

March 2009

The BUZZ



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Kansas Second Most Improved State in Immunization Rates

Kansas’ childhood immunization rates have been increasing and those improvements have earned the state the recognition of having the second highest increase in immunization rates for the 4:3:1:3:3:1 series over a three-year period of time. Kansas will receive an award for its achievement in late March at the 2009 National Immunization Conference.

“By receiving the right immunizations at the right time, Kansas kids are going to have a healthier start in life,” said Governor Kathleen Sebelius. “Immunizations are part of our larger effort to promote preventative care in Kansas. Not only does it improve the health of our citizens, but it keeps costs down for everyone.”

“Each year that we see an increase in immunization rates is a positive step, but to sustain those increases over time and show a positive trend for Kansas is even more significant,” said KDHE Secretary Roderick L. Bremby. “We have made great progress as a state, but it’s important to recognize that we still have a system to improve and we will continue working with our partners to ensure that Kansas children are immunized on time.”

Kansas will receive the award for showing the second most improvement based on immunization rates from 2004 through 2007. Over that time period, the state has seen an 11.3 percent increase in coverage in the 4:3:1:3:3:1 series to its current 76.0 percent coverage rate. Nationally, the average increase was 1.2 percent. Texas will be recognized as the most improved state with a 13.5 percent increase in the series. The rates are compiled by the Centers for Disease Control and Prevention (CDC) through the annual National Immunization Survey (NIS) which provides state-level estimates of immunization coverage among 19 to 35-month-old children.

Starting in 2005 the 4:3:1:3:3:1 series became the standard measure for national Healthy People 2010 reporting. The series consists of four doses of DTaP vaccine, three doses of polio vaccine, one dose of measles-mumps-rubella vaccine, three doses of haemophilus influenzae type b vaccine, three doses of hepatitis B vaccine, and one dose of varicella vaccine.

“Since 2003, KDHE has collaborated with its partners to make changes to the Kansas immunization system, including incorporating recommendations established by the Governor’s Blue Ribbon Task Force. Those changes have had a positive impact on our state’s immunization rates,” Bremby said. “Currently we are involved in Immunize Kansas Kids, a collaborative effort with the Kansas Health Institute. Our hope is that as we begin to implement the findings from that effort we will continue to see success and make even more progress in our immunization coverage rates.”

The following actions have been implemented since 2003 to increase the state’s immunization rates:

- *Implemented a statewide immunization registry (a centralized database of immunization records) to ensure parents and health care providers know a child’s immunization schedule so that he or she can be fully immunized. The registry now contains records for more than 1.3 million Kansans documenting more than nine million immunizations. Local health departments in 80 of the 105 counties in Kansas and 125 private providers have access to the registry. This is one of the largest health information exchange networks in the state.
- *Recommended an accelerated immunization schedule for DTaP (diphtheria, tetanus, and pertussis) vaccine to ensure more children complete the series by allowing them to receive the fourth DTaP dose at 12 months, rather than 15-18 months.
- *Required hepatitis B and varicella (chickenpox) vaccine for school entry starting in 2004.
- *Expanded the Immunize and Win a Prize program statewide, to provide an incentive for parents to ensure their child is fully immunized, and to assist those families struggling with financial issues surrounding immunizations.
- *Partnered with the Kansas WIC program regarding immunization status of children in the program.
- *Partnered with Kansas Health Institute and Kansas Health Foundation to implement the Immunize Kansas Kids project, which produced research to examine barriers to childhood immunizations in Kansas.

WELCOME NEW PROVIDERS!

KSWEBIZ PROVIDERS

- Grant CHD-HL7 Interface
- Ford CHD- HL7 Interface
- Dr. Rubin
- Mowery Clinic L.L.C.

