. ILINet sites also submit up to two specimens for testing at the Kansas Health and Environmental Laboratories (KHEL). These specimens help monitor what types of influenza are present in Kansas. During the week ending March 3rd, ILINet sites reported 7.0% of visits were due to influenza-like illness. All data is subject to change. KHEL has detected A/H3 in 29 specimens, A/H1 in seven specimens, A (not subtyped) in one specimen, and influenza B in eight specimens. Sixty-eight influenza outbreaks have been reported to KDHE this season. As a reminder, outbreaks of any disease are reportable and should be reported to the epidemiology hotline at (877) 427-7317. Stay updated on influenza activity at http://www.kdheks.gov/flu/surveillance.htm).
The American Pharmacists Association (APhA) has developed a new 1-page chart (What You Should Know…Zoster Vaccines) to illustrate the differences between the two zoster vaccines (Shingrix [RZV]; GSK and Zostavax [ZVL]; Merck). The document provides information at a glance about storage (freezer vs. refrigerator), vaccine type, route of administration (IM vs. SC), dosing intervals, age indications, contraindications, adverse effects, and concomitant administration.

American Pharmacists Association Zoster Vaccine Tool-

The American Pharmacists Association (APhA) has developed a new 1-page chart (What You Should Know…Zoster Vaccines) to illustrate the differences between the two zoster vaccines (Shingrix [RZV]; GSK and Zostavax [ZVL]; Merck). The document provides information at a glance about storage (freezer vs. refrigerator), vaccine type, route of administration (IM vs. SC), dosing intervals, age indications, contraindications, adverse effects, and concomitant administration.

CDC’s Public Health Grand Rounds on March 20-

CDC’s Public Health Grand Rounds will present Global Introduction of New Vaccines: Delivering More to More on March 20 at 1:00 p.m. (ET). Vaccinations save the lives of 2 to 3 million people every year, including children. Yet 1 child dies every 20 seconds from a disease that could have been prevented by a vaccine. Why? Because 1 in 5 children in the world do not have access to the life-saving immunizations that keep children healthy. View this one-hour session live on the external webcast link during the scheduled time. Sessions are archived 3–4 days after each presentation, so you can view any of these presentations on the archive page at your convenience.
Aggregate Inventory Training
The Aggregate Inventory Training occurs every Monday from 1p-2p, and the first Friday of every month from 10:30a-11:30a. This call will go over the basics of the On Hand, Reconciliation submission, Vaccine Ordering and Return windows in KSWebIZ for Aggregate Users. Bring questions and examples of issues that your clinic is having with the end of the month reporting. Please note: this call is for KSWebIZ Aggregate (HL-7) Users Only!
Register now for the date that works best for you!
https://attendee.gotowebinar.com/rt/659870511102500354

Direct Entry Inventory Training
The Direct Entry Inventory Training occurs every Tuesday from 1p-2p, and the first Friday of every month from 12p-1p. This call will go over the basics of the On Hand screen, Reconciliation submission, and Vaccine Ordering and Return windows in KSWebIZ. Bring questions and examples of issues that your clinic is having with the end of the month reporting. Please note: this call is for KSWebIZ Direct Entry Users Only!
Register now for the date that works best for you!
https://attendee.gotowebinar.com/rt/4121654947304535298

New User Training
The New User Training occurs every Thursday from 2p-3p, and the second Friday of every month from 12p-1p. This basic training is for new KSWebIZ users, or people who would like a simplified refresher training on how to use KSWebIZ. We will be going over log-in, adding history, administering vaccinations, printing consents and pink cards. If you are a new user, please take the time to sit in on this training! Please note: this call is for KSWebIZ Direct Users Only!
Register now for the date that works best for you!
https://attendee.gotowebinar.com/rt/1572841858584797442

School Module Training
The School Module Training occurs on the third Friday of every month from 9a-10a. This basic training is for new KSWebIZ school module users, or people who would like a simplified refresher training on how to use the KSWebIZ School Module. We will be going over log-in, adding history, education, and printing reports. Please take the time to sit in on this training! Please note: this call is for KSWebIZ School Module Users Only!
Register now for the date that works best for you!
https://attendee.gotowebinar.com/rt/8422671756415350273

Reports Training
The Reports Training occurs the fourth Friday of every month from 12p-1p. This training is for KSWebIZ users who are wanting to learn more about the KSWebIZ Reports module. We will be going over the most often used reporting sections and how to generate reports within these sections. We hope you have time to sit in on this training! Please note: this call is for KSWebIZ Direct Users Only!
Register now for the date that works best for you!
https://attendee.gotowebinar.com/rt/568840407867357186

