

Working together to protect all Kansans from vaccine-preventable disease.

IKC REGIONAL MEETINGS April 22-25

Garden City | Wichita | Pittsburg | Topeka | Lenexa













@immunizekscoalition 🙆 @immunizekscoalition 🚿 @ImmKSCoalition

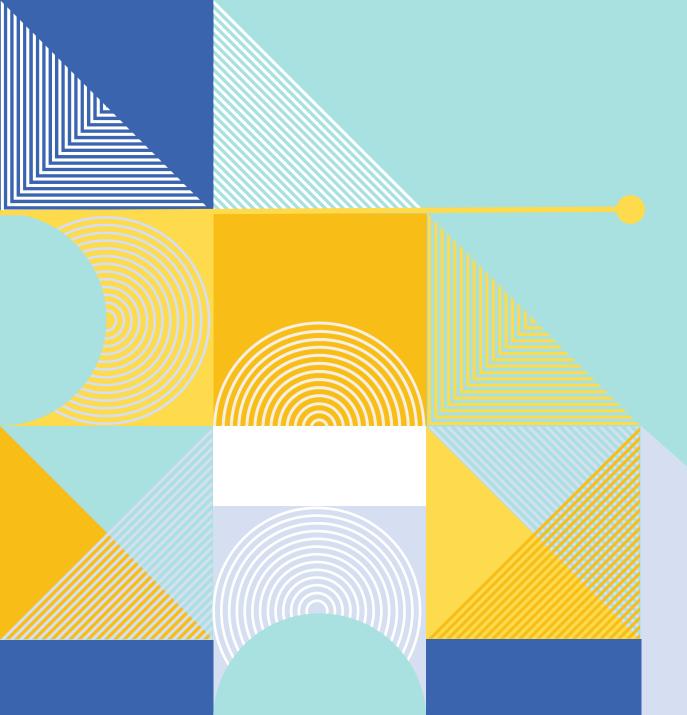


THANK YOU Regional Meeting Sponsors









WELCOME + INTRODUCTIONS

Geovannie Gone, LMAC, MPH Executive Director Amanda Applegate, PharmD, BCACP IKC Chair **Mission:** Working together to protect all Kansans from vaccine-preventable diseases.

Vision Statement + Priority Areas

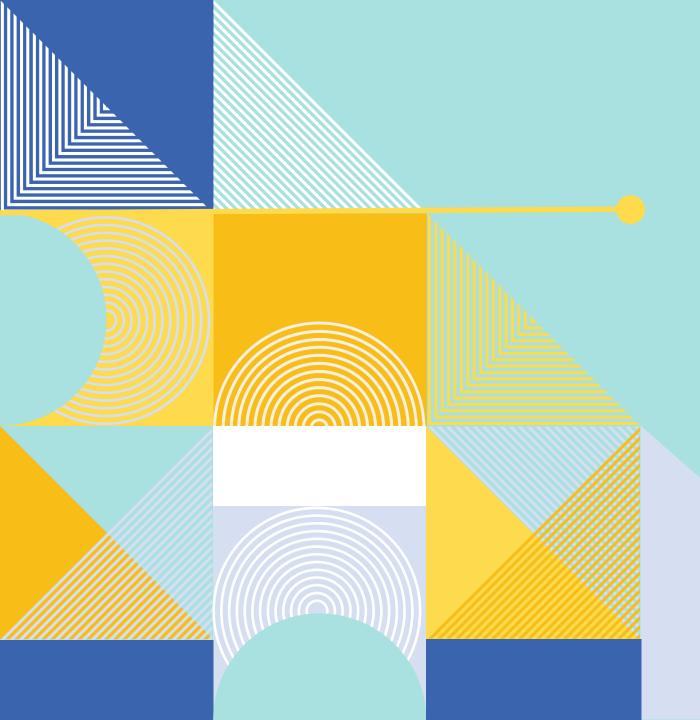
VISION STATEMENT

To protect all Kansans from vaccine-preventable diseases by working with communities to ensure equitable vaccine access for all people.

To be the trusted resource for evidence-based information to support immunization decisionmaking for individuals, families, and policy makers.

THREE PRIORITY AREAS

- 1 Strengthening vaccine confidence through education, awareness, and partnerships with trusted community sources.
- 2 Increase child, adolescent, and adult vaccination rates and vaccine access, with a particular focus on gaps in a current community.
- 3 Health equity



IKC OVERVIEW & RESOURCE HIGHLIGHTS

Lucy Waite Patricia Fierro Marixendra Alvarez Leonor Ramos-Salamanca **Community Health** Specialists

IKC Migrates to NEW Member and Event Management Software Neon CRM and to Registration Model

- Provides a newer and better way to engage with members and manage our memberships as our coalition continues to grow!
- Exhibitor sign-up and payment, donations, and most registrations now routed through Neon CRM!
- Soon, all members will be receiving an email to create their password and log into their Neon account.
- Stay tuned for additional details as all items are non-member facing at the moment.
- All events now have registration links (we no longer send blanket calendar invites due to our size)



IKC STRATEGIC TEAMS

EDUCATION AND AWARENESS

POLICY Heather Braum, MLS

IMPROVED SYSTEMS PERFORMANCE Sarah Good, MHA

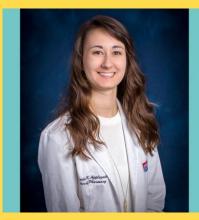
HEALTH EQUITY

Jaclyn Miller, LMSW

FUNDING AND GRANT DEVELOPMENT

Strategic teams will meet next at the annual meeting, unless special meetings are called before then. Everyone is encouraged to engage with a team and attend a team breakout at our full coalition meetings!

2023-2024 BOARD OF DIRECTORS



Chair Amanda Applegate, PharmD, BCACP



Chair Elect Brandan Kennedy

Brandan Kennedy, MD, FAAP, FABPM



Immediate Past Chair Kelly Sommers, BSN, RN



Treasurer / Secretary Kimberly Whitaker, RN



Health Equity Committee Chair

Jaclyn Miller, LMSW







Policy Team Chair Heather Braum, MLS



Education and Awareness Team Chair (Interim); Grants and Funding Development Team Chair (through March 2024)

Susan Wood, RN, BSN



Improved Systems Performance Team Chair

Sarah Good, MHA



KDHE Representative

Jaime Gabel, MPH

RECOGNIZING A DECADE OF INVOLVEMENT AND 6 YEARS OF LEADING IKC





Susan Wood, RN, BSN

Chair Terms (2018-2021)

Education & Awareness Strategic Team Chair (2021-2024)

For your leadership!

MEET OUR TEAM

Community Health Specialists



Marixendra Alvarez Sedgwick County



Leonor Ramos-Salamanca Wyandotte & Johnson Counties



Immunization Program Manager Monique Garcia, MBA



Executive Director Geovannie Gone, LMAC, MPH

Additional staff support provided by EnVisage Consulting, Inc.



Patricia Torres Seward County



Lucy Watie Grant County



Connie Satzler Senior Operations Manager



Paige Lewis Communications Lead



Greg Gwynn Website Developer

REACHING COMMUNITIES ACROSS THE STATE

Cheyenr	ie Ra	wlins	Decatur	Norton	Phillips	Smith	Jewell	Republic	Washingto	n Marsh	all Nema	Brown	Doniphan		Southwest KS Area Lucy Watie	
Charma		iomas	Sheridan	Graham	Rooks	Osborne	Mitchell	Cloud	Clay	Potta	watomie	Jackson	Atchison		Southwest KS Area - Patricia Torres	
Sherma	Sherman Thon						Lincoln	Ottawa		۲Riley کی۔ کسی	6	Je	fferson Leavenworth		Wichita Area Marixendra Alvarez	
Wallaco	e Loga	in	Gove	Trego	Ellis	Russell		Saline	, Dickinson		Wabaunsee		Douglas Johnson		Kansas City Area Leonor Ramos	
				Need	Rush		Ellsworth			Morris		Osage	Franklin Miami			
Greeley	Wichita	Scott	Lane	Ness		Barton	Rice	McPherson	Marion	Chase	Lyon					
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Morton	Stevens	Seward	Meade	Clark	Comanche	Barber	Harpe	r Sumne	er Cow	ley Cł	nautauqua ^M	lontgomery				

REACHING COMMUNITIES ACROSS THE STATE

















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Entre Mujeres: The Health of Women

- Sunday, April 28th, 2024
- 12:00 4:00 p.m.
- Memorial Hall, Kansas City, KS



An empowering conference focusing on the health of women. It brings an engaging approach to educate all women on preventive health measures for themselves and their children, including prenatal care, maternal/infant health, and health screenings. Women will learn how we can work together to prevent infant mortality, how to protect themselves against breast cancer, and about the HPV vaccine's proven protection against six HPV-related cancers, including cervical cancer.





KEY INITIATIVES

Vaccination Community Navigator Trainings

- Held throughout March and April in designated counties.
- Trainings in English and Spanish
- Each training featured a different module, highlighting key concepts to enhance vaccine knowledge and confidence among community members.



Module 1: The Past, Present, and Future of Vaccination

Module 2: The Nuts and Bolts of Vaccines Module 3: How to Debunk Misinformation and Bolster Vaccine Confidence Module 4: Addressing Social Determinants of Health and Barriers to Vaccination





KEY INITIATIVES



LEADING AMERICA TO HEALTHIER LIVES

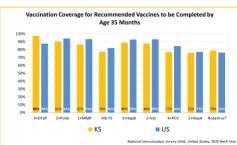
V for Vaccinated Campaign - Coming Soon!

- New campaign initiative in collaboration with the Office of the Assistant Secretary for Health (OASH).
- Campaign Goals and Focus:
 - Improve knowledge about the benefits of vaccination and the harmful consequences of vaccine-preventable diseases.
 - Improve attitudes about the importance of childhood vaccination, including increasing the number of parents who believe vaccination is important.
 - Increase beliefs in the safety and efficacy of vaccines.
 - Shift perceptions around vaccine support.
 - Drive more parents to vaccinate their children, including catching up on routine vaccinations.

IMMUNIZEKANSASCOALITION.ORG

Check out previous campaigns and featured resources:

- Vaccine Fears Overturned by Facts
- Honest Conversations Campaign
- Education Modules
- IKC's Data Dashboard
- IKC Google Calendar









The fact is, fears can play a large role in someone's decision to not vaccinate, despite the strong science and case that they are safe, effective, and ife-saving Vaccine Fears Overtunad by far is a collaboration between Immunice Kansas Codition (KC) and the careotors of Back to the Vas Heather Simpson and Lyda Greene. Heather and Lyda are moren who used to be active in the anti-vaccine community, but are now strong valoes for vaccination.

hether you're a parent or a doctor caring for patients - this resource is for you! Here are answers twelve common questions about vaccine ingredients and safety. We hope these facts help all confidence to trust vaccines with the behind-the-scenee work of keeping us healthy.

ccines cause autism?	No. Studies have shown that there is no link between receiving vaccines and developing autism spectrum disorder.
aldehyde a dangerous iccine ingredient?	No. Formaldehyde is essential to human metabolism, and is used to build energy for physical and mental daily taske! Formaldehyde in vaccines daes not exceed 0.2 mg, but a newtorn will have about 50x that naturally in their body. Fun fact: There is about 60x more formaldehyde in a pear than in any vaccine!
ercury a dangerous iccine ingredient?	No. Mercury is found naturally in the earth's crust, oir, soil, and water. Thimerosal is a mercury-based preservative, it's a sofe compound of mercury, used to keep vaccines sterile. In 2001, "mercury" was removed from all childhood vaccines, excluding multi-dose flu vaccines.
n polysorbate 80 in is open the blood brain barrier?	No. Polysorbate 80 is used as a stabilizer in vaccines, used to keep vaccines effective during storage and transport. However, it's used in quantities nowhere does to causing harm. Fun fact: We injest polysorbate 80 everyday in our food, it's used as a binding agent in peanut butter, ice cream, jello, and more!
minum a dangerous ccine ingredient?	No. Aluminum is used in vaccines as an adjuvant - a component that boasts the immune response to a vaccine. Infants are exposed to more aluminum in breastmilk than in all of their recommended vaccines during the first 6 months of life! Fun Fact Aluminum is found in fruits, vegetables, meats, and fish because is the 3rd most advanced na earth



IMMUNIZEKANSASCOALITION.ORG/KEY-RESOURCES

We're continuing to build our outreach educational materials in multiple languages!