SCHOOL NURSE MODULE

USD 457 - Garden City
USD 290 - Ottawa
USD 288 - Central Heights
USD 365 - Garnett
USD 368 - Paola
USD 416 - Louisburg
USD 287 - Pomona
USD 421 - Lyndon, USD 454 - Burlingame
USD 456 Marais des Cygnes
USD 230 - Spring Hill
USD 434 - Santa Fe Trail
USD 362 - Prairie View
USD 367 - Osawatomie
USD 346 - Jayhawk
USD 420 - Osage
USD 344 - Pleasanton
USD 289 - Wellsville

Vaccine Management Key To Successful VFC Programs

Why VFC Vaccine Management, Storage, Handling, and Reporting so important to the success and sustainability of the program.

In recent years, the number of vaccine doses distributed to Kansas Vaccines of Children (VFC) providers has dramatically increased due to new vaccines and expanded immunization recommendations. During 2008, the VFC program distributed over 570,500 doses of publically purchased vaccines to public and private providers enrolled in the VFC program. This equates to an average of 1,555 doses received by each provider annually. This is a 48% increase in the number of doses distributed only four years ago.

It is estimated that at any given time, the average provider stores tens of thousands of dollars worth of public and private vaccines in their storage units. For example, in 2004 VFC vaccines shipped to providers equaled \$7,585,815.00; in 2008 this amount was \$20,036,533.00 or a 264% increase.

Vaccine management, storage, handling and reporting is a priority to the Kansas Vaccines for Children (VFC) program. These vaccine distribution increases exemplify the need for consistent monitoring of VFC provider vaccine management processes. Correct vaccine storage, handling and reporting assures the integrity of the vaccines administered to patients, prevents inadvertent administration of improperly stored vaccines and avoids unnecessary vaccine wastage.

Vaccine potency and effectiveness is diminished when exposed to temperatures outside the manufacturer's recommended range. Inactivated vaccines are irreversibly damaged when exposed to freezing temperature (32 degrees Fahrenheit and below) and live vaccines are compromised with when exposed to elevated temperatures. In 2008, there were 4,499 doses of expired and wasted vaccines totaling \$385,239.99.

Monthly provider reporting of immunizations administered, transferred, wasted or unaccounted for are important for monitoring vaccine usage and needs. Monthly temperature logs are critical to documenting the vaccines have been stored properly and are viable. These reports are due by the 10th of the month following the month of service. *Provider vaccine orders will be placed on hold if missing monthly immunization (MIR) and temperature logs, which are due by the 10th. have not been received by the 30th of the month.* Timely receipt of these reports is one way we all help assure the integrity of the program and the vaccines. KIP understands that immunizations are only a small portion of your daily activities but it is a large portion of the investment we all make to help protect our communities and the persons who live in them.

By Martha Froetschner
VFC Manager

Vaccine Storage and Handling Web Conference Coming Up!
Please register for "Current Issues in Immunizations" with a focus on Vaccine Storage and Handling

When: Thursday March 12th

Time: Noon to 1pm ET

Presenter: NCIRD Nurse Educator Donna L. Weaver, MN, RN

Moderator: NCIRD Medical Epidemiologist Andrew T. Kroger, MD, MPH.

Register at: <http://www2.cdc.gov/vaccines/ed/ciinc>

Why is vaccine handling and storage so important?

*Registration is limited and will close on March 11 or when the course is full.



Debbie Baker

Debbie and Shelly have over 33.5 years of combined experience with the KIP program, helping to keep the program running from day to day!

- Make sure to submit your monthly immunization reports and temperature logs in by the 10th of each month and confirm that all information on forms is correct. We have recently been receiving forms with the wrong reporting month and some forms have been completely blank. Submitting the correct information in a timely fashion can help prevent being placed on hold for vaccine orders.



http://www.kdheks.gov/immunize/vfc_program.html

The ABC's of VFC

VACCINE REDISTRIBUTION: Please email [Mike Parsons](#) with any vaccines that you wish to add to the [Vaccine Redistribution website](#).

