

**Immunization Advisory Committee**  
**Michael A. Bilandic Building Room N502**  
**160 N. LaSalle Street, Chicago, Illinois**  
**March 11, 2009**  
**Summary of Minutes**

**Members Present:**

MD.Shafiqul Azam

Rashmi Chugh, M.D

Robert Daum, M.D

Robyn Gable, M.S.P.H, M.J

Karen Grush M.S.N

Nancy Khardori M.D

Julie Morita, M.D

Susanna Roberts, R.N, M.S.N

Lorraine Schoenstadt R.N, M.S.N

Dennis Vickers, M.D, MPH

Ellen Wolff, R.N, MPH

**Others in attendance:**

Alicia Chang Cojulun, UIC School Of Public Health

Chequita D. James GSK

Lisa Kritz Chicago Area Immunization Campaign

Janet Larson IDPH

Rita Maniotis, IVAC & Chicago Indy Media

Karen McMahon, IDPH

Barbara Mullarkey, IVAC

Madhu Nappi IDPH

Roy Pura, GSK

Joe Ramos, IDPH

Salaeha Shariff, II Chapter AAP

Lynnae Veldhuizen Sanofi Pasteur

1. Welcome and introductions

Dr. Khardori called the meeting to order and asked for introductions of the committee. Shafiqul Azam was introduced as the new member representing the Illinois State Board of Education (ISBOE). Dr. Khardori asked him to discuss his role at the ISBOE. Shafiqul Azam indicated that he collects mandated data for the school Immunization code. This data is collected annually for public and non-public schools. He indicated that they have to submit the data using the ISBOE web portal except for the Chicago Public Schools (CPS). CPS submits data in a separate file annually. The on-line system opens Oct 16 and the deadline for submission is November 15. The data is collected by grade level and eight disease categories. The data is checked for accuracy and clean data is provided to the Illinois Dept of Public Health as well as posted on the ISBOE website for the public.

Karen McMahon introduced Joe Ramos as the new Division Chief of Infectious Disease. Joe Ramos provided a brief description of his background as a nurse. He was in the United States Air force as a nurse on active duty for 10 years. He then joined a Department6 of Defense contractor and served again for four and half years overseas.

2. Old Business and approval of Minutes

Susanna Roberts made a motion to approve the minutes and Julie Morita seconded the motion.

3. New Business

Legislative & Rule Update: Karen McMahon indicated that there were three bills currently aware of and included in the packets. Senate Bill 1736 amends the University of Illinois Hospital Act and the Hospital Licensing Act. It requires a hospital to adopt an influenza and

pneumococcal immunization policy and that a copy be filed with the Illinois Department of Public Health. This requirement would be for patients 65 and over and not health care workers. Dr. Morita indicated that it was interesting that it applied to patients but not health care workers. She also indicated that there should be some resistance from the Illinois Hospital Association. Robyn Gabel indicated that the bill is still in the public health committee in the senate.

The next bill discussed was Senate Bill 1687. This bill is specific to establishing a requirement for Tdap vaccine for children entering 6<sup>th</sup> grade. It was her understanding that this one was held in committee. Karen indicated that it was the role of the Advisory committee to tell the Director of Public Health if this should be pursued. Ellen Wolf indicated that it would be a good requirement because of the physical being required at 6<sup>th</sup> grade. Dr. Morita moved that the committee recommends to the Director that the department engage stakeholders in the process of school requirements to consider advantages and disadvantages of requiring Tdap at 6<sup>th</sup> grade entry. Ellen Wolff seconded the motion.

Karen indicated that the last bill for discussion was House Bill 3662. This bill amends the Mercury-Free Vaccine Act. This bill provides that the Dept of Public Health shall prepare and distribute to all health care providers a pamphlet that contains information about vaccines that contain mercury, possible adverse effects associated with such vaccinations and an explanation of the provisions of the Mercury –Free Vaccine Act. Robyn Gabel indicated that this bill is still in committee.

National Vaccine Plan and National Infant Immunization Week: Dr. Julie Morita (Please see attached power point presentation.)

