Tdap Promotion Initiative for Daycares

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Metro Omaha Immunization Task Force

- Metro Omaha represents Douglas, Sarpy, Cass, Dodge and Washington counties in Nebraska and Pottawattamie County in Iowa.
- Volunteers interested in the promotion of universal vaccination across the life span
  - Public health departments
  - Public school nursing
  - NE Chapter of AAP
  - Physicians
  - MOMS
  - Universities
  - Pharmacy and Nursing
  - Major area hospitals
  - Industry partners
  - Community health centers
  - Walgreens
  - Insurance companies
- Limited resources with no financial support from either State Health Departments

Pertussis Prevalence

- In 2010
  - 27,550 cases reports
  - Many more go unreported (90%)
- According to MMWR week ending May 5, 2012
  - 8,159 provisional cases of pertusis in 2012
    - 19 cases in Nebraska
- Primary goal of pertussis outbreak control efforts is to decrease morbidity and mortality among infants
- Secondary goal is to decrease morbidity among persons of all ages

Tdap Promotion Initiative for Daycares

- The Metro Omaha Immunization Task Force identified a need to promote pertussis vaccination
- Focused limited resources to those with infant contact
- Targeted daycare facilities
  - Providers
  - Parents
  - Older siblings

Objectives of the Initiative

1. To increase awareness of the need for pertussis vaccination for individuals in close proximity to infants
2. To develop an education campaign with limited resources
3. To target a population that could benefit from educational efforts

Cocooning

- The strategy of vaccinating those in contact with high-risk populations to reduce the risk of transmissions
- Cocooning for pertussis has been recommended by ACIP since 2005
  - Likely provides indirect protection to infants
- Cocooning programs have achieved moderate postpartum coverage among mothers
  - Limited success in vaccinating fathers or other close contacts
- Programmatic challenges make implementation of cocooning programs complex and also impede program expansion and sustainability

Cocooning Recommendations

- ACIP recommends that adolescents and adults who have or anticipate having close contact with an infant aged <12 months should receive a single dose of Tdap to protect against pertussis if they have not previously received Tdap
  - Parents
  - Siblings
  - Grandparents
  - Child-care providers
  - Health-care personnel

- Ideally, these adolescents and adults should receive Tdap at least 2 weeks before beginning close contact with the infant

Child Care in Nebraska

- 4,110 licensed child care facilities in Nebraska
  - 1,521 in six counties represented by Omaha Metro ITF
- Capacity for 117,564 children across Nebraska
  - 59,126 in six counties represented
- 217,087 families in Nebraska with children
  - 110,466 children < 6 yo potentially needing child care
- 43% of requests for child care are infant/toddlers
- 5,450 child care workers
  - Average annual income $18,470

Medical Requirements for Licensing

Child Medical Requirements

- Age-appropriate immunizations are required, including hepatitis B
- Screening for blood lead levels is not required
- Must have parental permission to administer medications

Staff Medical Requirements

- Medical exam is required
- TB test is not required
- AIDS test is not required
- No immunizations requirements
- Drug and alcohol tests are not required

Exempt from Licensing

- Care provided in the child's home or by relatives
- Facilities providing irregular child care
- Care provided without cost or compensation
- Care for fewer than four children
- Care under federal or Native American jurisdiction

Child Care

- Important settings for transmission of a wide-range of infectious diseases in the community
- Immunizations of children attending group child care has been identified as an important means of reducing risk of specific diseases in this setting
- The size and vulnerability of this workforce are a potential problem for public health
- Outbreaks of pertussis may occur due to the waning of vaccine-induced immunity or due to under- or unimmunized persons