Please include the following information in your email: **Provider Name, VFC PIN number, phone number, email, vaccine type, vaccine manufacturer, number of doses and expiration date.** Mike will update the list and post to our website as well as send out each week in "What's Happening Wednesday!" We will attempt to assist you in relocating vaccines with approaching expiration dates. We cannot guarantee we will be able to find you a location and would appreciate a three month notice. Vaccines that expire within 30 days of contact will not be considered. Please plan ahead!

VACCINE INFO AND UPDATES- [Sanofi Td \(Decavac\)](#) in 10 pack, single dose vials are now available to order through the Kansas Vaccine for Children Program. Previously, only syringes were available.



Shelly Pfeffer

HEALTH ED LIBRARY ITEMS-

For those of you who still use the 3x5 IMMUNIZATION RECORD and IMMUNIZATION TICKLER cards, we have updated and placed them on our website for you to print. They are not available on our Health Ed Material site. Click below to download your copy.

http://www.kdheks.gov/immunize/em_orders.htm

GET READY FOR NATIONAL INFANT IMMUNIZATION WEEK-

National Immunization Week (NIIW) will be celebrated April 25-May 2, 2009 in conjunction with *Vaccination Week in the Americas (VWA)*. The theme for NIIW is "Love them. Protect them. Immunize Them." Visit [the NIIW Events Webpage](#) for planning and evaluation resources, public relations materials, and communication campaign materials. Add your local activity to the [National Calendar of NIIW Events](#).



Stanford Medicine's Spring Edition Delves Into Vaccine Issues Vaccine



The Stanford University School of Medicine's recently published spring edition of *Stanford Medicine* provides insight into many of the issues faced daily by vaccine advocates. The journal provides insightful information on numerous vaccine topics from ingredients to vaccine safety challenges to policy.

This special report, aptly titled, "Hot Shots: Vaccines Under the Gun" is prefaced with a letter written by Every Child By Two co-founder former first lady Rosalynn Carter. Mrs. Carter discusses the fact that in 2008, the U.S. experienced one of the largest measles outbreaks in over a decade. Mrs. Carter first responded to a measles outbreak in 1991 when she and former first lady of Arkansas Betty Bumpers started Every Child By Two.

Below are a few notable excerpts from the issue:

A Skeptical Public

Stanford Medicine lays out the issues the public health community faces as they seek to ensure that an increasingly skeptical public is protected from infectious disease. Jonathan Rabinovitz writes about the experiences of a family in Manchester, England who express grief over their decision not to vaccinate their daughter for measles as the child suffers. Mr. Rabinovitz chronicles the events that led to the family's decision to avoid vaccination beginning with the findings of Andrew Wakefield, "who has perhaps done more than any other doctor to create the current fears about vaccines and autism" after publishing faulty research in 1998, which spread like wildfire throughout the U.S. and Europe.

Media's Role in Communicating Science

"When Science Gets Hijacked" written by Dr. Nancy Snyderman, NBC News Chief Medical Editor, discusses the lasting impression of growing up in the 1950s during the polio epidemics as her father, a young surgeon, was "afraid to come home from the hospital, and afraid to hug us, wondering if he might be transporting death to his family." Dr. Snyderman describes why she avoided covering news related to autism after her initial report on the National Childhood Vaccine Injury Act for NBC's *Today Show* was met with much vitriol; however, one book written by a man whose "courage made me realize that none of us can afford to sit on the sidelines when science is hijacked" was the impetus for her return to reporting on this critical issue. That scientist was Dr. Paul Offit, author of *Autism's False Prophets*.

Actor and Mother Amanda Peet Advocates for Vaccines

Every Child By Two's *Vaccinate Your Baby* campaign volunteer spokeswoman Amanda Peet provides insight into her courageous decision to counter the misleading beliefs in Hollywood. After consulting with medical experts, Ms. Peet decided to vaccinate her daughter and speak publicly about her trust in the science behind vaccines. Ms. Peet, while not well-versed in scientific methodology herself, puts her faith in the medical community and their research which has shown that vaccines are safe: "I think vaccine opponents don't want to talk about the data because they're hard to dispute. It's hard to argue that reproducible, transparent data are biased – they're inherently unbiased."

