PEDIATRIC VACCINES AND OTHER COVID-19 CONSIDERATIONS FOR PROGRAM YEAR 2022-23

August 29, 2022
Today’s Presenters

**Office of Head Start:**
Tala Hooban – *Deputy Director, Commander (CDR), U.S. Public Health Service, OHS*
Marco Beltran DrPH – *Senior Program Specialist/Federal Project Officer, OHS*

**Program Representatives:**
Parents In Community Action, Inc. (PICA)-- Hennepin County, Minnesota
Community Action Corporation of South Texas (CACOST)-- South Texas

**National Center on Health, Behavioral Health, and Safety:**
Dr. Jill Sells – *Medical Advisor, National Center on Health, Behavioral Health and Safety*
Dr. Abbey Alkon- *Subject Matter Expert in Infectious Diseases*
Steve Shuman- *Director of Outreach and Distance Learning*
Agenda

**Office of Head Start:**
COVID-19 FAQs for PY22-23

**Program Presentations on Pediatric Vaccines:**
PICA
CACOST

**NCHBHS Presentation:**
Changes in CDC K-12/ECE Guidance
Risk Reduction Strategies
FAQs
Resources
COVID-19 FAQs
What are allowable virtual program enhancements?

Examples of allowable virtual services, which include, but are not limited to:

Virtual Services for Flexible Use Indefinitely

- Policy Council meetings
- Governing body meetings
- Parenting curricula meetings
- Parent meetings
- Home visits for medically fragile children
- Intakes
- Coaching software
Can programs include in their policies and procedures the use of virtual make-up days throughout the year?

Yes. Given the supplies and virtual accessibility infrastructure that many programs built during the COVID-19 pandemic, in the event of COVID-19 and/or weather-related building closures, programs can employ virtual services for continuity purposes, rather than providing virtual make-up days at the end of the program year.

Programs can provide virtual make-up days for COVID-19 and weather-related closures so long as it is in their policies and procedures. Programs should make reasonable determinations if families have ongoing access to internet and the technology required to make temporary virtual services is a viable option. For programs that do not employ virtual services during closures, we encourage them to make up those days during the program year to remain in compliance with the duration requirements.
How should programs implement the vaccine requirement for partners, such as school districts or other partnerships in service delivery at this point in the year, understanding that contracts and MOUs are in place?

Early Head Start-Child Care Partnership are covered to the same extent as standard Head Start and Early Head Start programs. For other provider relationships, programs should work to resolve issues with contracts or MOUs, including for staff working with enrolled children, that arise from the Interim Final Rule with Comment Period (IFC) in a manner that minimizes disruption of services to children and families for the 2022-2023 Program Year. Programs should make decisions that cause the least amount of disruption and support programs to safely get through the Program Year.
Does the vaccine requirement apply to Part B/C providers (special education and related service providers for preschooler and infants and toddlers)?

No. These providers are not covered by the vaccine requirement. Part B/C providers are not considered staff of the Head Start program and there is no contractual relationship.
Children should never be disciplined for not wanting to wear a mask. Treat mask-wearing as an emerging skill. Help children learn how to wear a mask consistently to be healthy and safe by showing them how to wear their mask so it fits securely over their mouth, nose, and chin.

Help children find a mask that is comfortable and that they can keep on all the time. Give positive feedback to children for their efforts and keep it playful! Additionally, children would not be masked when eating, drinking, or napping. We encourage programs to review Face Masks in Head Start Programs on the ECLKC.
Are children required to have the COVID-19 vaccine to be enrolled in Head Start programs?