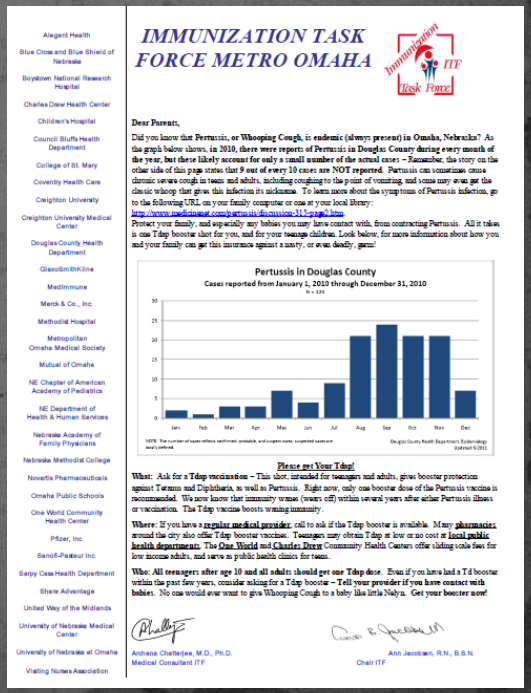
Description of Initiative

- The Task Force assembled packets for daycares

- Packets contained
  - Brief informational letters
    - Dear Day Care Provider
    - Dear Parent or Guardian
  - Unprotected person story
  - Informational brochures
  - Survey postcard

Dear Day Care Provider or Parent/Guardian

- Description of pertussis and introduction to prevalence
- Encouraging parents, guardians and staff to talk to healthcare provider about Tdap vaccine for themselves, teenagers and any other adults in their extended family – protect families and babies
- Prevalence graph
- Who, What and Where for Tdap
  - Pharmacies
  - Public health departments
  - Community health centers



Alegent Health
Blue Cross and Blue Shield of Nebraska
Boystown National Research Hospital
Charles Drew Health Center
Children's Hospital
Council Bluffs Health Department
College of St. Mary
Coventry Health Care
Creighton University
Creighton University Medical Center
Douglas County Health Department
GlaxoSmithKline
MedImmune
Merck & Co., Inc.
Methodist Hospital
Metropolitan Omaha Medical Society
Mutual of Omaha
NE Chapter of American Academy of Pediatrics
NE Department of Health & Human Services
Nebraska Academy of Family Physicians
Nebraska Methodist College
Novartis Pharmaceuticals
Omaha Public Schools
One World Community Health Center
Pfizer, Inc.
Sanofi-Pasteur Inc.
Sarpy Cass Health Department
Share Advantage
United Way of the Midlands
University of Nebraska Medical Center
University of Nebraska at Omaha
Visiting Nurses Association

IMMUNIZATION TASK FORCE METRO OMAHA

Dear Parent,

Did you know that Pertussis, or Whooping Cough, is endemic (always present) in Omaha, Nebraska? As the graph below shows, in 2010, there were reports of Pertussis in Douglas County during every month of the year, but these likely account for only a small number of the actual cases – Remember, the story on the other side of this page states that 9 out of every 10 cases are NOT reported. Pertussis can sometimes cause chronic severe cough in teens and adults, including coughing to the point of vomiting, and some may even get the classic whoop that gives this infection its nickname. To learn more about the symptoms of Pertussis infection, go to the following URL on your family computer or one at your local library:
http://www.medicinenet.com/pertussis/discussion-315-page2.htm.
Protect your family, and especially any babies you may have contact with, from contracting Pertussis. All it takes is one Tdap booster shot for you, and for your teenage children. Look below, for more information about how you and your family can get this insurance against a nasty, or even deadly, germ!

Please get Your Tdap!

What: Ask for a **Tdap vaccination** – This shot, intended for teenagers and adults, gives booster protection against Tetanus and Diphtheria, as well as Pertussis. Right now, only one booster dose of the Pertussis vaccine is recommended. We now know that immunity wanes (wears off) within several years after either Pertussis illness or vaccination. The Tdap vaccine boosts waning immunity.

Where: If you have a **regular medical provider**, call to ask if the Tdap booster is available. Many **pharmacies** around the city also offer Tdap booster vaccines. Teenagers may obtain Tdap at low or no cost at **local public health departments**. The **One World** and **Charles Drew** Community Health Centers offer sliding scale fees for low income adults, and serve as public health clinics for teens.

Who: All teenagers after age 10 and all adults should get one Tdap dose. Even if you have had a Td booster within the past few years, consider asking for a Tdap booster – Tell your provider if you have contact with babies. No one would ever want to give Whooping Cough to a baby like little Nalyn. Get your booster now!

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Ann Jacobsen, R.N., B.S.N.
Chair ITF

Dear Provider or Parent Backside

- Unprotected story of NelynBaker
- Mother contracted pertussis two weeks before birth
- Nelyn died at just 18 days old
- More information about pertussis
  - What it is
  - How it is contracted
  - Statistics on prevalence
  - Vaccine information

Pertussis [Whooping Cough]

"Lynne Baker suspects she contracted pertussis [Whooping Cough] from a coughing customer in a bookstore about two weeks before giving birth to her son Nelyn on April 7, 2004."She coughed all through labor," her husband reports. "Overnight, it got worse and worse."