English	Spanish	Dari
Pashto	Arabic	Haitian Creole







View on IKC's Key Resources Page



BRIDGE ACCESS PROGRAM INSERT

The Bridge Access program insert helps guide people to free updated COVID-19 vaccines, available through December 31, 2024



RESPIRATORY SEASON BROCHURE

IKC's Respiratory Season Brochure features COVID-19, Flu, and RSV. Learn about each disease, its symptoms, and how to prevent illness through vaccination.

Available in English and Spanish





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serious illness. Vaccination is crucial in preventing f RSV, and COVID-19. Learn more about respiratory viruses, who is

Learn more about respiratory viruses, who is most vulnerable, and how vaccines build community immunity!

View on IKC's Key Resources Page



Double-sided English/Spanish



Connect with us!

Resources and Connection Opportunities

WAYS TO BECOME INVOLVED



Become a member or join a meeting as a guest Read our newsletter Mark our newsletter as a "safe sender" in your inboxes to not miss any emails! Share IKC resources and follow us on social media! Your engagement on social media helps us reach more across the state.

Request IKC at your organization or community's event, or partner at a vaccination clinic. Get to know your local representative or senator before Advocacy Day and join us!



FIND UPCOMING EVENTS ON THE IKC GOOGLE CALENDAR

National Infant Immunization Week

• April 22-29th

Kansas Immunization Conference

- May 20-23rd
- IKC Dinner
 - May 21st

IKC Annual Coalition Meeting

• July 26th

National Immunization Awareness Month/Back to School Vaccines

• August

IKC Coalition Meeting

• November 22nd

National Influenza Immunization Week

• Early December

IKC Advocacy Day

• Late January or early Feb 2025 - Stay tuned!

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		List View	Agenda	ek Month	We		h 2024 -		Today 4
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ommunity Navigator Training	April 1	Monday, A		9am Vaccin				1pm Measle	
ommunity Navigator Training			5					Apr 1	31

The calendar is continuously updated with webinars and additional events.

Engage + Follow IKC on Social Media

Connect With Us

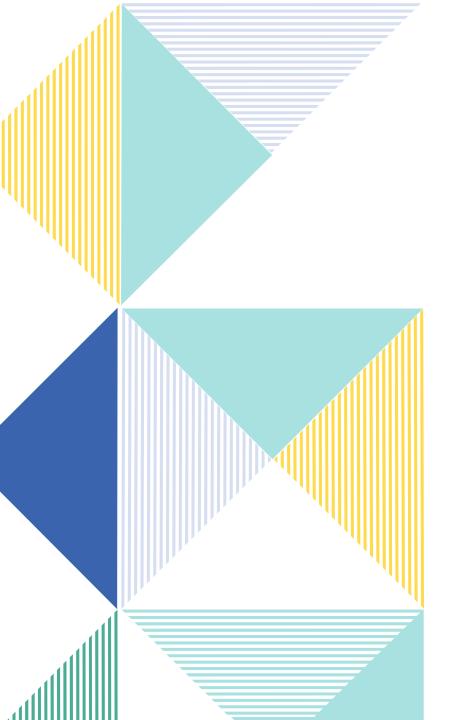
- immunizekansascoalition.org
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 - O @immunizekscoalition
 - ✗ @ImmKSCoalition
- in
- Immunize Kansas Coalition
- Staff@immunizekansascoalition.org



immunizekscoalition Immunize Kansas Coalition 381 followers • 222 posts







Kansas Department Of Health And Environment (KDHE) Epidemiology Overview: Immunizations, Vaccine Preventable Disease Outbreaks, and Data

Andrea May, MPH and Allison Zaldivar, MPH Kansas Department of Health and Environment



and Environment



Epidemiology Overview: Immunizations, Vaccine Preventable Disease Outbreaks and Data Andrea May, MPH and Allison Zaldivar, MPH | April 2024



- Overview of state statutes
- School and daycare requirements
- College and university requirements
- Statewide and local coverage
- Kansas Department of Health and Environment's (KDHE's) role in vaccine-preventable disease (VPD) response
- Global and national VPD current events



- K.S.A. 72-6261 Sets definitions of school board, school, local health department, secretary, and physician.
- K.S.A. 72-6262 Sets requirements and allowable alternatives.
- K.S.A. 72-6265 Allows for exclusion of students who are not in compliance with 72-6262.
- K.S.A. 76-761a Allows colleges and universities to place meningitis policies for vaccination and waivers for student housing.



K.S.A. 72-6262 (a) – Requirements

- Upon enrollment and prior to admission and attendance in a school or a day care program operated by a school, documentation should be presented:
 - Student has completed all vaccination requirements for their grade level
 - Student has completed all appropriate vaccination requirements and has documented proof of disease
 - Student is in the process of completed required vaccinations and has recently received the most appropriate dose in each series
 - Student is non-compliant



K.S.A. 72-6262 (b) – Exemptions

- As an alternative to the requirements in subsection (a)
 - Medical Exemption required to be signed by licensed physicians annually stating which vaccines the student cannot receive and that the physical condition of the child is such that the tests or inoculations would seriously endanger the life or health of the child
 - Religious Exemption written statement signed by one parent or guardian that the child is an adherent of a religious denomination whose religious teachings are opposed to such tests or inoculations



K.S.A. 72-6265

- School board is able to adopt a policy that may exclude a pupil not in compliance with K.S.A. 72-6262 then the school board may exclude them from school attendance. Pupil shall be excluded from school attendance under this section until such time as the pupil has complied with the requirements of K.S.A. 72-6262.
- Policy must include written notice to parent or guardian:
 - Indicating the reason for exclusion from school attendance
 - State that the student shall continue to be excluded until the pupil has complied with the requirements of K.S.A. 72-6262
 - Inform the parent or guardian that a hearing thereon shall be afforded the parent or guardian upon request therefor



Schools and Daycares

- Diseases required to be vaccinated against are listed in <u>K.A.R 28-1-20</u> published July 18, 2019 in the Kansas Register.
 - School Requirements: Diphtheria, Hepatitis A, Hepatitis B, Measles, Meningitis, Mumps, Pertussis, Poliomyelitis, Rubella, Tetanus and Varicella
 - Day Care Requirements: Diphtheria, *Haemophilus influenzae* type B, Hepatitis A, Hepatitis B, Measles, Mumps, Pertussis, Pneumococcal disease, Poliomyelitis, Rubella, Tetanus, and Varicella
- Vaccination age and number of doses required follows <u>ACIP</u> <u>standards.</u>
- Any case of these diseases (besides pneumococcal disease) start a public health response which may include isolation of ill persons, active surveillance of close contacts, and exclusion of susceptible close contacts from school and day care.



- Requirements including number of doses at each age are published annually for <u>schools</u> and <u>day cares</u>.
- Upon enrollment, schools are to examine immunization records and exemptions for required elements and required doses.
 - Some districts have designated forms for religious exemptions.
 - Districts may allow a grace period from the start of the school year until exclusions are enforced.
- Presence of an exclusion policy and enforcement of exclusion policy varies greatly across the state.
- Enforcement of requirements is up to each individual school board to enforce.



K.S.A. 76-761a

- Each college and university shall have in place policies and procedures requiring that all incoming students residing in student housing be vaccinated for meningitis. Such policies shall include appropriate waiver procedures for those who refuse to take the vaccine.
 - Colleges or universities set policies and enforcement
 - Only for students residing in student housing



- Schools with a kindergarten class are randomly sampled to:
 - Submit up to 30 student immunization records and complete exemption survey or
 - Complete exemption survey
- Sampling set at school district level.
- Exemption survey assesses school exemption numbers, grace period length, and presence of exclusion policy.
- Immunization records analyzed based on 60th day after start of school based on date of immunizations.
- Coverage determined at state, county and school district level.



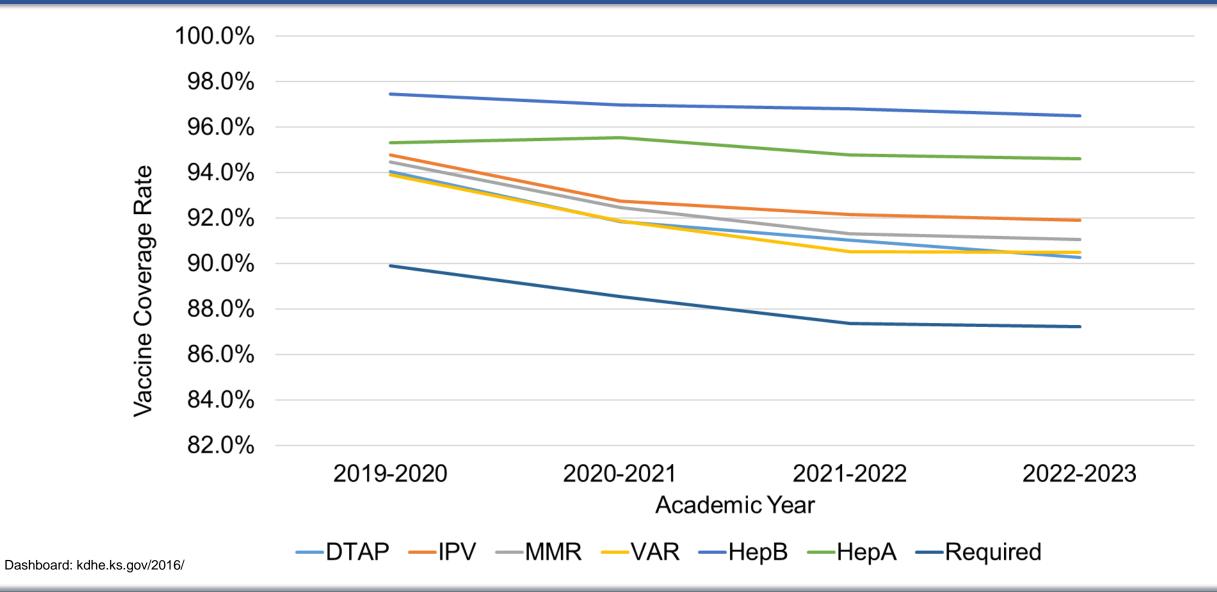
Kindergarten Vaccine Requirements

Vaccine	Disease Prevented	Number of Doses					
DTaP	Diphtheria, Tetanus Pertussis	5 doses or 4 doses considered appropriate if 4 th given on or after 4 th birthday					
IPV	Polio	4 doses or 3 doses considered appropriate if 3 rd given on or after 4 th birthday					
MMR	Measles, Mumps, Rubella	2 doses					
Var	Varicella	2 doses or history of disease					
НерВ	Hepatitis B	3 doses					
НерА	Hepatitis A	2 doses					
Required	All vaccines required for kindergarten entry	Also referred to as 542232					