No. At this time, the COVID-19 vaccination is not required for enrolled Early Head Start or Head Start children unless required by state, tribal, territorial or local regulations.
Program Presentations on Pediatric Vaccines—PICA
MEET OUR TEAM

Candee Melin
Deputy Director

Nadia Higgins
PICA Public Health Nurse
PARENTS IN COMMUNITY ACTION (PICA)

- Hennepin County, Minnesota
- More than 50 years of service
- 2,500 families
PLAN AND HOPE

- 17 clinics
- 1,600 people vaccinated
- With state, county, and city public health departments
LESSONS LEARNED

• Just do it — don’t worry about turnout
• Keep doing it — word of mouth will build
• Text to spread the word
• Have a live person book appointments
• Incentives can work
• Make it fun
CRUCIAL CONVERSATIONS

- Rely on trusted experts
- Seek out one-on-one conversations
- Share personal stories
- Tread lightly
- Clinics support conversations
NEW CHALLENGES WITH UNDER 5

Lost sense of urgency
No more incentives
Confusing, lengthy vaccination schedule
Hesitancy about community setting
"I wouldn’t have gotten vaccinated if it weren’t for PICA."

"Next time, I’ll bring my mother."

"I’m so relieved."

"I’m scared."

“How do you know it’s safe?”
Program Presentations on Pediatric Vaccines – CACOST
Pediatric Vaccine Strategies

From: Community Action Corporation of South Texas (CACOST)
Meet our Team

Elena Esquivel
Head Start Director

Michelle Teixeira, RN
Head Start Registered Nurse

Sarah M. Soliz, RN, BSN
Quality & Compliance Officer
Objectives

1. CACOST Service Area
2. Pediatric vaccine strategies that worked in our community
3. Additional Local Strategies
VISION
We envision a vibrant community where everyone has access to quality health care, education, housing and employment.

MISSION
Our mission is to continuously improve the lives of South Texans by providing high quality health care, education, housing and economic opportunities to reduce poverty through services and partnerships.

CORE VALUES
Accountability - Excellence - Integrity - Quality Service - Teamwork

5 Service Divisions

• Head Start Birth to Five
• Early Childhood Intervention
• Federally Qualified Health Centers
• Energy Programs
  ○ Meals on Wheels
  ○ Community Services Block Grant
  ○ Healthy Kids (Medicaid & CHIP Assistance)
  ○ Housing Assistance
  ○ Teen Pregnancy Prevention
Funded Enrollment

Head Start - 1,000
Expectant Mothers - 46
Infant/Toddlers - 272
Total - 1,318

CACOST Community Health Centers
VACCINES AVAILABLE
for children ages 6 months and older *

COMMUNITY ACTION CORPORATION OF SOUTH TEXAS

HEALTH CENTERS
WITH PEDIATRIC SERVICES

BEEVILLE HEALTH CENTER
301 S. Hillside Drive Ste. 5,6,8,15
361-362-0307

COMMUNITY ACTION PEDIATRIC CENTER SINTON
1133 E. Sinton Street
361-364-4486

FALFURRIAS HEALTH CENTER
1302 S. SAINT MARYS ST. STE 2A & STE D
361-325-9404

KINGSVILLE HEALTH CENTER
1311 E. General Cavazos Drive Ste 303 & Ste C
361-592-3237
Partnership: Head Start and Community Health Center

- Covid-19 **Testing** for employees and students
- **Vaccination** for employees and students
- Collaboration on **policy** and procedure
Strategic Timeline

June 13, 2022

Dr. O'Ryan presented to Office of Head Start: Pediatric Vaccine Success Stories from the Field

June 17, 2022

CACOST surveyed Early Head Parents and received 71 responses
Early Head Start Parents surveyed: Are you going to vaccinate your child?

- No: 49.3%
- Yes: 15.5%
- Maybe: 35.2%
Methods of Education

Flyers & Community

COVID-19 Vaccines for Children
(6 Months - 5 Years)

Why children should get vaccinated:
- Vaccination for children 6 months and older is an important tool to protect their long-term health against COVID-19 and help achieve full family protection.