Hepatitis B in newborns: (Robyn Gabel) Since the small workgroup did not meet, Robyn lead the discussion with some of the findings from the ICAAP Hepatitis B birthing survey. Only 49% of the hospitals have both written policies and standing orders for testing women without a documented test result for Hep B. Only 43% of the hospitals have a written policy and standing orders for review of the prenatal Hepatitis B status of women. It was Robyn's understanding that the City of Chicago did a lot of work going to each hospital on an individual basis to get them to have a written policy on this issue and it seemed to be very successful. One option would be to have the IDPH Immunization Program do the same in their birthing hospitals. Another option would be to look at the possibility of passing an act that would be similar to the Illinois Perinatal HIV Prevention Act. Robyn indicated that passing legislation is not a simple measure. Robyn asked Dr. Morita how long it took them in Chicago to address 20 birthing hospitals. Dr. Morita indicated that it took four to six months and these visits also included a record assessment.

4. Open meeting speakers-Barbara Mullarkey, President, Illinois Vaccine Awareness Coalition and Rita Maniotis Illinois Vaccine Awareness Coalition. Barbara presented the following questions:
  - When will the 2005 Mercury Free Act be implemented?
  - She indicated that she would like to know the number of girls vaccinated with the HPV vaccine since the beginning and the number of serious side effects of this vaccine?Rita indicated that the reason she was at the meeting was mainly because of the HB3662.
5. Adjourn: Dr. Khardori declared the meeting adjourned.

# Update on the National Vaccine Plan and Stakeholder Engagement

***RxChicago***

Department of Public Health  
Julie Morita, M.D.



# National Vaccine Program Office (NVPO)

- Established in 1986 to prevent infectious diseases through immunization and prevent adverse reactions to vaccines
  - Coordinate and integrate activities of all Federal agencies involved in immunization efforts
  - Ensure efficient, consistent and timely collaboration of immunization activities
  - Develop and implement strategies for achieving prevention of human diseases and prevention of adverse reactions to vaccines
  - Ensure that minimal gaps occur in Federal planning of vaccine and immunization activities

# National Vaccine Plan (NVP)

- **Purpose**

- To promote achievement of the NVPO mission by providing strategic direction and promoting coordinated action by vaccine and immunization enterprise stakeholders

- **Last plan published in 1994**

# Process for Updating NVP

- Input from multiple Federal agencies under the coordination of the NVPO
- Recommendations of the Institute of Medicine
  - National rather than federal focus
  - Include measurable goals, objectives, and milestones
- Review of recent federal strategic plans
  - Develop strategic *and* implementation plans

# Stakeholder Engagement

- January 14, 2009
  - *Federal Register* notice requested comments on the draft Plan
- *February 6, 2009*
  - *Public meeting to discuss the draft Plan and comments received*
- March 14, 28 and April 4, 2009
  - General public (100 participants per meeting)

# Participants, February 6, 2009

- **Global partners**
- **Professional organizations**
- **Vaccine advocacy groups**
- **Vaccine industry**
- **International, US, state and local public health**
- **Individuals**



# Specific Feedback Requested

1. Priorities for a ten-year period
2. Goals, objectives, and strategies for a ten-year period
3. Indicators for a ten-year period
4. Stakeholders' roles

# Goal 1. Develop new and improved vaccines

- A. Prioritize the needs for developing new vaccines
- B. Support research to develop new vaccine candidates and improve current vaccines
- C. Support research on novel vaccine delivery methods
- D. Support development of vaccine candidates and tools needed to evaluate these candidates
- E. Increase understanding of how the host immune system influenza vaccine response
- F. Strengthen the science base for the development and licensure of safe and effective vaccines

# Goal 2. Enhance the safety of vaccines and vaccination practices

- A. Facilitate the modernization of manufacturing sciences and regulatory approaches
- B. Enhance timely detection and evaluation of vaccine safety signals
- C. Improve timeliness of the evaluation of vaccine safety signals
- D. Improve causality assessments of vaccines and related adverse events following immunizations (AEFIs)
- E. Improve scientific knowledge about the risk of vaccine adverse events and their mechanisms
- F. Improve clinical practice to prevent, identify and manage AEFIs
- G. Improve scientific capabilities to enhance vaccine safety and vaccination safety system
- H. Enhance integration and collaboration of vaccine safety activities

