Minutes	**Immunization Policy Advisory Team (IPAT)** **Thursday, March 5, 2015/ 11:45 – 2:00pm/Room 1D**

ATTENDEES

P	Maggie Allee	X	Linda Howrey
X	Hilary Andrews	P	Ryan James
X	Sara Beaudrault		Tami Kochan
	Joni Busche		Ellen Larsen
X	Jessica Caldwell		Richard Leman
	Joyce Caramella	X	Paul Lewis
	Clarice Charging	X	Mimi Luther
X	Paul Cieslak	X	Jenne McKibben
	Alison Dent	X	Bob Mendelson
X	Aaron Dunn	X	Michelle Petrofes
	Tom Eversole	X	Nathan Roberts
P	Debi Farr	X	Kathy Scott
	Laurie Francis	X	Michael Tynan
	Dana Hargunani	X	Anne VanCuren
x	Erica Gillespie for Apryl Herron		Jennifer Webster
	Kevin Hogan		

Guests:

	Marcy Baker		Heather Kaisner - phone
	Allen Christie		Jay Lieberman
	Stacy de Assis Matthews		Juventila Liko
	Carol Easter		Garth Meihoff
	Kelly Howard		Collette Young
	Mike Hurley		

Agenda	**Minutes/Action Items**
Measles Overview Juventila Liko	2014: **Cases in US residents (635)** 77% unvaccinated 15% unknown vaccination status 8% vaccinated Among unvaccinated • 79% were personal belief exemptors • 3% unvaccinated travelers age 6 months – 4 years • 8% too young to be vaccinated **Cases in Oregon (5)** 4 cases in unvaccinated pre- and school-aged children 1 case in an infant 2015: **Measles outbreak – California (Dec 2014-Feb 2015)** ▪ 110 cases reported 35% visited one or both Disney parks during Dec. 17 – 20 34% cases unknown exposure 31% are secondary cases • 76% were household or close contacts • 24% exposed in a community setting 45% unvaccinated • 67% were personal belief exemptors 43% unknown or undocumented vaccination status

	12% vaccinated Patients range from 6 weeks to 70 years; median age 22 years 20% hospitalized ▪ Spread to 7 other states: Arizona (7), Colorado (1), Nebraska (1), Oregon (1), Utah (3) and Washington (2), as well as two neighboring countries, Mexico (1) and Canada (10). Oregon has seen an uptake in measles vaccination in the early week of 2015.
Meningococcal Update Kathy Scott	Since mid-January the University of Oregon has had four confirmed cases of meningitis. One of the cases resulted in death. The University and the Lane County Health Department have created a joint command with the goal of vaccinating 66% of students (~16,000). Several small clinics have been held, and a mass vaccination point of dispensing (POD) is ongoing this week. By the end of this week, the estimated total will be 34% vaccinated. The U of O is looking at additional methods to get vaccine to the student population. Oregon Immunization Program (OIP) participation: • Assist with the contract to purchase vaccine • Working with U of O and mass vaccinators to get vaccine administration data into ALERT IIS • Standing orders and pharmacy protocols • Insurance coverage • Staff at the POD • Monitoring vaccine uptake • Adverse event reporting • Communications Discussion: • Uncertain what the barriers to vaccination are. • Are there lessons learned from the other colleges with outbreaks in recent years? Princeton had an uptake rate in the 90th percentile, but they had more confirmed cases and offered the vaccine at no cost, as it was not yet approved for widespread use in the U.S. UC Santa Barbara's vaccination rate was in the 50th percentile. • Insurers are willing to cover the vaccine. • Messaging to the students has gone out in a variety of mediums.
School Law Advisory Overview Stacy de Assis Matthews	Immunization School/ Children's Facility/College Law Advisory Committee (ISFLAC) • Founded in 1981 • Only advisory committee defined in statute (ORS 433.245). Purpose: to advise the Oregon Immunization Program on implementation of the Oregon Revised Statutes requiring immunizations to protect Oregon's children and students attending our schools, children's facilities and colleges/universities against vaccine-preventable diseases. Members represent schools, day care, parents, providers, community leaders, public health and school administration. Criteria for reviewing vaccination for inclusion as school requirement: • ACIP Recommendation • Vaccine prevents disease in Oregon • Cost-effective • Demonstrated vaccine effectiveness • Prevents disease in schools • Vaccine coverage will increase