To protect and improve the health and environment of all Kansans



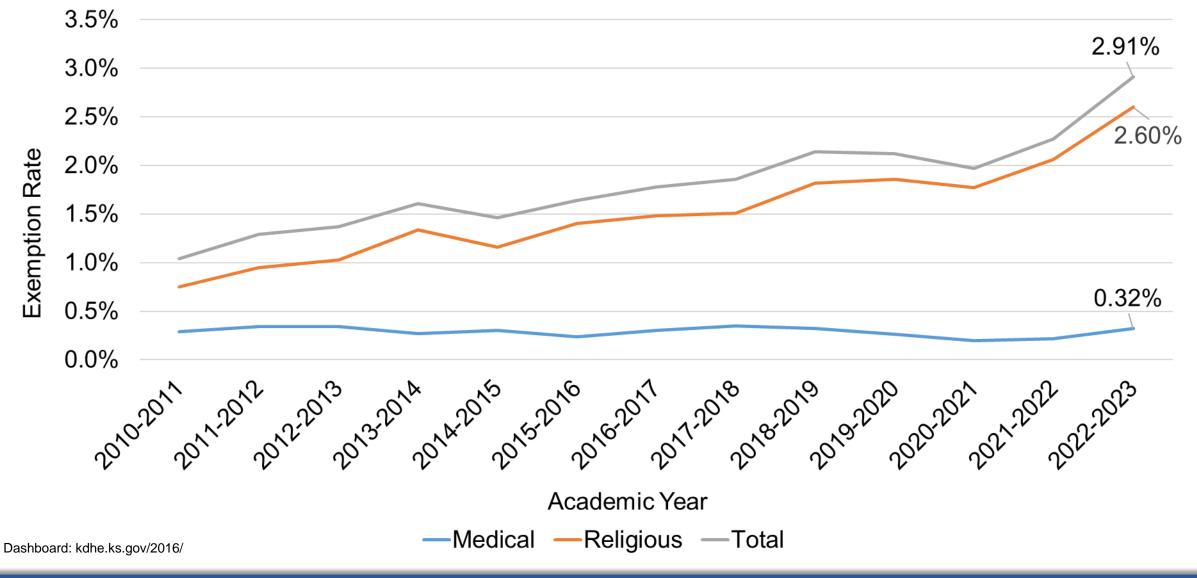
Statewide Vaccine Coverage Rate by Academic Year



To protect and improve the health and environment of all Kansans



Statewide Exemption Rate by Academic Year



To protect and improve the health and environment of all Kansans

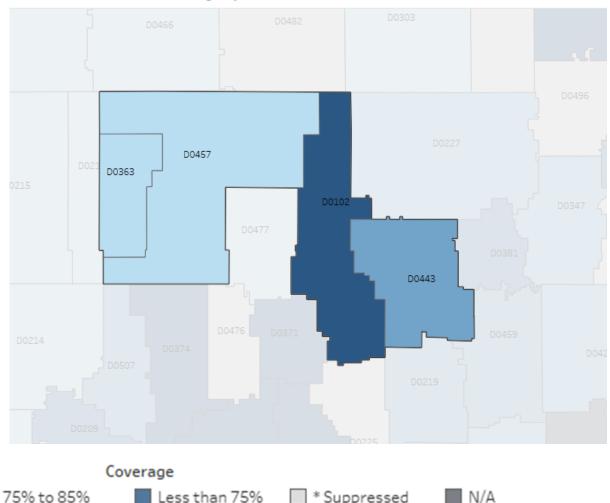


Local Coverage: Garden City Area

District Comparison

- USD 457 Garden City
- USD 443 Dodge City
- USD 363 Holcomb
- USD 102 Cimmaron-Ensign

95% and greater 90% to 95%



MMR Vaccine Coverage by School District for 2022-2023 Academic Year

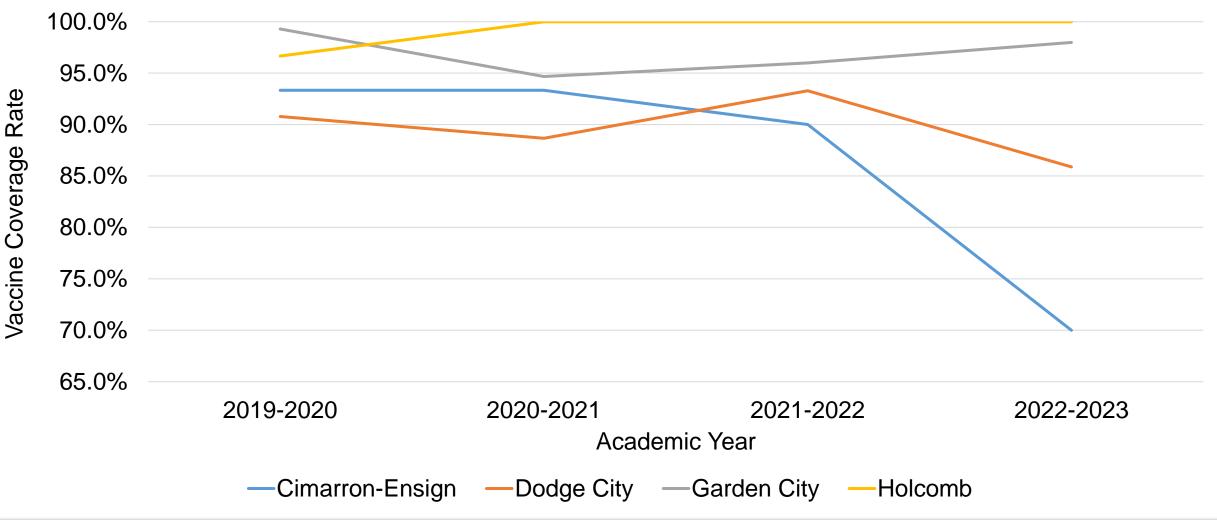
To protect and improve the health and environment of all Kansans

85% to 90%



Local Coverage: Garden City Area

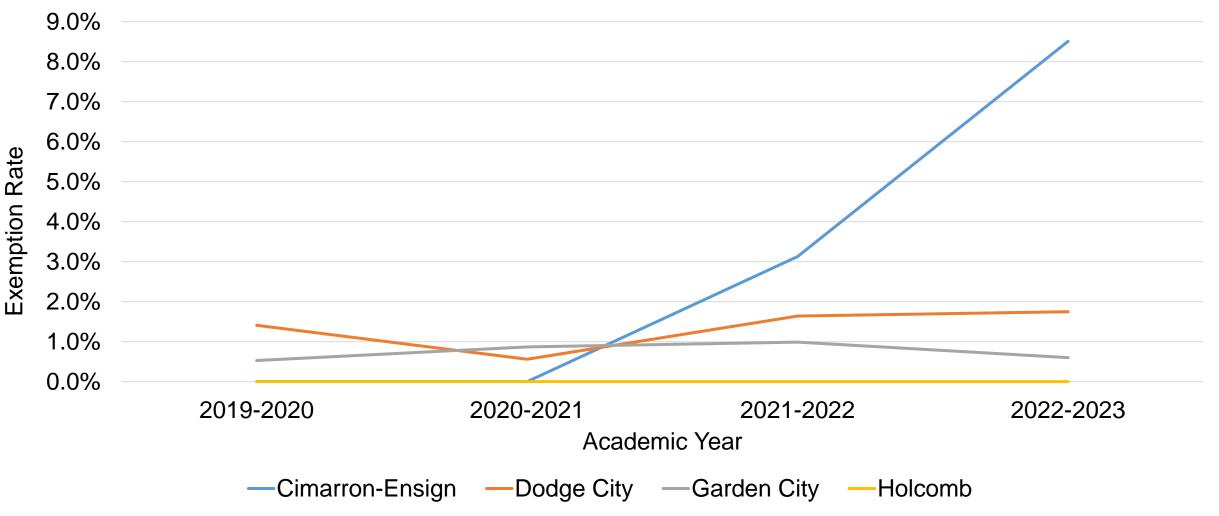
MMR Vaccine Coverage among Garden City Area Kindergartens





Local Coverage: Garden City Area

Exemption Rate among Garden City Area Kindergartens



To protect and improve the health and environment of all Kansans



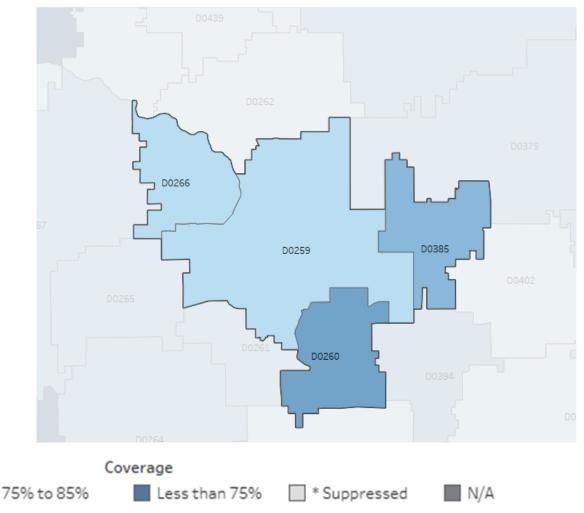
Kansas Vaccine Requirements - Local Coverage: Wichita Area

District Comparison

95% and greater 90% to 95%

- 259 Wichita
- 385 Andover
- 260 Derby
- 266 Maize

MMR Vaccine Coverage by School District for 2022-2023 Academic Year



40

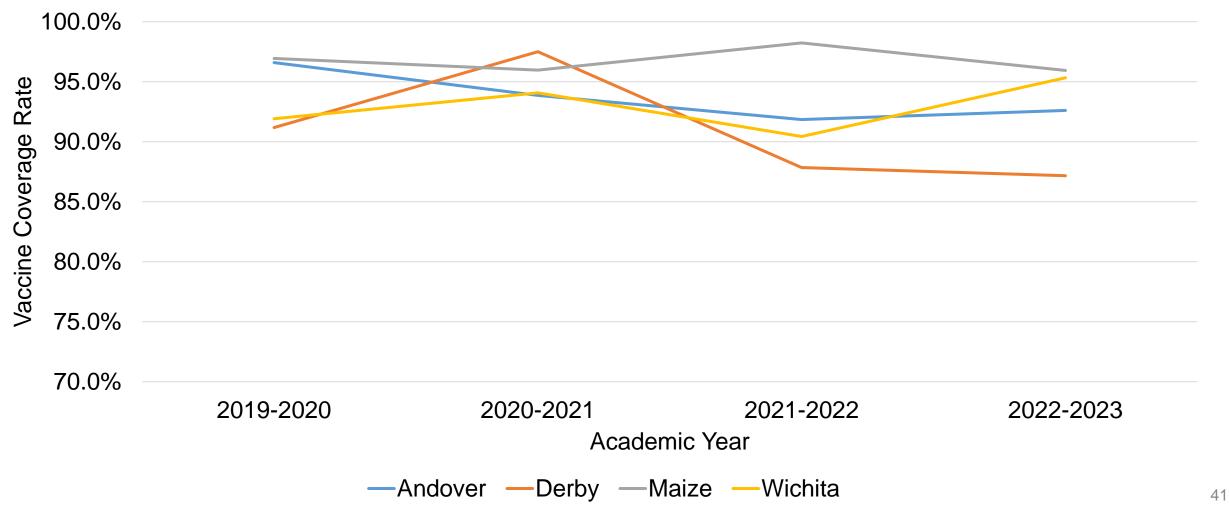
To protect and improve the health and environment of all Kansans

