

**Texas Immunization Stakeholder Working Group (TISWG)
Meeting Minutes – February 21, 2008**

Goodwill Industries of Central Texas
1015 Norwood Park Blvd., Room 1124
8:30 a.m. – 3:00 p.m.

Participants

Andrew Eisenberg, MD, Texas Medical Association; Angela Craig, GlaxoSmithKline Vaccines; Andrea Stricklin, Merck; Anita Colbert, Tarrant County Public Health; Clark Petty, San Antonio Metro Health; Clifford Pumphrey, Wyeth Vaccines; Decrecia Robinson, Houston Health and Human Services Department; Donna Carlin, Texas Higher Education Coordinating Board; Dr. Tamra Deuser, Texas Academy of Family Physicians; Dr. Barry Lachman, Texas Association of Health Plans; Dr. Jason V. Terk, Texas Pediatric Society; Ed Kothera, Med Immune; Elsie Wiley, University of North Texas SVCI; Fran Kirkley, Tarrant County Public Health; Frankie Milley, Meningitis Angels; Gayle Love, Texas Medical Association; Jennifer Jackson, Sanofi Pasteur; Karyn Hemphill, Texas Pharmacy Association; Kate McCann, Texas Academy of Family Physicians; Kathy Dryer, Retired Senior Volunteer Program; Kathy Moore, Texas Association of Local Health Officials; Kelsey Stutzman, Health and Human Services Commission; Kim Petrilli, Title V; Kim Robinson, Texas Pharmacy Association; Kurt Stembridge, GlaxoSmithKline; Laura Lerma, RN, Texas Nurses Association; Marisa Martin, Scott and White Medical Center; Rebecca Worth, Meningitis Angels; Reece Patterson, Sanofi Pasteur; Sandra Hermosa, San Antonio Metro; Shelley Bjorkman, Health and Human Services Commission – Office of Early Childhood; Terrence Campbell, City of Houston; Terri Andrews, Immunization Collaboration 08 – Tarrant County; Dan Walters, Dan Walters Associates; facilitator

New Members and Guests

Lesley Bullion, Irene Brown, Jeff Taylor, DSHS – Infectious Disease Control Unit; Debra Edwards, DSHS – Community Preparedness;

DSHS Staff

Angela Hobbs-Lopez, Family Health Research & Program Development; Carol Harvey, Purchased Health Services Unit; Diane Romnes, Region 7; Dr. Susan Penfield and Rita Espinosa, Infectious Disease Control Unit; Kathy Clement, Case Management and Health Screening; Amy Schlabach, Anita Freeman, Casey Blass, Claude Longoria, Christine Contreras, David Scott, Jack Sims, John Gemar, Karen Hess, Lupe M. Garcia, Monica Gamez, Sharon Slater, Sheila Tucker, Tim Hawkins, and Vivian Harris, Disease Prevention and Intervention Section.

New Member orientation was held from 8:30 am through 9:00 am. General session was called to order at 9:00 am.

Welcome and Introduction: Mr. David Scott welcomed TISWG members, meeting participants, and introduced facilitator, Dan Walters.

Introduction of All Participants: TISWG members and meeting participants introduced themselves, the organizations they represent and their expectations of TISWG.

Review of Minutes: Mr. David Scott asked for any feedback/comments regarding last meeting minutes. Having no comments, the minutes were approved and are now final. The minutes may be viewed at the following web address:
<http://www.dshs.state.tx.us/immunize/partners/tiswg.shtm>

The Burden of Disease and National Trends and Practices: Mr. Casey Blass introduced Dr. Andrew Eisenberg, Texas Medical Association. Dr. Eisenberg discussed ideas on how we could develop an infrastructure for the delivery of vaccines and improve immunization rates in Texas: Highlighted items are listed below.