For Further Information: <http://stanmed.stanford.edu/2009spring/index.html>

✦ Kansas Immunization Requirement School Nurse Tool

The *Kansas Immunization Requirement School Nurse Tool* has been written in collaboration between Olathe, USD #233, under the direction of Cindy Galemore, Health Services Coordinator, and Johnson County Health Agency. The document was developed to assist school and public health nurses with navigating the required immunizations for the 2009-2010 school year. Permission has been granted by USD #233 and the Johnson County Health Agency to make this resource tool available to all nurses working in schools and local health departments who help assure the recommendations are followed.

To view this document visit the Kansas School Nurse Organization website at:

www.ksno.org

✦ Kansas Immunization State Conference Call For Posters

The Kansas Immunization Program Annual Conference "Communicating the Facts" is looking for POSTER/PRESENTATIONS to be displayed at this year's conference in Wichita. There is NO cost to display, but space will be limited. This will be a chance for you to show off some of your best practices and share with others highlights and things that work well while dealing with immunizations. If interested, please email Mparsons@kdheks.gov by noon on March 20th!



"Communicating The Facts"
October 14-16, 2009
Hyatt Hotel, Wichita KS



2009-2010 Immunization Requirements for Child Care Facilities

New Immunization Requirements for Children in Child Care *by Mary Murphy, Child Care Licensing and Registration*

For the first time in over 20 years, Kansas immunization requirements for children in child care settings have been updated. Historically immunization requirements for children in out of home child care have been found in the child care regulations. In 2008, the Immunization Program and the Child Care Licensing and Registration Program collaborated to amend the Immunization Regulation for Schools, K.A.R. 28-1-20, to include requirements for children in licensed child care facilities and registered family day care homes and in early childhood programs operated by schools. Updating the immunization requirements for child care and combining with the requirements for school entry provides continuity and a single regulation for the immunization requirements for children.

Implementation of the new requirements is being phased in to allow time for child care providers to review the files of children in care and to allow time for parents to update their children's immunizations. In February, child care providers were notified of the new requirements. This spring and summer local child care licensing surveyors are offering training and consultation on the new requirements and assisting child care providers in identifying children in need of additional immunizations. Licensing surveyors will monitor for compliance with the new requirements beginning in August 2009.

IMMUNIZATION REQUIREMENTS FOR LICENSED CHILD CARE FACILITIES, REGISTERED FAMILY DAY CARE HOMES AND EARLY CHILDHOOD PROGRAMS OPERATED BY SCHOOLS FEBRUARY 2009

Immunization requirements and recommendations for the 2009-2010 school year are based on the Advisory Committee on Immunization Practices (ACIP) recommendations. The current immunization schedules, including catch up schedules, may be found at <http://www.kdheks.gov/immunize/schedule.htm>.

K.A.R. 28-1-20 defines immunizations required for children attending child care programs licensed or registered by KDHE or early childhood programs operated by schools.

Diphtheria, Tetanus, Pertussis (DTaP): five doses required. Doses given at 2 months, 4 months, 6 months, between 12-15 months (6 months after dose 3) and 5 years. Four doses acceptable if dose 4 given on or after the 4th birthday. Booster dose of **Tdap** required at age 11.

Poliomyelitis (IPV/OPV): four doses required. Doses given at 2 months, 4 months, 6 months and 5 years of age. Three doses acceptable if dose 3 given on or after the 4th birthday.

Measles, Mumps, Rubella: two doses required. Doses given between 12-15 months and 5 years of age.

Hepatitis B: three doses required. Doses given at birth, 2 months, and between 6-18 months.

Varicella (chickenpox): two doses required unless history of varicella disease documented by a licensed physician. Doses given between 12-15 months and between 4 -6 years of age.