85% to 90%



Kansas Vaccine Requirements - Local Coverage: Wichita Area

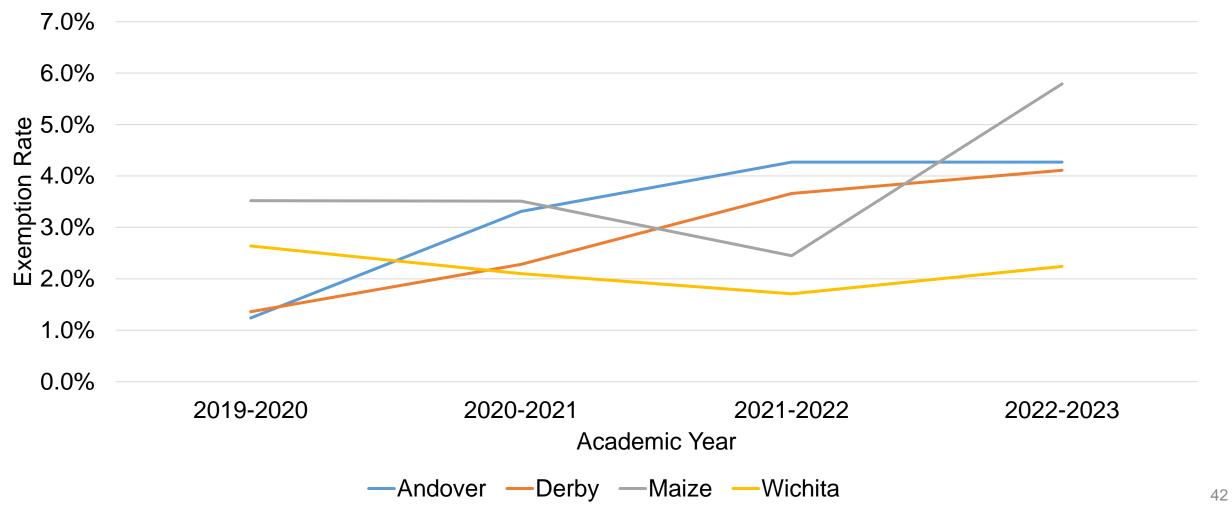
MMR Vaccine Coverage among Wichita Area Kindergartens





Kansas Vaccine Requirements – Local Coverage: Wichita Area

Exemption Rate among Wichita Area Kindergartens





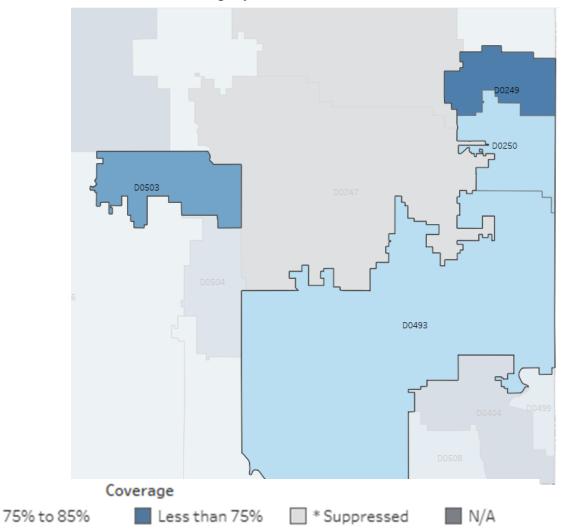
Kansas Vaccine Requirements - Local Coverage: Pittsburg Area

District Comparison

95% and greater 90% to 95%

- 250 Pittsburg
- 503 Parsons
- 493 Columbus
- 249 Frontenac

MMR Vaccine Coverage by School District for 2022-2023 Academic Year



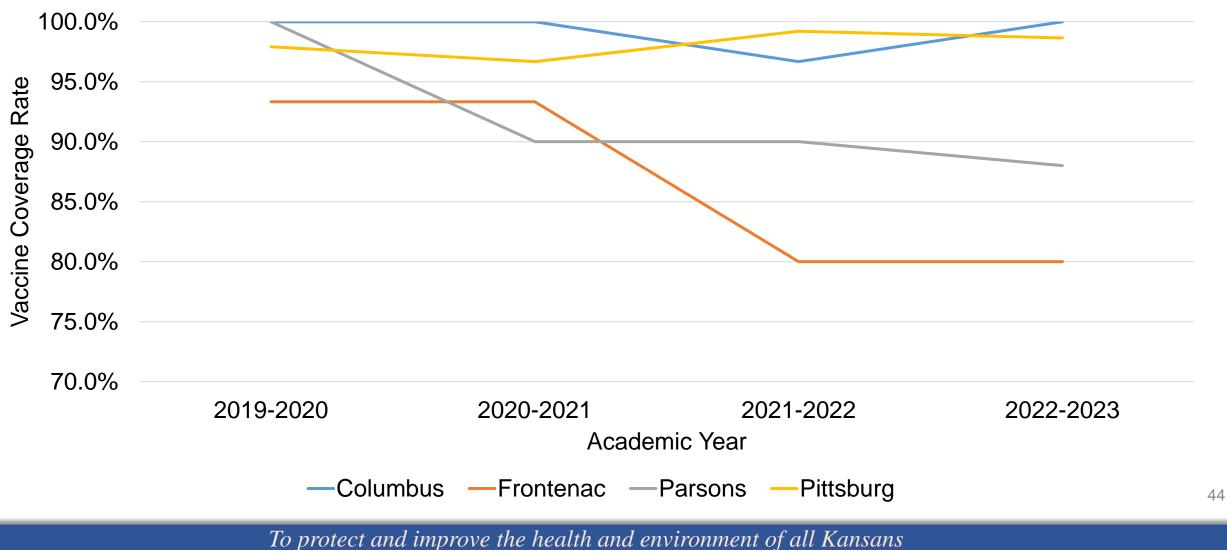
To protect and improve the health and environment of all Kansans

🔲 85% to 90%



Kansas Vaccine Requirements - Local Coverage: Pittsburg Area

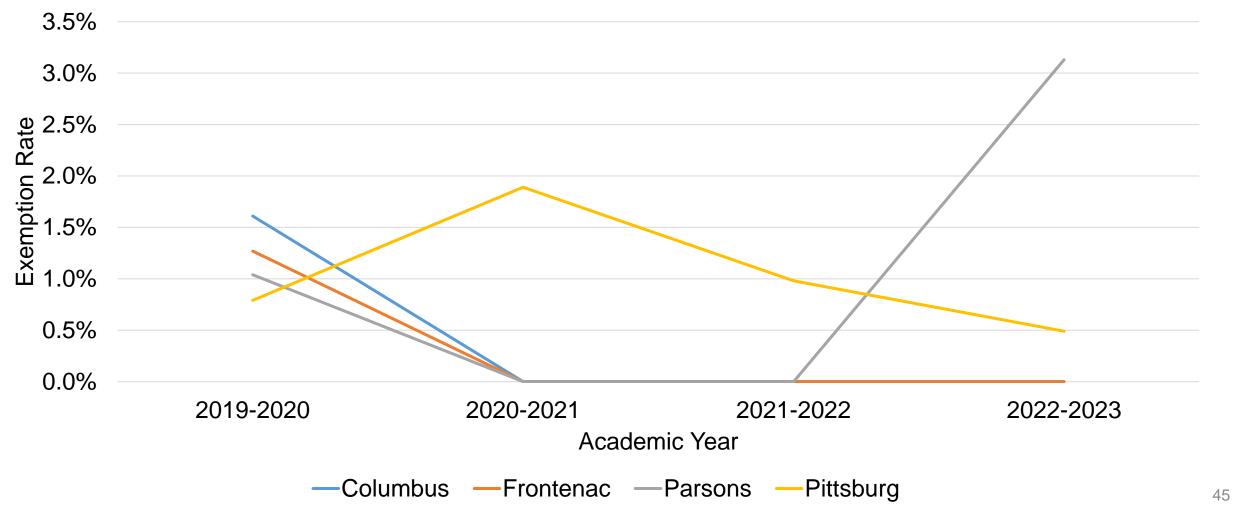
MMR Vaccine Coverage among Pittsburg Area Kindergartens





Kansas Vaccine Requirements - Local Coverage: Pittsburg Area

Exemption Rate among Pittsburg Area Kindergartens





Kansas Vaccine Requirements - Local Coverage: Topeka Area

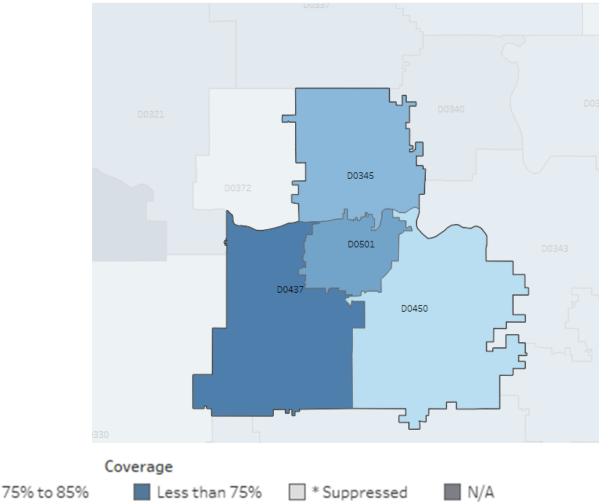
District Comparison

- 501 Topeka Public
- 450 Shawnee Heights
- 437 Auburn Washburn

95% and greater 90% to 95%

• 345 Seaman

MMR Vaccine Coverage by School District for 2022-2023 Academic Year



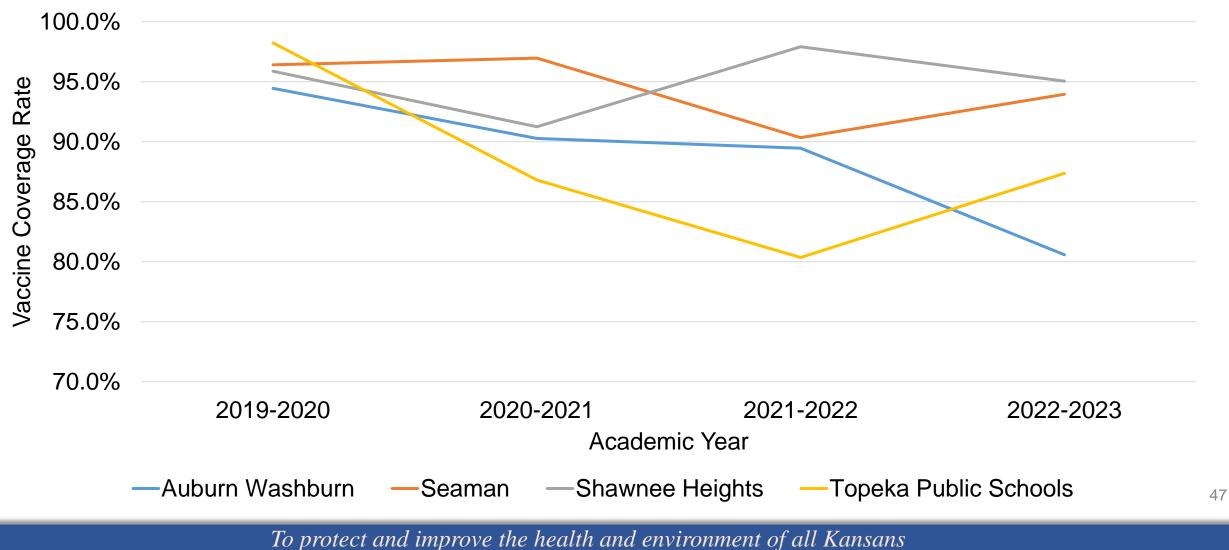
To protect and improve the health and environment of all Kansans