	• Acceptable to the community • Funding • Vaccine supply • Administrative burdens • Parent/caregiver considerations • ALERT IIS **Discussion:** Can ISFLAC remove a vaccine from school requirements? Yes, they have the authority but as yet haven't exercised it.
Legislative Update Sara Beaudrault	Proposed legislation that OIP is following: SB442 - Under the -3 and -5 amendments, this bill limits exemptions for vaccines required for school or child care attendance to those that are for an approved medical reason. https://olis.leg.state.or.us/liz/2015R1/Measures/Overview/SB0442 SB673 - This bill gives dentists the authority to administer vaccines that are required for school or child care attendance, and it instructs the Oregon Board of Pharmacy to write rules. https://olis.leg.state.or.us/liz/2015R1/Measures/Overview/SB0673 SB731 - This bill prohibits employers from mandating vaccination as a condition of employment unless required by federal law. It allows individuals to take civil actions in response to unlawful employment practices related to mandated immunizations for employees. https://olis.leg.state.or.us/liz/2015R1/Measures/Overview/SB0731 SB505 - This bill adds a requirement for hospitals to offer flu vaccines to all hospital inpatients age 65 and older upon discharge, during flu season. https://olis.leg.state.or.us/liz/2015R1/Measures/Overview/SB0505 SB520 - This bill lowers the age that pharmacists can vaccinate without a prescription to age 7. https://olis.leg.state.or.us/liz/2015R1/Measures/Overview/SB0520 SB895 - This bill requires schools and children's facilities to post immunization information in their main office and on their website. Immunization information includes the number of children who are enrolled and the number who are susceptible to restrictable diseases that are covered by school law administrative rule. The bill also requires the Superintendent of Public Instruction to include this immunization information on school or district performance reports. https://olis.leg.state.or.us/liz/2015R1/Measures/Overview/SB895 OIP is neutral on these bills, and is providing information upon request. Interested persons can sign up to follow bills by clicking on the links provided.
SB442 Overview	Original bill was to enhance SB132 that required parents wanting a nonmedical exemption to school and child care immunization requirements to receive education on the risks and benefits of vaccination prior to being granted the exemption by requiring all nonmedical exemptions existing before March 1, 2014 be renewed using the new process. An amendment was proposed to eliminate nonmedical exemptions altogether, limiting exemptions to those that are for an approved medical reason. A hearing was held two weeks ago. The Public Health Division

	provided informational testimony on immunization rates, disease incidents and outbreak data at the hearing. At this time no other hearings or work sessions are scheduled. **Discussion:** • The Oregon Health Policy Board, a citizen advisory board for the Oregon Health Authority came out in favor of the amended bill. • If the bill passes, there will be many implementation issues to resolve. • Washington and California have similar legislation in process. • Data from the first year of the new nonmedical exemption process will be available in late April or early May. • Very vaccine-resistant parents will not be swayed. Possibility of them pulling children from school. • Either outcome will require input from IPAT on next steps. • The amendment has not been adopted yet. The bill is still in the legislative process. • The bill will have implications to the doctor/patient relationship, especially with vaccine-hesitant parents. While providers may not agree with all patient decisions, it's important to maintain trust and keep a dialog open. • There has not been enough time given to see the results of the education process. • Where does IPAT fit under the Oregon Health Authority umbrella in regards to coming out for or against issues? Will need to review the charter to determine that. OHA employees are not voting members of IPAT. • There is no timeline for the bill at this time. Typically, a bill will have gone through a work session by early April in order to move through the legislative process.
Announcements	There was an increase in the number of children seen at the four School Exclusion vaccine clinics this year. Immunize Oregon is teaming up with the Oregon Alliance Working for Antibiotic Resistance Education (AWARE) on a series of workshops on communication techniques. The tentative dates are April 23, May 19 and June 26, 2015.

Next Meeting Date: Thursday, June 4, 2015 at 11:45 am, Room 1D