# Goal 3. Support informed vaccine decision making by the public, providers, and policy makers

- A. Conduct research and utilize findings to identify communication and education needs
- B. Utilize collaborations and partnerships to leverage communication efforts
- C. Enhance delivery of timely, accurate, and transparent information to public audiences and key intermediaries (such as media) about the benefits and risks of vaccines and the vaccination program
- D. Increase public awareness of vaccine preventable diseases, and benefits and risks of vaccines and immunization
- E. Assure that key decision and policy-makers receive accurate and timely information on vaccine benefits, risks, and economics, and on public and stakeholder knowledge, attitudes, and beliefs
- F. Improve the knowledge of vaccines and vaccine-preventable diseases, understanding of basis for immunization recommendations, and immunization practices of all healthcare providers
- G. Develop and disseminate communication materials that help facilitate active and involved immunization decision-making

# Goal 4: Ensure stable supply of recommended vaccines, and achieve better use of existing vaccines

- A. Ensure consistent and adequate availability of vaccines for the United States
- B. Reduce financial and non-financial barriers to vaccination
- C. Maintain and enhance the capacity to monitor immunization coverage for vaccines routinely administered to infants, children, adolescents, and adults
- D. Enhance tracking of vaccine preventable diseases and monitoring of the effectiveness of licensed vaccines
- E. Support healthcare and other vaccination providers in vaccination counseling and delivery
- F. Maintain a strong, science-based, transparent process for developing and evaluating immunization recommendations
- G. Strengthen the Vaccine Injury Compensation Program and Public Readiness and Emergency Preparedness Act compensation fund
- H. Enhance the effectiveness of state and federal immunization programs
- I. Enhance immunization coverage of international travelers who are at risk of acquiring VPD

# Goal 5. Increase global prevention of death and disease through safe and effective vaccination

- A. Improve global surveillance for VPDs and strengthen health information systems to monitor vaccine coverage, effectiveness, and safety
- B. Improve and sustain immunization programs that deliver vaccines safely and effectively as a component of healthcare delivery systems and promote opportunities to link immunization delivery with other priority health interventions, where appropriate
- C. Support introduction and availability of new and under-utilized vaccines to prevent diseases of public health importance
- D. Improve communication of research-based and culturally and linguistically appropriate information about the benefits and risks of vaccines to the public, providers, and policy-makers
- E. Support the development of regulatory environments and manufacturing capabilities that facilitate access to safe and effective vaccines in all countries
- F. Build and strengthen multilateral and bilateral partnerships and other collaborative efforts to support global immunization and eradication programs

# Opportunity for Input

- **Identify priority goals, objective and strategies**
- **Define the roles of stakeholders**

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- **To view the plan and feedback:**

[www.hhs.gov/nvpo/vacc\\_plan/](http://www.hhs.gov/nvpo/vacc_plan/)

- **To provide comments:**

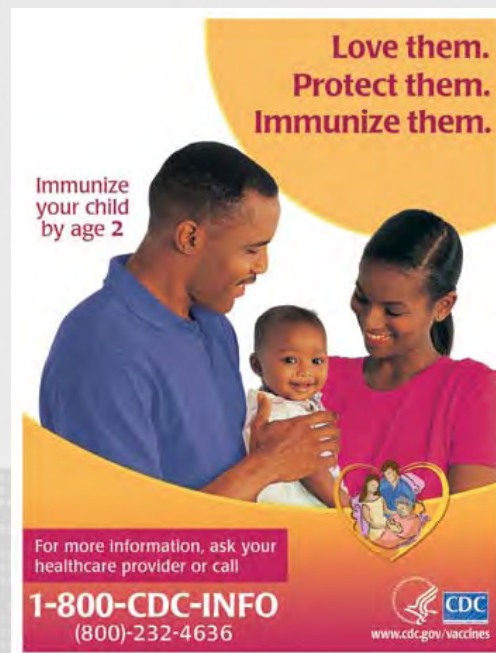
[NVPCComments@hhs.gov](mailto:NVPCComments@hhs.gov)