85% to 90%



Kansas Vaccine Requirements - Local Coverage: Topeka Area

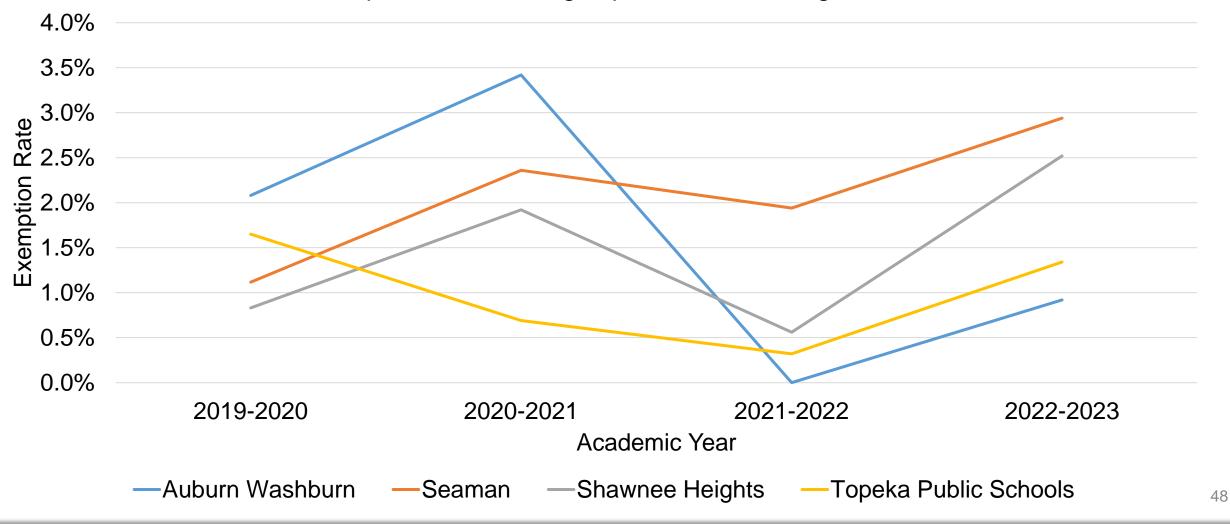
MMR Vaccine Coverage among Topeka Area Kindergartens





Kansas Vaccine Requirements - Local Coverage: Topeka Area

Exemption Rate among Topeka Area Kindergartens



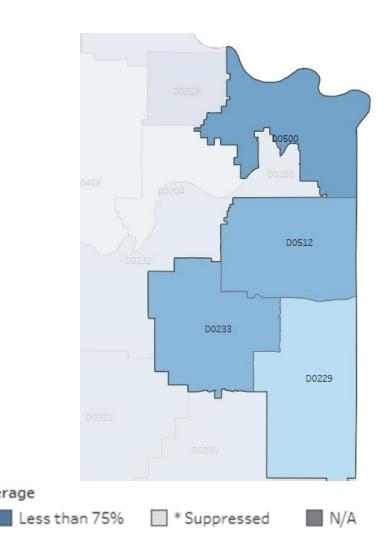


Kansas Vaccine Requirements - Local Coverage: Kansas City Area

District Comparison

- 229 Blue Valley
- 233 Olathe
- 500 Kansas City
- 512 Shawnee Mission

95% and greater 90% to 95%



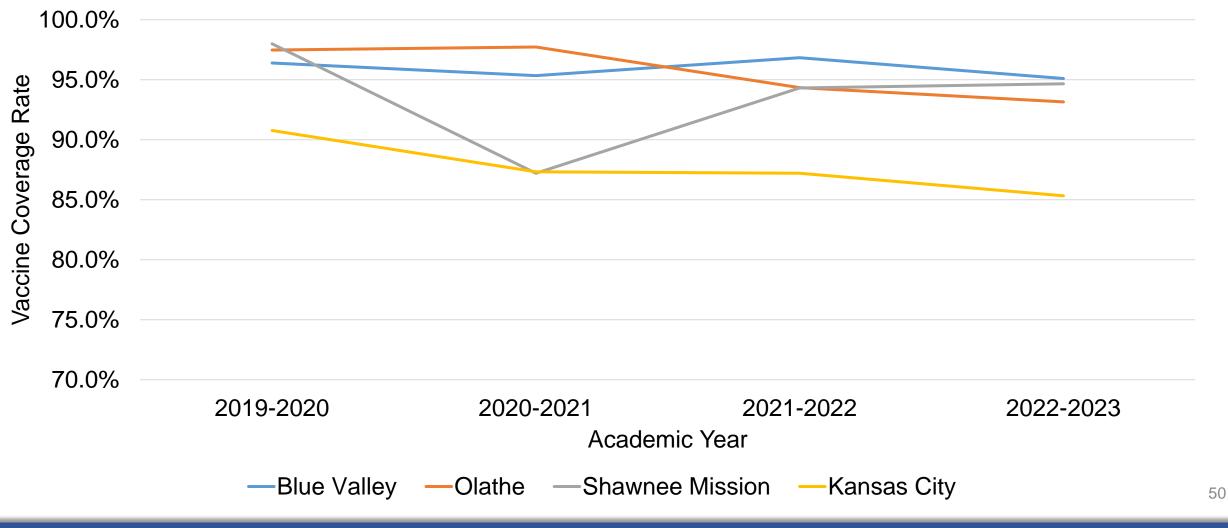
75% to 85%

85% to 90%

Coverage

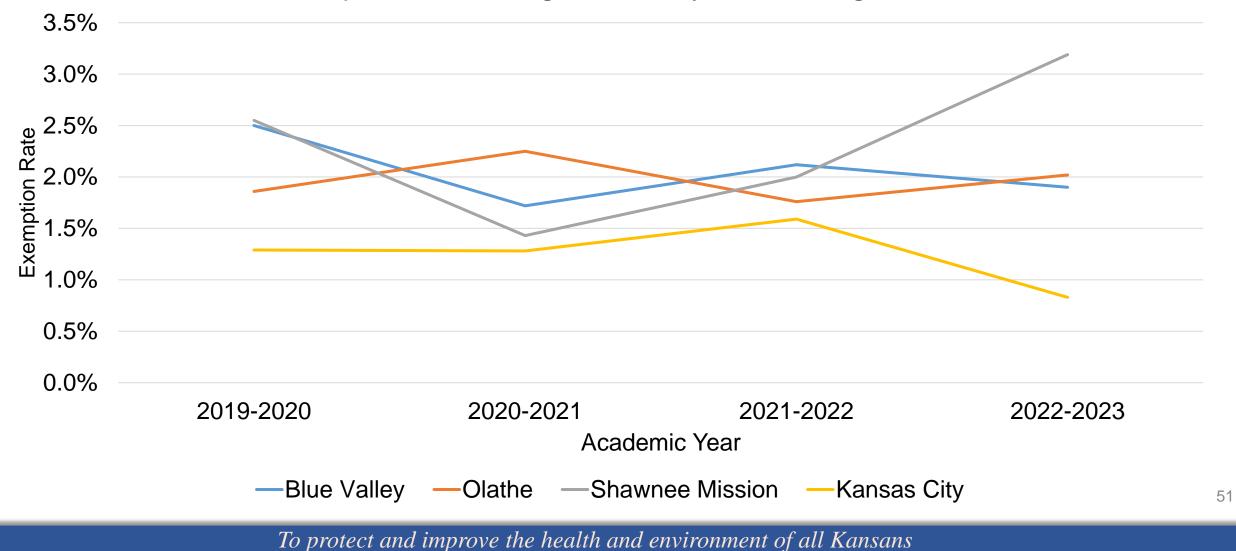
Kansas Vaccine Requirements - Local Coverage: Kansas City Area

MMR Vaccine Coverage among Kansas City Area Kindergartens



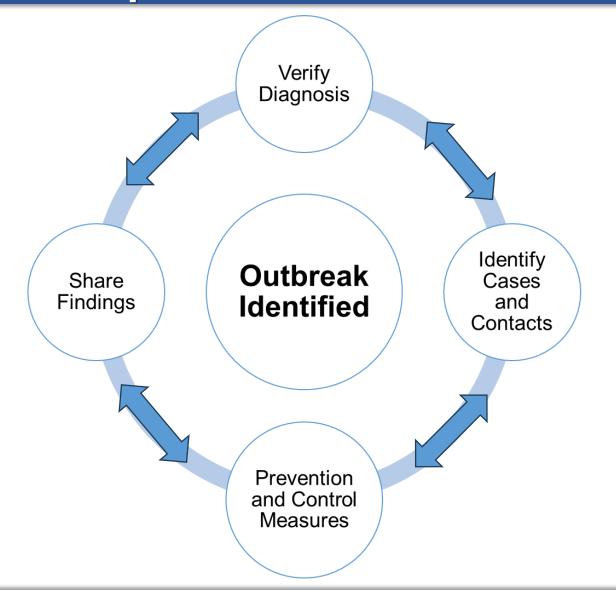
Kansas Vaccine Requirements - Local Coverage: Kansas City Area

Exemption Rate Among Kansas City Area Kindergartens





KDHE's Role in Vaccine Preventable Disease (VPD) Outbreak Response





Outbreak is Identified

For <u>4-hour reportable diseases</u> report to the KDHE Epidemiology Hotline: 877-427-7317. For <u>all</u> <u>ther reportable diseases</u> fav a Kanasa Reportable Disease Form and any lab results to your local health department or to KDHE: 877-427-7318 within 24 hours or by the next business day.			
Acute flaccid myelitis	Legionellosis		
Anaplasmosis	Leptospirosis Listeriosis		
Anapiasmosis Arboviral disease, neuroinvasive and nonneuroinvasive	Listeriosis E24		
(including chikungunya virus, dengue virus, La	Malaria		
Crosse, West Nile virus, and Zika virus)	Measles (rubcola) 🕾		
Babesiosis	Meningococcal disease 💋 🕾		
Blood lead levels (any results) Botulism 🕾	Mumps 😁 Pertussis (whooping cough)		
Brucellosis	Plague (Yersinia pestis) 🕾		
Campylobacteriosis	Poliovirus 🕾		
Candida auris D	Pertussis (whooping cough)		
Carbapenem-resistant bacterial infection or	Psittacosis		
colonization @	Q Fever (Coxiella burnetii, acute and chronic)		
Carbon monoxide poisoning Chancroid	Rabies, human 🕾 Rabies, animal		
Chancroid Chickenpox (varicella)	Rabies, animai		
Chlamydia trachomatis infection	Salmonellosis, including typhoid fever @		
Cholera 🕾	Severe Acute Respiratory Syndrome-associated		
Coccidioidomycosis	coronavirus (SARS-CoV) 🕖 🕾		
Cryptosporidiosis	Shiga toxin-producing Escherichia coli (STEC)		
Cyclosporiasis Diphtheria 🕾	Shigellosis D Smallpax 🕾		
Ehrlichiosis	Spotted fever rickettsiosis		
Giardiasis	Streptococcus pneumoniae, invasive disease 🔊		
Gonorrhea (include antibiotic susceptibility results,	Syphilis, all stages, including congenital syphilis		
if performed)	Tetanus 🕾		
Haemophilus influenzae, invasive disease Hansen's disease (leprosy)	Toxic shock syndrome, streptococcal and other Transmissable spongioform encephalopathy (TSE) or		
Hantavirus	prion disease		
Hemolytic uremic syndrome, post-diarrheal	Trichinellosis or trichinosis		
Hepatitis, viral (A, B, C, D, and E, acute and chronic)	Tuberculosis, active disease 🖅 🕾		
Hepatitis B during pregnancy	Tuberculosis, latent infection		
Hepatitis B in children <5 years of age (report all	Tularemia, including laboratory exposures		
positive, negative, and inconclusive lab results) Histoplasmosis	Vaccinia, post vaccination infection or secondary transmission		
Human Immunodeficiency Virus (HIV) (report the	Vancomycin-intermediate and resistant Staphylococcus		
CD4+ T-lymphocyte cell counts, report viral	aureus (VISA and VRSA)		
load of any value, and report each pregnancy of	Vibriosis (all cholerae and non-cholerae Vibrio		
women diagnosed with HIV)	species) @		
Influenza deaths in children <18 years of age Influenza, novel A virus infection	Viral hemorrhagic fevers 🕾 Yellow fever		
To Outbreaks, unusual occurrence of any dise terrorism, and unexplained deaths due to an unid	rase, exotic or newly recognized diseases, suspect acts of entified infectious agent should be <u>reported within 4 hours</u> demiology Hotline: <u>877-427-7317</u>		
 Indicates that a telephone report is required b cases to KDHE toll-free at 877-427-7317 Indicates that bacterial isolate, original elinic: Division of Health and Environmental Labora 			
Phone: (785) 296-1620			