Pharmacy Training
The Pharmacy Training occurs every Monday from 10a-11a and every Wednesday from 12p-1p. This training is for KSWebIZ pharmacy users that are new or would like a simplified refresher training on how to report immunizations to the state registry in compliance with statute KSA65-1635a. The training will consist of, logging-in, searching a patient, updating patient demographics, and adding immunizations. Please take the time to attend this training! Please note: this call is for KSWebIZ Direct Entry Pharmacy Users Only!
Register now for the date that works best for you!
https://attendee.gotowebinar.com/rt/7882741178298559746
<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Date</th>
<th>Vaccine</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthrax</td>
<td>3/10/10</td>
<td>MMR</td>
<td>2/12/18</td>
</tr>
<tr>
<td>Chickenpox</td>
<td>2/12/18</td>
<td>Tdap</td>
<td>2/24/15</td>
</tr>
<tr>
<td>DTaP/DT/DTP</td>
<td>5/17/07</td>
<td>MMRV</td>
<td>2/12/18</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>7/20/16</td>
<td>Multi-vaccine</td>
<td>11/05/15</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>7/20/16</td>
<td>PCV 13</td>
<td>11/05/15</td>
</tr>
<tr>
<td>Hib</td>
<td>4/2/15</td>
<td>PPSV</td>
<td>4/24/15</td>
</tr>
<tr>
<td>HPV9</td>
<td>12/2/16</td>
<td>Polio</td>
<td>7/20/16</td>
</tr>
<tr>
<td>HPV4 (Gardasil)</td>
<td>5/17/13</td>
<td>Rabies</td>
<td>10/6/09</td>
</tr>
<tr>
<td>HPV2 (Cervarix)</td>
<td>5/03/11</td>
<td>Rotavirus</td>
<td>2/23/18</td>
</tr>
<tr>
<td>Influenza (LAIV4)</td>
<td>8/07/15</td>
<td>Shingles</td>
<td>2/12/18</td>
</tr>
<tr>
<td>Influenza (IIV3 or IIV4)</td>
<td>8/07/15</td>
<td>Smallpox</td>
<td>10/01/09</td>
</tr>
<tr>
<td>Japan. enceph.</td>
<td>1/24/14</td>
<td>Td</td>
<td>4/11/17</td>
</tr>
<tr>
<td>MCV4/MPSV4</td>
<td>3/31/16</td>
<td>Typhoid</td>
<td>5/29/12</td>
</tr>
<tr>
<td>MenB</td>
<td>8/09/16</td>
<td>Yellow fever</td>
<td>3/30/11</td>
</tr>
</tbody>
</table>

**Vaccine Redistribution**

Please email any additions or changes to be made on the Vaccine Redistribution lists with subject matter “Redistribution” to kdhe.vaccine@ks.gov or call toll free at 1-877-296-0464 [Vaccine Redistribution information and lists](mailto:kdhe.vaccine@ks.gov).

**REMINDEERS:** Providers may place the excess doses on the KIP Redistribution list if:

1) The vaccine has a minimum of 90 days and a maximum of 365 days before the vaccine’s expiration date.
2) The ordering provider is responsible for any doses which expire on the redistribution list that have not been accepted for transfer to another VFC provider.
3) Providers accepting vaccine from the redistribution list are responsible for using the doses once they are transferred. KIP encourages providers to accept only doses they can administer before the expiration date.
4) The transferring and receiving provider will document these doses on their monthly reconciliation reports as transferred vaccines.
5) Once vaccine is transferred please contact KIP to let us know so we can adjust the redistribution list by either deleting the line or by reducing the amount of doses.
6) All vaccines must be in full boxes.
7) The KIP Regional Immunization Consultant who is on call must be contacted prior to transferring vaccine.
8) Providers are responsible for keeping KIP notified if there is a change in amount of doses available for redistribution.
9) When placing an order, you may be contacted if the vaccine you are trying to order is on the redistribution list.
10) Varicella and Proquad will not be posted on the VFC or Private Vaccine Redistribution List. Frozen Varivax vaccines are very intolerant to out of range temperatures. To prevent potential vaccine waste the KIP requests that Varivax containing vaccines not be transferred to other providers. For questions regarding transporting vaccine call 877-296-0464 to request assistance.