- Comments due by March 31, 2009



# National Infant Immunization Week

## April 25 – May 2, 2009



# NIIW

**Annual observance to highlight the importance of protecting infants from vaccine preventable diseases and to celebrate the achievements of immunization programs in promoting healthy communities**

**National Infant Immunization Week**  
**Love them. Protect them. Immunize them.**

April 25-May 2, 2009



# Planning Group

- **Chicago Area Immunization Campaign**
- **Illinois Chapter American Academy of Pediatrics**
- **Illinois Academy of Family Physicians**
- **American Medical Association**
- **Blue Cross Blue Shield of Illinois**
- **Centers for Disease Control and Prevention**
- **Illinois Department of Public Health**
- **Chicago Department of Public Health**
- **Lake County Health Department**
- **DuPage County Health Department**
- **Women, Infant and Children Program (CEDA, DHS)**

**National Infant Immunization Week**  
**Love them. Protect them. Immunize them.**  
April 25-May 2, 2009




# NIIW Activities, Illinois, 2009



Love them.  
Protect them.  
Immunize them.

Immunize your child by age 2

For more information, ask your healthcare provider or call  
**1-800-CDC-INFO**  
(800)-232-4636

 **CDC**  
[www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)

# Grand Rounds

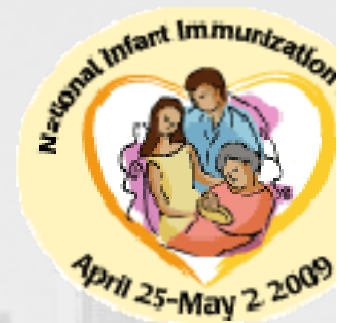
- **National Report Card on Vaccine-Preventable Diseases and Immunization**
  - Dr. Anne Schuchat (CDC)
  - Dr. Larry Pickering (CDC, AAP)
- **Rush Medical Center, Chicago**
- **Edwards Hospital, Naperville**
- **Central DuPage Hospital, Winfield**
- **University of Chicago, Chicago**
- **Children's Memorial Hospital, Chicago**





# Resident Forum

- **Attendees:**  
**Physicians in training – invitation only**
- **Panelists:**  
**Dr. Anne Schuchat, local infectious disease experts, Illinois AAP leaders**
- **Marcello's**  
**645 W. North Avenue**  
**Tuesday, April 28, 2009**  
**6-8 pm**



# Provider Toolkit

- **CDC and AAP developed**
- **Samples of toolkit and internet link to entire toolkit distributed**
  - Blue Cross Blue Shield providers
  - VFC providers
  - AAP members



# Community Toolkit

- **Updated toolkit to be released**
- **Training to occur for community groups in Lake and DuPage county**
- **Distribution of promotional materials to FQHCs, WIC, childcare centers**





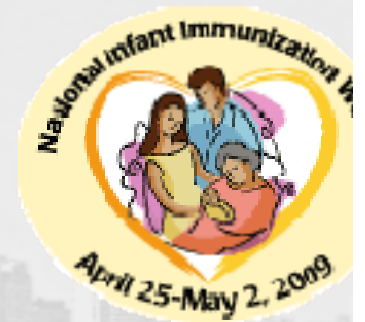
# Chicago Area Immunization Campaign General Meeting

- **Attendees:**  
Campaign members, others
- **Speakers:**  
Dr. Anne Schuchat (CDC)  
Dr. Damon Arnold (IDPH)
- **University of Illinois Student Union**  
**Wednesday, April 29, 2009**  
**9 am - 12 noon**



# Community Education

- **Outreach to retail stores to promote NIIW**
- **WIC, Chicago**
  - Posters and flyers distributed
  - Immunization reminders sent to children 13 and 19 months of age
  - CareVan scheduled at WIC clinics
  - Incentives provided to parents of completely immunized children



# Media Events

- **Press releases, opinion editorials, declarations**
  - CDC, IDPH, CDPH
- **Media Roundtable**
  - Chicago Department of Public Health
  - Tuesday, April 28
  - 10 am – 12 noon





**For additional information and materia**

**[www.cdc.gov/vaccines/events/niiw/default.htm](http://www.cdc.gov/vaccines/events/niiw/default.htm)**