How many doses does your child need?
- Pfizer-BioNTech:
  - Two doses, 3 weeks apart
  - Third dose, 8 weeks after second dose
- Moderna:
  - Two doses, 4 weeks apart

Requires 3 doses to be fully effective
(3 micrograms, 1/10 of the adult dose)

Requirements:
- Pfizer-BioNTech:
  - Two doses, 3 weeks apart
  - Third dose, 8 weeks after second dose
- Moderna:
  - Two doses, 4 weeks apart

Clinical trials show that COVID-19 vaccines are safe and effective at preventing severe disease, such as hospitalization or death.

Word of Mouth

Social Media Outreach
NEXT STEPS

• COLLECT interest data from Head Start families

• Implement education plan utilizing the data collected

• Vaccinate Head Start children utilizing the Medical Mobile
Questions or comments? Get in touch!

Phone Number
361-664-0145 Ext. 2077

Email Address
Michelle.Teixeira@cacost.org

Website
www.cacost.org
National Center on Health, Behavioral Health, and Safety
Keeping Children, Families, and Staff Healthy and Safe from COVID-19
Jill Sells, MD, FAAP
Medical Advisor, HBHS, Education Development Center; Clinical Professor of Pediatrics, University of Washington School of Medicine

Abbey Alkon, RN, PNP, PhD
Subject Matter Expert in Infectious Disease, HBHS, Professor, University of California, San Francisco (UCSF) School of Nursing

Steve Shuman, BS
Director of Outreach and Distance Learning, HBHS, Education Development Center
NCHBHS Outline

- Overview and key changes to new CDC K–12/ECE guidance
- Risk reduction strategies
- Selected frequently asked questions (FAQs)
- HBHS resources
CDC Updated Guidance for K-12 and ECE Programs Overview: Aug. 11, 2022

- CDC guidance is meant to supplement any federal, state, tribal, local, or territorial health and safety laws, rules, and regulations.
- The layered prevention strategies can help prevent the spread of COVID-19 and other infectious diseases.
CDC Updated Guidance for K-12 and ECE Programs
Key Changes: August 11, 2022

- Cohorts
- Managing exposures
- Managing cases: isolation
- Responding to outbreaks

Cohorts

- CDC removed COVID-19 cohort recommendation.
- Group size still matters!
  - Head Start Program Performance Standards include specific ratios and group size.
  - Small, consistent groups are associated with quality care.

Managing Exposure

What to do if you were exposed to COVID-19

- Recommendations are the same regardless of vaccination status.
- Take precautions for 10 full days, including wearing a mask.
- Get tested at least 5 full days after exposure.
- No need to stay home (quarantine) if exposed to COVID-19.
- Test immediately and follow isolation guidance if you develop symptoms.

https://www.cdc.gov/coronavirus/2019-ncov/your-health/if-you-were-exposed.html
Managing Cases: Isolation

- What to do if you have COVID-19 (test positive or have symptoms)
  - Recommendations are the same regardless of vaccination status.
  - Stay home for at least 5 days.
  - Stay home for 10 days if you cannot wear a mask.
  - Separate from others in your home as much as possible.
  - Wear a high-quality mask if around others.
  - Follow public health guidance for when to end isolation.

“Anyone who chooses to wear a mask or respirator should be supported in their decision to do so at any COVID-19 Community Level, including low.”

When Masks Are Recommended

- At **high** CDC COVID-19 Community Levels, masks are recommended for everyone.
- At **medium** and **high** Community Levels, masks are recommended for people at risk for severe illness.
- At all Community Levels, masks are recommended for everyone in a nurse’s office or health care setting.
- At all Community Levels, masks may be worn to protect children and others at higher risk for illness.
- At all Community Levels, follow mask recommendations in exposure and isolation guidance.

Responding to Outbreaks

- Add prevention strategies regardless of the CDC COVID-19 Community Level.
- People who have COVID-19 symptoms should stay home and get tested.
- People who develop symptoms during the day should wear a well-fitting mask, be isolated as much as possible until sent home, and get tested.
- Communicate with state, territorial, tribal, and/or local public health officials about strategies and guidance.