- Need collaboration from private, public, state health department, school nurses, public health nurses, manufactures, large companies (e.g., Dell), and community immunizers (they know how to get a lot of vaccine out in a short period of time.)
- Stress the importance of the vaccine – Prevention is extremely important. It is easier to prevent than to treat. It is a deadly disease.
- Perception – You are not going to get sick from it
- Protection – If everyone else around you gets protected, it's much more difficult for infectious disease particles to transmit to somebody else if no one gets it in the first place.
- Make it available for everyone - communicable diseases are population based, not individual based.
- Pay more to give it – huge benefit, make it worthwhile

The State of Influenza Disease in Texas: Ms. Lesley Bullion, Flu Surveillance Coordinator with the Infectious Disease Control Unit within the Texas Department of State Health Services provided a presentation on *Influenza Surveillance in Texas*. The burden of influenza: Each year in the United States it's estimated there are 36,000 deaths due to influenza, 226,000 hospitalizations due to influenza, and approximately 5-20% of the population becomes ill. With the current Texas population that means approximately 1.2 million people become sick with influenza. Ms. Bullion outlined the Flu Surveillance Basics, Objective of Flu Surveillance, National Flu Surveillance and Flu Surveillance in Texas. There are four main components of flu surveillance in Texas and five influenza activity levels that are reportable to the Centers for Disease Control & Prevention (CDC). Ms. Bullion also provided data on the 2007-08 Influenza Season and examples of the various reports.

Creating the Influenza Roadmap 2009-2013: Mr. Dan Walters lead this workgroup activity. Meeting participants were voluntarily divided into smaller groups to discuss ideas for a roadmap that would reduce the number of influenza deaths and raise immunization rates. The following scenario was given to help drive the discussion: *The Director of the Centers for Disease Control & Prevention (CDC) has seen that deaths in Texas due to influenza have been reduced by half since 2008 and influenza vaccination rates are now up to 75%. The Director has come to the TISWG scheduled in February 2013 meeting and has just asked, "How was Texas able to do this? What decisions did you make as a working group? How did you organize yourselves? What did the major stakeholders do to make this happen?"*

- First Discussion: TISWG members were asked to randomly break up into workgroup and discuss three major issues related to the ability to increase influenza vaccination rates across Texas, which included the following:
 - Influenza vaccination delivery capacity
 - Education and social marketing
 - Measurement of progress

- Additionally, TISWG members were asked to discuss the three issues listed above based on three different phases of time and provide information concerning which steps or activities would have been necessary in order to increase influenza vaccination rates. These three different phases included the following:
 - Prior to vaccination rates increasing
 - After vaccination rates have increased
 - Sustaining increased vaccination rates
- Second Discussion: TISWG members were asked to break up into occupational (i.e., functional) workgroups based on the following:
 - Local health organizations
 - State government organizations
 - Physicians
 - State & local government organizations
 - Non-government organizations
 - Pharmaceutical companies

The result of this activity will be the basis for long term planning as we build the road map for reducing the burden of Flu in Texas.

Adolescent Business Plan – Current status, core components, moving it forward in your organizations: Mr. John Gemar provided a presentation Adolescent/Adult Immunization Program Update: February 2008. He gave brief highlights of the business plan and the current status of the Adolescent/Adult program. A draft of the business plan will be sent to TISWG members for review/comments in April. He hopes to have a final published in late April or May 2008. Mr. John Gemar is one out of nine Adolescent/Adult Immunization Coordinators for Texas. He serves as the team lead over the other eight. Currently four other coordinators have been hired to serve in Health Service Region (HSR) 1 Lubbock, HRS 4/5 North Tyler, HRS 7 Temple and HRS 9/10 El Paso. The focus for the new coordinators on board now is training and identification of stakeholders. Any TISWG stakeholders that have not heard from their regional coordinator and are within the four regions listed above are asked to please call your local HRS office for a contact name. Mr. John Gemar will coordinate to send a contact list of the new Adolescent/ Adult Immunization Coordinators to all TISWG stakeholders, once it has become finalized.

4th DTaP Updates: Ms. Sharon Slater provided a presentation, *Immunization Branch, DTaP Research*. The purpose of the research was to identify barriers to on-time DTaP immunization and to determine which of the identified barriers are most widely cited. Two types of research will be conducted; Qualitative (exploratory) and Quantitative (to look at prevalence and weight). During the qualitative research, 45 parents of children under the age of three and not up to date for DTaP (identified by ImmTrac), were interviewed. Some of the common barriers identified were: Difficulties finding an immunization provider, transportation, taking time off from work, public clinic access, economic barriers, not knowing when vaccines are due and language barriers. The quantitative study will be conducted over the spring. ImmTrac will again provide a list of children under the age of three that are behind for DTaP. The sample size will be large

enough to represent the state. Suma, a research organization has been contracted to conduct the telephone interviews.