Haemophilus influenzae type b (Hib): three doses required for children less than 5 years of age. Doses given at 2 months, 4 months and 6 months. Total doses needed dependent on the age of the child when doses given.

Pneumococcal conjugate (PCV7): four doses required for children less than 5 years of age. Doses given at 2 months, 4 months, 6 months, and between 12-15 months. Total doses needed dependent on the age of the child when doses given.

Hepatitis A: two doses required for children less than 5 years of age. Doses given at 12 months and 18 months (6 months after dose 1).

In addition to the immunizations required for children attending child care programs licensed or registered by KDHE and early childhood programs operated by schools, the 2009 ACIP recommends the following additional immunizations:

Rotavirus: three doses *recommended* for < 8 months of age; not required.

Influenza: yearly vaccination *recommended* for all ages \geq 6 months of age; not required.

The complete ACIP recommendations can be found at: <http://www.cdc.gov/vaccines/pubs/ACIP-list.htm>

Efforts by child care providers and schools have been central to the success of public health efforts in eliminating vaccine preventable diseases. Additional information about the updated requirements for child care is available at

http://www.kdheks.gov/immunize/download/School_&_Child_Care_Imm_Requirements_2009-2010.pdf

Thank you for this success.

For all the information on the 2009-2010 Child Care Immunization Requirements contact!



CHILD CARE LICENSING & REGISTRATION PROGRAM
CURTIS STATE OFFICE BUILDING, 1000 SW JACKSON ST., STE 200, TOPEKA, KS 66612-1274
Voice 785-296-1270





Just Lookin' Around!



Family Care Center RHC-Erin Zook

In 2004, Erin Zook started at the Family Care Center RHC in Garnett. Although they have an electronic medical record (EMR) in their practice, Erin felt the benefits from the registry outweighed the time it would take to wait for an interface, so they enrolled in October 2008. Erin's favorite part of KSWebIZ is the monthly immunizations report and the crisp, clean look of the pink cards and KCI's. When Erin heard about running reminder recalls, she ensured that all of Family Care Center's patient records would be input by a PRN nurse. Since then, she has run a reminder recall each month. Erin loves keeping up on who is current on their vaccinations and loves KSWebIZ!

Labette CHD- I think the "What's Happening Wednesday" is a great idea and very helpful. The information is timely and keeps me current. As I read through it each week, it is very easy to cut and paste website addresses or pieces of information into an e-mail and send it to other staff or other agencies that we work with. Appreciate that you take the time to do this each week! *Debbie Lindeman, RN Labette County Health Department*

Influenza Update- As of February 28, influenza activity continues to increase across the state. *Unvaccinated patients may still benefit from a flu immunization, as the peak of activity may not occur for several more weeks.* The state laboratory has confirmed two influenza B viruses, and 14 A(H1) flu viruses. It is likely that the flu vaccine protects against this predominant A(H1) strain, and likely that the antiviral drug oseltamivir (Tamiflu) is not effective against this strain. For the CDC's interim guidance on antiviral use, please visit <http://www.cdc.gov/flu/professionals/antivirals/index.htm>



SAVE THE DATES



"Communicating The Facts"
Kansas Imm Program State Conf.
 October 14-16, 2009
 Hyatt, Wichita KS

2009 School Nurse Conference
 July 20-23, 2009
 Hyatt, Wichita

KPHA Conference
 September 22-24, 2009

KAFP Conference
 June 18-19, 2009
 Marriott, Wichita KS

KAAP Spring Conference
 April 17-18, 2009
 Marriott, Overland Park

MAIC
 2009 Symposium
 Friday June 19th,
 Ritz Charles Conf. Fac
 Overland Park, KS

Governor's Public Health Conference
 April 20-22, 2009
 Marriott, Wichita

2009 Kansas Family Planning Conference
 June 10-11, 2009
 Marriott, Wichita

KAAP Fall Conference
 TBD

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 To report Vaccine Preventable Diseases, call toll free
 1-877-427-7317 or Fax 1-877-427-7318



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