- Kansas Administrative Regulation (K.A.R.) 28-1-2 designates reportable conditions in Kansas
 - Outbreaks of any kind are reportable to KDHE by telephone within four hours of suspicion
- All case investigations reviewed by KDHE epidemiology staff
 - Identify commonalities
 - Monitor for unexpected increases in cases
- KDHE confirms outbreak definition is met and advises next steps

Accessible at kdhe.ks.gov/DocumentCenter/View/14247/



Example – Shawnee County Hepatitis A Outbreak

- In May 2023, KDHE epidemiologists noticed several hepatitis A cases reported in Shawnee County within short window
- Reviewed case data and identified commonalities
 - Geographic location
 - Persons reporting unstable housing
 - Persons reporting drug use
 - Jail association





Verify Diagnosis



- Epidemiologists provide guidance on preferred testing by etiology
 - Test type
 - Collection
 - Shipping and handling
- Kansas Health and Environmental Laboratories (KHEL) has capacity to test for several VPDs
 - Testing is free of charge
 - Can provide collection and shipping supplies
 - Fast turnaround time
- KDHE can also facilitate testing at CDC



Example – Shawnee County Hepatitis A Outbreak

- Majority of cases tested in local emergency department
- Results reported electronically to KDHE
- Testing performed on recently symptomatic individuals at outbreak settings and Mobile Access Partnership (MAP) events
- Sequencing performed at CDC to link cases





Identify Cases and Contacts



- Support case and contact investigations
 - Interviewing or data collection tools
 - Text monitoring
 - Surge capacity for identifying cases and contacts

Example: Hepatitis A Outbreak

- Provided surge capacity for case interviews and follow up with contacts
- Interview technique trainings
- Outreach to medical providers for case finding



Prevention and Control Measures

- Control measures
 - Isolation
 - Treatment
 - Education
- Prevention measures
 - Quarantine
 - Prophylaxis of contacts with vaccine or immune globulin
 - Chemoprophylaxis or administration of antimicrobial agents
 - Education
 - Community vaccination





Example – Shawnee County Hepatitis A Outbreak

Protect Yourself and Your Community. There is an Outbreak of Hepatitis A.

Hepatitis A can be prevented with a safe and effective vaccine.

Hepatitis A is a liver infection caused by the hepatitis A virus. The virus is very contagious and spreading from person to person and causing an outbreak.

Shawnee County Health Department 2115 SW 10th Ave, Topeka, KS 66604

Vaccination Clinic Hours

Mon, Thurs and Fri: 8 - 11 a.m. and 1- 4 p.m. Tues: 10 a.m. - 1 p.m. and 3 - 6 p.m. Weds: 8 - 11 a.m. and 2 - 4 p.m.

Call **785-251-5700** to schedule an appointment. Walk-ins accepted.



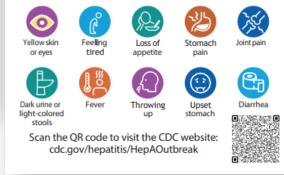
Who should get vaccinated?

People who use injection or non-injection drugs.
People experiencing unstable housing and/or homelessness.

People who are currently or have recently been incarcerated.

People at increased risk of severe disease from infection (persons with severely compromised immune systems, chronic liver disease, or HIV infection and older adults).
People who provide care for individuals who are experiencing homelessness, who use injection or non-injection drugs, or the elderly.

See a doctor if you have any symptoms of hepatitis A.



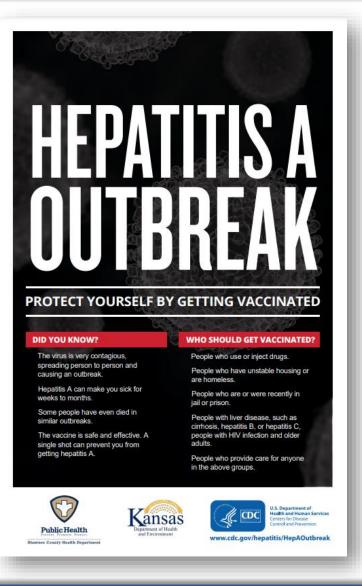
- Control measures
 - Educating upon interview
 - Identifying food handlers
- Prevention measures
 - Prophylaxis of contacts with vaccine
 - Education
 - Website resource hub for public, patients, providers
 - Palm cards
 - Community vaccination
 - MAP events
 - Cluster settings
 - Routine clinics
 - Emergency department
 - Other places where care is sought

Accessible at kdhe.ks.gov/2146/Hepatitis-A-Outbreaks



Share Findings

- KDHE epidemiologists and Communications will work with affected local health departments to disseminate information related to the outbreak:
 - Kansas Health Alert Network (KS-HAN)
 - Press Releases
 - Webinars
- Outbreak related websites or dashboards



Accessible at kdhe.ks.gov/2146/Hepatitis-A-Outbreaks



Example – Shawnee County Hepatitis A Outbreak



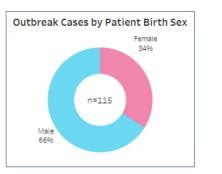
KDHE Infectious Disease Outbreak Dashboard

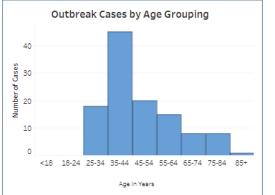
Shawnee County Hepatitis A Outbreak

The Kansas Department of Health and Environment (KDHE) and the Shawnee County Health Department (SCHD) have been working together in response to a person-to-person hepatitis A outbreak. This outbreak is not spreading because of contaminated foods, drinks, or infected food handlers. This outbreak will be considered over after 100 days (two incubation periods) from the last person's onset of symptoms. Refer to the KDHE Hepatitis A outbreak page for resources and additional information.

As of Apr. 10, 2024, a total of 115 cases have been reported and associated with the Shawnee County Hepatitis A Outbreak which began in August 2022. Case data is provisional and may change from week to week. Dashboard will be updated every Wednesday by noon.

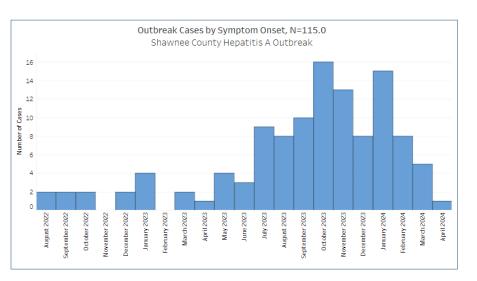
Total Outbreak Cases	Total Hospitalized	Total Deaths	Cases Reported in 2024
115	37	0	29







When a case is reported to public health, disease investigators will attempt to interview the case to identify any potential risk factors. Risk factors are self-reported and represent known factors that increase a person's likelihood of exposure to the virus. A case may report more than one risk factor.



Accessible at kdhe.ks.gov/2146/Hepatitis-A-Outbreaks



Vaccine Preventable Disease (VPD) Current Events

Measles Internationally

Global Measles Outbreaks (Aug. 2023 – Jan. 2024)

Rank	Country	Number of Cases
1	Kazakhstan	21,740
2	Azerbaijan	13,720
3	Yemen	13,676
4	India	13,220
5	Iraq	11,595
6	Ethiopia	9,042
7	Kyrgyzstan	7,601
8	Russian Federation	7,594
9	Pakistan	5,812
10	Indonesia	5,648

- Globally, cases in 2023 were up 79% from previous year.
- Concerns this will continue to grow given disruption in vaccination campaigns due to COVID-19.

Data Source: CDC. Accessible at cdc.gov/globalhealth/measles/data/global-measles-outbreaks.html

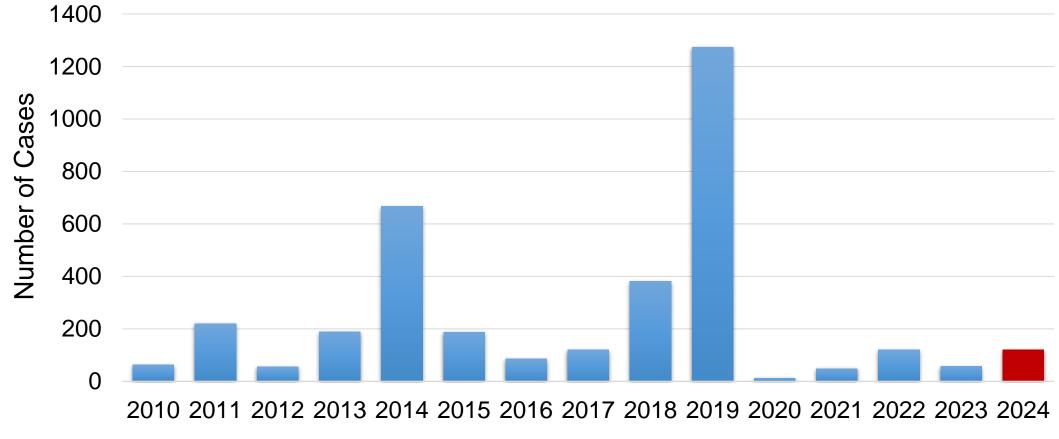


Measles Importation

- Measles has been eliminated in the U.S. since 2000
 - No continuous spread in one region or country for at least 12 months.
- Measles cases and outbreaks are a result of importation
 - When imported into a highly vaccinated population, outbreaks don't happen or are small.
- Importations into communities with low vaccination rates may result in large outbreaks; for example:
 - Rockland County, NY in 2018 and 2019
 - Minnesota in 2017
 - Kansas in 2018



Measles in the U.S. (2010-2024)



Year

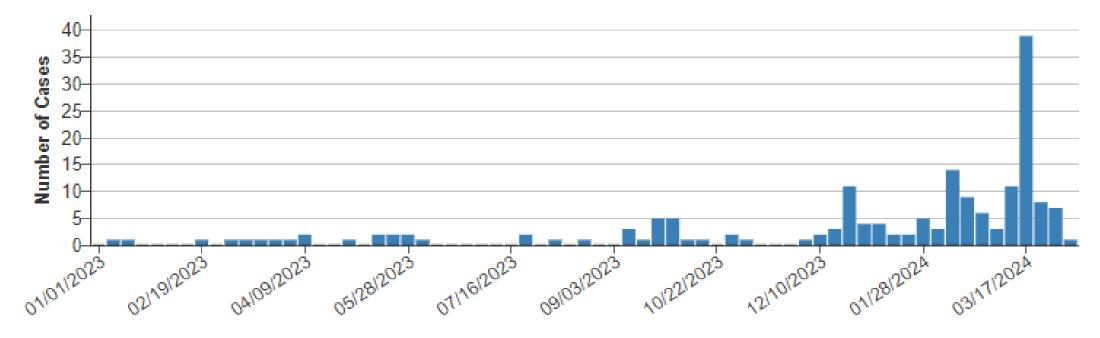
Data Source: CDC. Accessible at cdc.gov/measles/cases-outbreaks.html



Measles in the U.S.