## Risk Reduction Strategies for CDC COVID-19 Community Levels

<table>
<thead>
<tr>
<th>LOW</th>
<th>MEDIUM</th>
<th>HIGH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stay up to date with vaccines.</td>
<td>Stay up to date with vaccines.</td>
<td>Stay up to date with vaccines.</td>
</tr>
<tr>
<td>Get tested if you have symptoms.</td>
<td>Get tested if you have symptoms.</td>
<td>Get tested if you have symptoms.</td>
</tr>
<tr>
<td>If you are at high risk for severe illness, talk to your health care provider about whether you need to wear a mask and take other precautions.</td>
<td></td>
<td>Wear a mask indoors when in public.</td>
</tr>
<tr>
<td>More precautions may be needed for people at high risk for severe illness.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Risk Reduction Strategies

### Infectious Disease Prevention Strategies

- Conduct daily health checks.
- Stay up to date with vaccinations.
- Stay home when sick.
- Increase fresh air.
- Wash hands.
- Cover mouths when coughing.
- Clean and disinfect.

### COVID-19–Specific Prevention Strategies

- Wear a mask.
- Improve ventilation systems.
- Test after exposure or if symptoms start.
- Manage exposures.
- Follow isolation guidelines.
- Seek guidance from public health agencies.

How Programs Can Be Prepared

- Use your Health Services Advisory Committee and community partners.
- Monitor local levels of COVID-19.
- Apply risk reduction strategies to limit the impact of COVID-19 on children, families, and staff.
- Help families and staff stay up to date on vaccines.
- Keep masks available for use in programs.
- Help families and staff access testing.

https://eclkc.ohs.acf.hhs.gov/physical-health/article/face-masks-head-start-programs
Caring for Our Children (CFOC) COVID-19 Modifications

- New guidance to reduce the risk of COVID-19 is included in the CFOC modifications.
- CFOC website’s homepage has a list of the modified standards and appendices: https://nrckids.org/CFOC.

3.3 Cleaning, Sanitizing, and Disinfecting

- Appendix J: Selecting an Appropriate Sanitizer or Disinfectant
- Appendix K: Routine Schedule for Cleaning, Sanitizing, and Disinfecting
Supporting COVID-19 Vaccine Access

- Encourage families to contact their primary care provider.
- Identify community vaccine providers and resources, such as community health centers, hospitals, pharmacies, and COVID-19 vaccination sites.
- Explore opportunities to partner with community agencies to provide on-site vaccination clinics.
- Visit https://www.vaccines.gov/ to find COVID-19 vaccine locations.
Frequently Asked Questions
Are COVID-19 vaccines free for everyone?

- YES, COVID-19 vaccines are free to everyone 6 months and older living in the United States.
- This is true regardless of immigration status and includes people who do not have health insurance.
How long do people need to wait to get vaccinated after having COVID-19?

- Generally, people can get vaccinated after their symptoms are gone.
- If you get COVID-19, waiting 90 days to get vaccinated is no longer recommended.
- People who have been severely ill, have underlying health issues, or have any questions should talk with their health care provider about the timing of their COVID-19 vaccinations.
If a child under 2 gets COVID-19, do they stay home for 10 days or can they come back in 5 days?

- A child who has COVID-19 and cannot wear a mask, including those under 2, needs to stay in isolation at home for 10 days.
- Isolation guidelines are the same regardless of vaccination status.
If a child older than 2 years or an adult gets COVID-19, do they stay home for 10 days?

- Isolation may end after 5 days in some cases.
  - If they never had symptoms.
  - If they have no fever for 24 hours and symptoms are improving.
- Anyone with COVID-19 should wear a mask for 10 days.
  - Earlier removal of a mask may be possible with testing following public health guidance.

New COVID-19 Resources

COVID-19 Vaccines for Young Children

Guiding Conversations About COVID-19 Vaccines for Young Children

COVID-19 Vaccines for Children 6 Months and Older...

Protect Your Child

https://eclkc.ohs.acf.hhs.gov/physical-health/article/covid-19-general-vaccine-information
COVID-19 Health Considerations

THANK YOU