

Immunization Advisory Committee
Michael A. Bilandic Bldg. Room N502
MMUNIZATION ADVISORY MEETING
160 North LaSalle Chicago
March 21, 2012
10:00 – 12:30 p.m.

Summary of Minutes

Members present:

Rashmi Chugh, MD
Robert Daum, MD (Chairperson)
Linda Gibbons, RN, MSN ILCSN
MaLinda Hamiliton, RN, BSN
Lisa Kritz, MSW, MBA
Julia Morita, MD
Karen Pfaff, RN, MSN, ILCSN

Julie Pryde, MSW, LSW, CPHA
Anita Chandra-Puri, MD, FAAP
Penny Roth, MS, RD, LDN
Margaret Saunders, MS, RD, LDN
Glen Steinhausen, PhD
Kathy Swafford, MD
Tina Tan, MD

Others Present:

Jan Daniels, IDPH
Lynnae Godsell, Sanofi
Robin Holding, IDPH (presenter)
Sandra Han, ICAAP
Victoria Jackson, DHS (presenter)
Mike Kimak, Pfizer vaccines
Martin Matthews, Merck

Monica Mayer, Merck
Dave Nadone, Merck
Madhu Nappi, IDPH
Teri Nicholson, IDPH (presenter)
Dr. Ken Soyemi, IDPH
Mindy White, GSK

1. Welcome and introduction

Dr. Daum called the meeting to order and requested all members to introduce themselves and identify their association and then requested all audience members to introduce and identify their associations as well.

2. Old Business and approval of minutes

Quorum was reached and the minutes of November 2, 2011 were approved.

During the introduction, Glen Steinhausen, PhD. from the State Board of Education announced that as of May 31, 2012 he will be retiring from the State Board of Ed. Their proposed replacement is expected to be filled within the State Board for a nurse to work with ISBE. Her start date will be May 15, 2012.

Extensive discussion was held addressing communications about the Tdap requirement for school year 2012-2013. Jan Daniels explain why the change in the implementation in the Tdap requirement went from all students required for grades 6 – 12th grades to required to show proof of Tdap for students entering grades 6th and 9th grades for school year 2012-2013. The majority of the discussion focused on was the letter to the parents that IDPH released to schools and local health departments was too long. Committee

members indicated the letter needed to be short and then just put in a statement to reference back to another document for more details about the requirement. Anita Chandra-Puri, MD, recommended maybe a simple one line email reminder to be sent out to providers and to schools on an ongoing basis to remind them.

Committee members wanted IDPH to take leadership in informing physicians and schools, through routine press releases, PSAs for Tdap requirement. They also wanted the information being disseminated to be streamlined that is going out, and recommended removal of the need to take out references to October 15th or first day exclusions.

The Committee members wanted IDPH to devise a media plan, and to coordinate with Chicago Health Department of Public Health to send information out for Tdap. Committee members expressed a need to have this started and in the next 2 weeks send email out to Committee member on what is being proposed and target completion dates.

3. New Business

Discussed the proposed rule changes that will align existing immunization rules and regulations for both child care facilities and schools related to second doses of mumps, rubella and varicella and for pneumococcal conjugate vaccine for below the kindergarten level.

The original proposed rule changes were sent to the State Board of Health (SBoH) Rules Committee on February 16, 2012. Prior to that meeting the varicella rule changes were pulled from the original document because of concerns about the feasibility of proposed implementation plan for the 2nd dose of varicella. The Rules Committee had no problem with the remaining proposed rule changes and would introduce them to the full committee. The SBoH hearings were delayed due to the Board not being able to quorum due to members term expires. This administrative delay gave the Department time to introduce the revised varicella changes, which would include requiring a second dose of varicella for students entering kindergarten, 6th grade and 9th grade starting school year 2013-2014. June 14, 2012 is when the next full SBoH meeting will be held.

The other proposed rule changes require children entering school at any grade level (K through 12) to show proof of having received two doses of rubella and mumps vaccines, the first dose on or after the first birthday and the second dose no less than four weeks (28 days) after the first dose. For students attending school programs where grade levels (K through 12) are not assigned, proof of having received two doses of rubella and mumps vaccines shall be submitted prior to the school years in which the child reaches the ages of five, 10, and 15. In addition, any child under two years of age entering a child care facility or school program below the kindergarten level shall show proof of immunization that complies with the pneumococcal vaccination schedule. Children 24 to 59 months of age who have not received the primary series of pneumococcal conjugate vaccine, according to the recommended vaccination schedule, shall show proof of receiving one dose of pneumococcal vaccine.

A comment was made on when submitting the proposed rule changes why not just change the date of implementation to the next year, so instead of saying for school year 2012-2013, make it starting 2013-2014.

Victoria Jackson, RN, BSN, MSN, ILCSN School Health Program Coordinator with the Illinois Department of Human Services discussed about the policy for written release of information for schools to share immunization information. FERPA confidentiality laws apply with school-based population; and HIPAA laws then covers health care providers, including local health departments, etc. Illinois State law prevents sharing of information between schools and providers without written consent of parent or guardian. Committee members indicated an interest to see IDPH pursuing a modification of the school health code to allow sharing of information between providers and schools. Jan Daniels did explain that if this would involve any changes to School Code; that ISBE is agency that would need to respond to that appeal.

I-CARE – CORNERSTONE

Cornerstone representative was unable to attend the March 21st meeting; a representative will be at the July 18, 2012 meeting. When discussing what electronic medical records were being transferred into I-CARE, it was asked if maybe on the I-CARE Home Page it can list what EMRs' are being transferred already into I-CARE. Another question that was asked was "Does public aid billing get entered into I-CARE, and can school nurses enter additional student immunization information into I-CARE?" These questions were deferred until the July 18, 2012 meeting.

4. Open Comment: None
5. Future topics: Additional discussion of I-CARE and Cornerstone system functionality and access, school health issues and ongoing guidance on communications to notify school, providers, and parents about new rules impacting immunization requirements.
6. Adjourn: Dr. Daum called for a motion to adjourn, motion was made and it was seconded. Next meeting is July 18, 2012