Number of measles cases reported by week

2023-2024* (as of April 11, 2024)

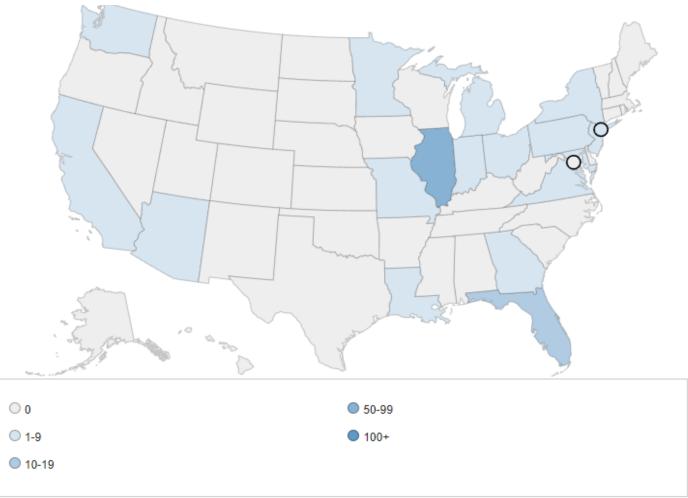


Week Start Date

Data Source: CDC. Accessible at cdc.gov/measles/cases-outbreaks.html



Measles in the U.S.

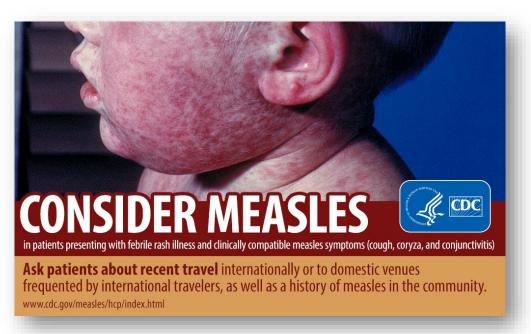


Data Source: CDC. Accessible at cdc.gov/measles/cases-outbreaks.html



Protecting your Community from Measles

- Raise awareness among providers and community members
 - Current activity
 - Symptoms
 - Where to seek care
 - Testing
- Consider high risk settings
 - International travel
 - Domestic travel
 - Daycares



For more information: cdc.gov/measles/hcp/index.html



Protecting your Community from Measles

- A person is protected if they have the following:
 - One or two documented dose/s of measles virus-containing vaccine depending on age and risk
 - Laboratory evidence of immunity (measles immunoglobulin G titer)
 - Positive test from previous infection
 - Birth before 1957
- Before traveling internationally, consider other measures:
 - Infants 6-11 months receive one dose of MMR vaccine
 - Children 12 months or older receive 2 doses of MMR vaccine
 - Teenagers and adults receive 2 doses of MMR vaccine



Invasive Serogroup Y Meningococcal Disease

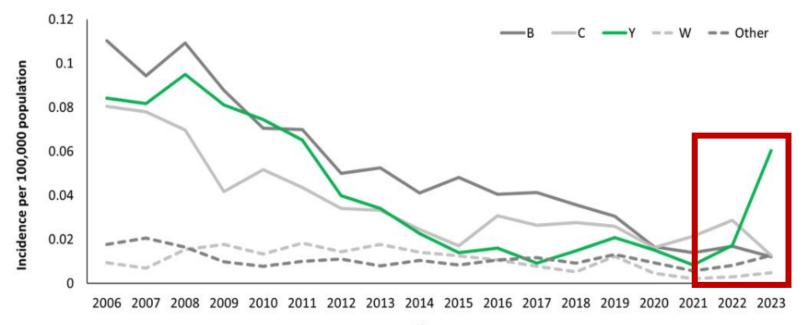
- CDC Health Alert Network issued March 28, 2024:
 - In 2023, 422 cases reported
 - Highest number reported since 2014
 - As of March 25, 2024, 143 cases reported
 - 62 cases higher than reported at this time in 2023
 - Neisseria meningitidis sequence type (ST) 1466 responsible for 68% of sequenced serogroup Y cases in 2023

Data Source: CDC. Accessible at emergency.cdc.gov/han/2024/han00505.asp



Invasive Serogroup Y Meningococcal Disease

Figure: Trends in meningococcal disease incidence per 100,000 population, by serogroup—United States, 2006–2023. Incidence of *Neisseria meningitidis* serogroup Y is shown in green. Source: National Notifiable Diseases Surveillance System, with additional serogroup data from Active Bacterial Core surveillance (ABCs) and state health departments. 2022 and 2023 data are preliminary.



Year

Data Source: CDC. Accessible at emergency.cdc.gov/han/2024/han00505.asp



Serogroup Y ST-1466 Meningococcal Disease

- ST-1466 is disproportionately affecting the following populations:
 - Adults, aged 30-60 years (65% of cases)
 - Black or African American people (63% of cases)
 - People with HIV (15% of cases)
- Majority of cases had clinical presentation other than meningitis:
 - Bacteremia or meningococcemia (64%)
 - Septic arthritis (4%)
- Current observed case fatality rate of 18%

Data Source: CDC. Accessible at emergency.cdc.gov/han/2024/han00505.asp



Serogroup Y ST-1466 Meningococcal Disease

- Recommendations for providers:
 - Maintain heightened suspicion for invasive meningococcal disease, regardless of age or demographic group
 - Be aware meningococcal infection may not present with symptoms typical of meningitis
 - Ensure persons recommended to receive meningococcal vaccine are up to date
 - Persons with HIV should receive MenACWY as follows:
 - 2-dose primary series
 - Booster dose every 3-5 years (age dependent)



Vaccines and VPD

- Increasing religious exemptions also increases the percentage of the population susceptible to VPD.
- Decreasing immunization coverage increases the risk of VPD outbreaks.
- VPD outbreaks require extensive work and support for local investigators.
- Immunization requirement enforcement starts at local level with policies promoting immunizations.





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Cynthia Snyder, M.A. and Hina Shah, MPH Kansas Health Institute



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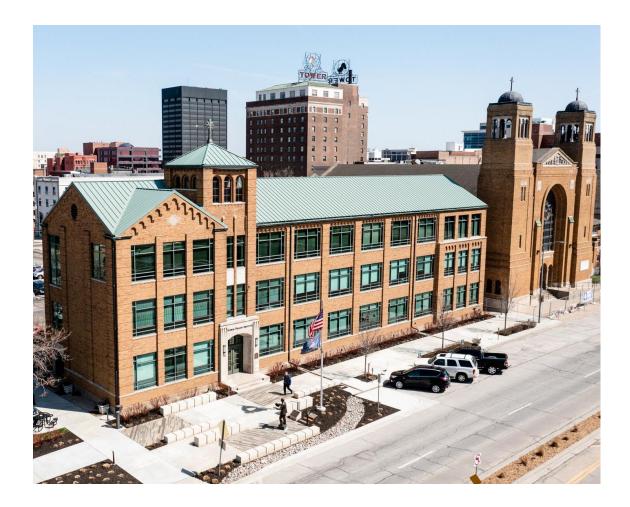


Astra ECHO®

KANSAS HEALTH INSTITUTE

Informing Policy. Improving Health.

Who We Are



- Nonprofit, nonpartisan educational organization based in Topeka.
- Established in 1995 with a multi-year grant by the Kansas Health Foundation.
- Committed to convening meaningful conversations around tough topics related to health.



Today's Agenda





- What is a public health ECHO?
- Immunizations in Kansas ECHO series





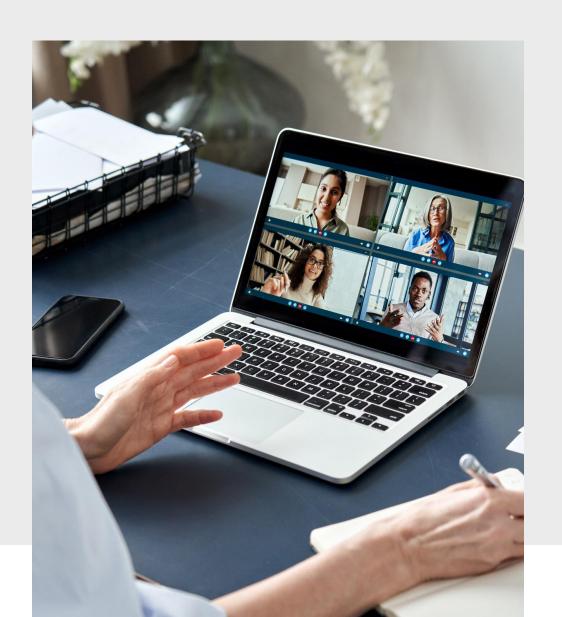
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• What is an ECHO?

Project ECHO® is an innovative "hub and spoke" model designed to create communities of learners by connecting subject matter experts with the target population. It uses multi-point video-conferencing technology, case-based learning, evidence-based and promising practices, and outcomes monitoring. KHI is an ECHO Hub, Ad Astra ECHO.



ECHO: Moving Knowledge, Not People

The ECHO Model is committed to:

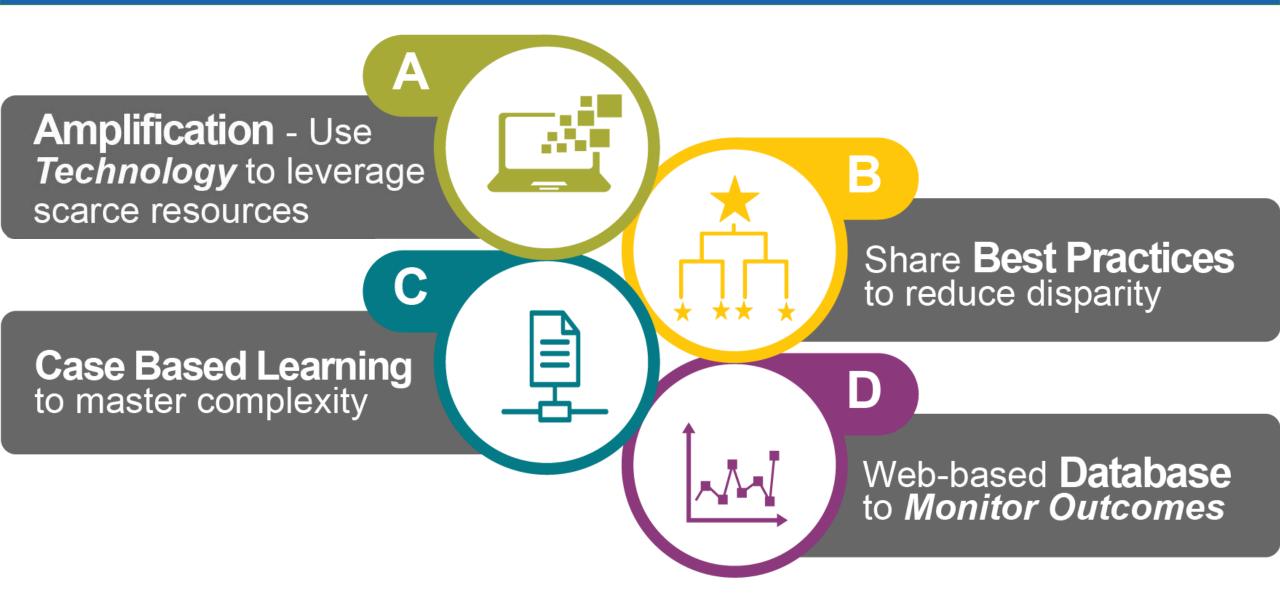
Addressing the needs of the most vulnerable populations by equipping communities with the right knowledge at the right place, at the right time.