4th DTaP – Provider Education Material: Ms. Lupe M. Garcia provided a presentation, *2008 4th DTaP Provider Immunization Campaign*, which will be kicked off during the observance of National Infant Immunization Week, April 19-26th, 2008. The goal of the campaign is to increase the number of children who receive the 4th dose of the DTaP vaccine on time, between 15 to 18 months of age. The desired outcome is to increase the 4th DTaP from 81.4% to 90% in Texas as measured by the National Immunization Survey. Campaign key messages for physicians are to Assess, Vaccinate and Document. First piece of the campaign is a series of ads in all state wide medical journals. Next phase will be sending a letter to the physicians, with the slogan “4th DTaP - get it for them” followed by a packet of materials (posters, brochures, cards with simplified immunization schedules for parents, buttons for the providers and stickers for the children). Final phase is to send out reminders. A video was also developed and will be sent to physician offices to help stress the importance of obtaining and following the new vaccine schedule, vaccinating every time and on time and that every vaccine counts.

Immunization Branch Update: Mr. Jack Sims distributed a handout, *Immunization Branch Updates*

- ImmTrac Rules—The DSHS State Health Services Council approved the ImmTrac rules on January 29, 2008. ImmTrac will be the statewide reporting and tracking systems for medications, antivirals, and vaccines administered during an emergency event. Adults who consent at the point-of-service may remain in the registry until consent is withdrawn. If consent is not granted, the information will remain in the registry for five years from the date that the emergency is declared over. Adverse events will also be tracked. First responders may also be included in the registry. Anticipated rule adoption is in August.
- HIB Vaccine Shortage – CDC estimates of vaccine supply in states was incorrect in December 2007. This has lead to the shortage being more serious than previously thought. CDC is considering a recommendation to defer additional doses, however, fewer doses do not provide adequate protection. TVFC providers can only order a 30-day supply of HIB at this time.
- Texas Vaccine Education Online – Twenty-one modules on immunization topics were implemented on February 15, 2008.
- Interim Legislative Study – The Senate Health and Human Services Committee will study the availability and effectiveness of childhood and adult vaccines, including public education programs to promote the use of vaccines.
- New Local Health Department Immunization Contractors – the Immunization Branch intends to announce the opportunity for additional local health departments to submit funding request to enhance local immunization services. 2008 funds will be used to build the infrastructure necessary to fulfill the full scope of work in 2009.
- DSHS Staffing – Dr. Adolfo Valadez has joined DSHS as the Assistant Commissioner of Prevention and Preparedness Services.

Other Items:

- Ms. Susan Belisle discussed the handout *Core Curriculum on Immunization*. Her graduate student, USA Major Betsy Miller, RN, BSN, created an immunization module, which they hope to include into local medical assistance training schools. This module is designed so medical assistants will come out of their training with enough knowledge on immunization; how to administer vaccines, principals on handling and some basic understanding of ImmTrac. Training will be available on CD. Ms. Lupe M. Garcia and Ms. Susan Belisle will be working together to package and distribute the training modules. .
- Connection to Australia – Both Ms. Frankie Milley and Ms. Vivian Harris worked with Mrs. Heidi Hutton to help develop an immunization alliance in Australia. Inspired by our webpage, they were very encouraged by what TISWG is doing and formed their alliance with similar goals and expectations.
- Special acknowledgements were given to those leaving TISWG and for our guest speakers, Dr. Eisenberg and Lesley Bullion.

Meeting Evaluation:

- Negatives
 - Technology
 - Microphone
- Positives
 - Divide and concur influenza strategy
 - Lunch
 - Group Meeting – focus on positives to generate ideas not debate
 - Physician turn out
 - Double drop down screens

Next Meeting:

- Date has not been confirmed. Tentatively the third week in May unless conflict in schedules.
- Discuss draft for the Influenza Roadmap

Adjourn:

- The meeting adjourned at 2:59 p.m.