The ECHO Model is a movement to:

- Demonopolize knowledge
- Amplify the capacity to provide best practice care for underserved people all over the world.



Project ECHO's ABCD Model





Acknowledgments













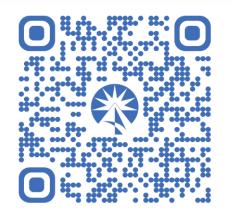




Past Sessions Available Online at khi.org

- Back-to-School Immunizations – Procedures and Policy
- Immunizations for Healthy
 Aging
- Immunizations for Maternal Health
- Access to Immunizations for Uninsured Adults







Immunizations for Adolescents and Young Adults May 3, 2024, 10-11:30 a.m.

Registration link in the chat



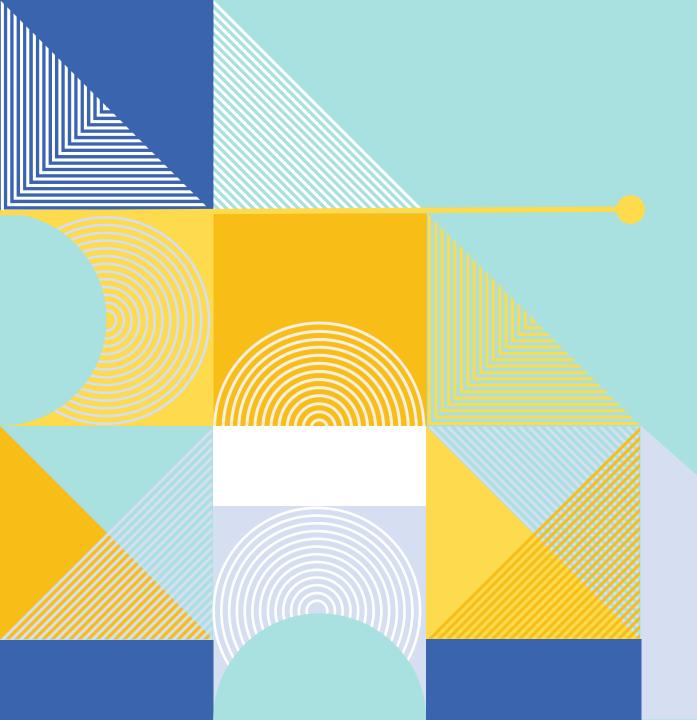




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VACCINE POLICY UPDATE

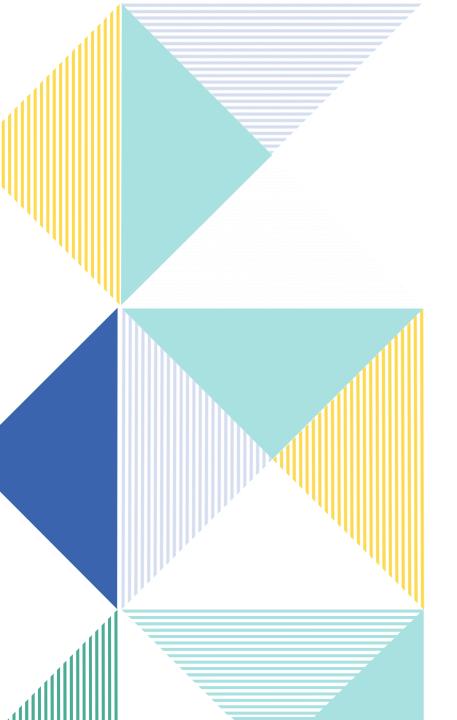
Heather Braum, MLS, IKC Policy Chair





Amanda Applegate, PharmD, BCACP Chair, Immunize Kansas Coalition Director of Practice Development, KPhA

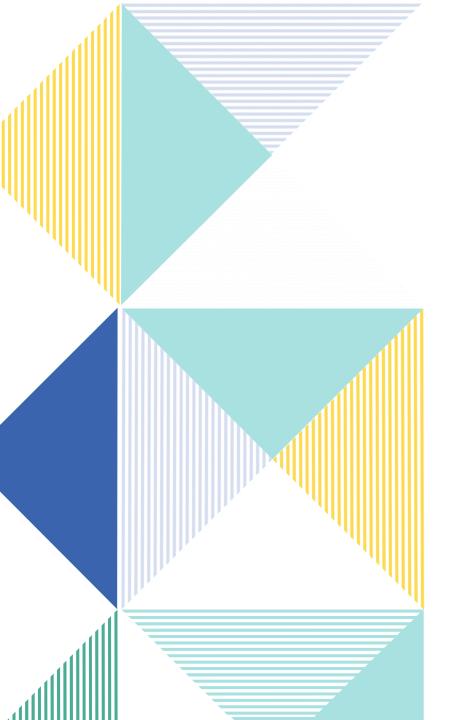




Immunization Neighborhood

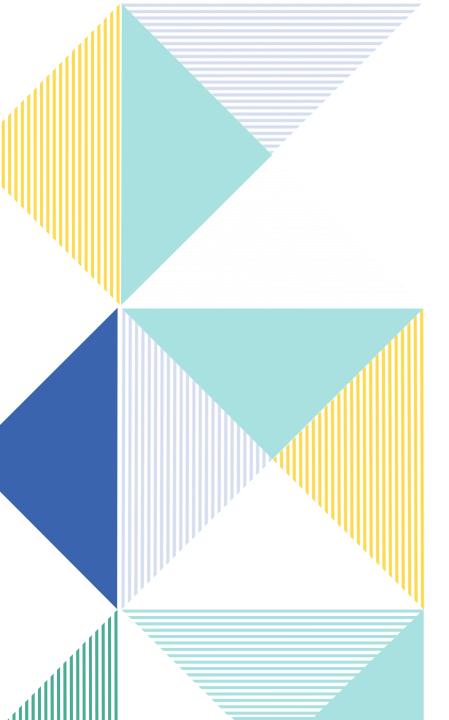
Collaboration, Coordination, & Communication

among immunization stakeholders dedicated to meeting the immunization needs of the patient and protecting the community from vaccine-preventable diseases



Immunization Neighborhood

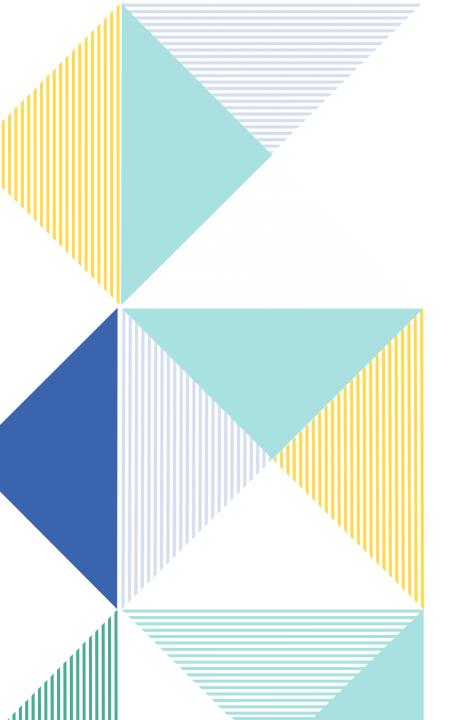




Community Immunity

Collaboration ideas

- Library + clinician book reading
- Back to school: School district + health department
- County fair: Pharmacy + health department + insurance company
- Workplace: Community health worker + pharmacy
- Flu Shot Sunday: Church + pharmacy/clinic
- Low income housing + health department



Community Immunity

How have you worked with another organization or another profession in your community to improve immunization rates?

- What went well?
- What were challenges?
- How did you communicate with each other?
- How did you reach out to the community?

Immunization Partner Highlights: Vaccine Activities and Reach

FINAL ANNOUNCEMENTS Q&A

Amanda Applegate, PharmD, BCACP IKC Chair



Reminder: Upcoming Events

Entre Mujeres

• April 28th

National Infant Immunization Week

• April 22-29th

Kansas Immunization Conference

- May 20-23rd
- IKC Dinner
 - May 21st

IKC Annual Coalition Meeting

• July 26th

National Immunization Awareness Month/Back to School Vaccines

August

IKC Coalition Meeting

• November 22nd

National Influenza Immunization Week

• Early December

IKC Advocacy Day

• Late January or early February - Stay tuned!

About	the Ir		liseases	Resources			Data Abo	ut IKC Find opportunities ne
About	the Ir							or held vir
Upcomi	ng Mee		nize Ka nd Even		Coalit		Our	Team or held vir
Today	Mar	ch 2024 -		We	ek Month	Agenda	List View	and the second second second second
Sun	Mon	Tue	Wed	Thu	Fri	Sat	Today 4	Monday, March 18 👻 🔁 Print Week Month Age
25	26 27 20 Zum From 1 ACTP Meeting		29	9 Mar 1 2		Friday, March 22		
	- 4	5	6	7		9	9:00am	Vaccination Community Navigator Training
				2pm Updati			10:00am	Access to Immunizations for Uninsured Adults - Ad Astr
10	51	11 12 13		14	15 16		Monday, I	March 25
			6pm Comm	10am Impro			1:00pm	Measles A Discussion on Risk in the U.S. and Outbreak
17	35	-19	19 20 21		22	23	Friday, Ma	arch 29
					+2 more		9:00am	Vaccination Community Navigator Training
		26	27	26	29 9am Vaccin	30	Monday, A	April 1
24					Statts And Colors		Adolescent Immunization Action Week 2024 (AIAW24)	
24	1pm Measle		-			-	Adolescen	Immunization Action Week 2024 (AIAW24)

The calendar is continuously updated with webinars and additional events.

NATIONAL INFANT IMMUNIZATION WEEK (NIIIW) APRIL 22-26TH



Join us on April 28th in Kansas City!

Register and learn more!



Entre Mujeres: The Health of Women

Sunday, April 28, 2024 12:00 - 4:00 p.m.

Memorial Hall 600 N. 7th Street **Kansas City, KS**



Featuring

- Motivational and Informative Speakers
- Food provided
- Mariachi Band Entertainment
- Local Vendors
- Raffle
- Women's Health and Cancer Prevention Education
- Free HPV vaccinations on site
- And MORE!



QUESTIONS?



IKC is hiring a Community Health Specialist: View the position and application info.



OUR MISSION: The mission of the Immunize Kansas Coalition is to protect all Kansans from vaccine-preventable diseases. **Contact your Regional Community Health Specialist**

Lucy Watie - Grant County Patricia Torres - Seward County Marixendra Alvarez- Sedgwick County Leonor Ramos - Wyandotte and Johnson Counties

Executive Director Geovannie Gone ggone@immunizekansascoalition.org 620-521-1832

www.immunizekansascoalition.org

Thank you for attending Before leaving, make sure you stop by the exhibit tables!