Still, when Lynne and Nelyn left the hospital, Lynne's cough had not been attended to. Twelve days after Nelyn's birth, on her second visit to her family physician, Lynne received antibiotics. Four days later, Nelyn began coughing and was hospitalized the following day. **The next morning, April 25, he died.** It wasn't until May 3, when the Bakers returned from burying some of Nelyn's ashes in Michigan, that they learned the cause of death. **The results of bacterial cultures started during his hospitalization indicated Nelyn had died from Whooping Cough.**

....Studies indicate pertussis accounts for approximately 20-30 percent of instances of coughs lasting more than two weeks in adults and adolescents, and that

adults are often found to be the first case in a family would have been treated with antibiotics at once. Nelyn might now be alive household with multiple pertussis cases. This seems to have been what happened in the Baker household: Lynne believes she not only passed the disease to her newborn son but spread it to her two teenage children, her mother, and several members of her extended family in Michigan

.....During 1997-2000, 63 percent of infants under six months of age diagnosed with pertussis required hospitalization, and infants this age accounted for 90 percent of pertussis deaths.....Had pertussis been suspected as the cause of Lynne's persistent cough during labor and the weeks following, it's likely she and her immediate

....Vaccine Providers have new adolescent and adult vaccines that can indirectly protect infants from pertussis. ....A one-time dose of Tdap vaccine is now recommended for all persons between 10-11 and 64 years of age.

Nelyn died April 25 [2004]. He was 18 days old. Because of his death, the Bakers have become crusaders. They are driven to tell others about his brief life and quick illness, hoping that no other parents will be taken by surprise.....**Nelyn Baker died of whooping cough.** "I never," said Lynne, "never, never, never want this to happen to another child."

All eight children in [Lynn's extended family] had been vaccinated in childhood, and each had their own children vaccinated in turn. But they were not protected. Pertussis has a little-known trick. **Immunity to the disease--from vaccination or infection--does not last** [like Tetanus, immunity wanes with time]. A child who has had a full series of shots is protected roughly until puberty. But **infants too young to be vaccinated, toddlers with one or two shots, and teenagers and adults are all undefended.**

In teens and adults, the disease can be a mild illness -- No doctor's visit means no lab test, no formal diagnosis, and no notification to authorities. As a result, even though every state requires pertussis to be reported, the CDC estimates that **nine-tenths of cases go unrecognized.** Absent strong symptoms or a confirmatory test, patients have no idea what they may be carrying and spreading. The Bakers' friends, co-workers, and extended family in four states -- Georgia, Michigan, Pennsylvania, and Texas -- were at risk of developing the disease and passing it on. The young children were protected by their immunizations, but at least seven of the teens and adults fell ill.

The Bakers have no way of knowing how the disease entered their family, or who infected whom. Lynne thinks she gave the disease to her sisters when they came to celebrate the birth; she suspects they passed it to their mother in Michigan and that it spread among her family at the wake. She is sure she gave it to her children, including her newborn son.... "I don't blame myself," she said. "Someone gave it to me. **But I am haunted by how many people we may have given it to before we realized what was going on.**"

....Adapted from Unprotected People Story #76 from the Immunization Action Coalition, St. Paul, MN 6/23/05

Description of Initiative

- Sent to all licensed daycares throughout the six Nebraska/Iowa counties represented
  - Contact information obtained from DHHS
- Mailed to 1,516 facilities
  - 9 were returned as unable to deliver
- Survey response postcard
  - Ability to request additional Tdap informational packets for an unlimited number of families
  - *Also given permission to freely copy provided materials

Postcard Survey

Please return this post card by **10/1/11**, even if you do not want materials

1. How many families are in your daycare? Total _____
   - Have a child less than 1 year old _____
   - Expecting a new baby _____
2. How many families in your daycare have teens in their household?____
3. How many parent packets do you want us to send you for your families?___
4. Do you - □ Encourage □ Require □ Have not addressed
   - The recommended **Tdap vaccine** for you and your staff
5. Will you - □ Encourage □ Require □ Won't address
   - The recommended **Tdap vaccine** for you and your staff

Funding

- A volunteer Task Force member arranged for assembly of the packets in a local sheltered workshop, and mailed packets to the daycares
  - The ITF made a donation to the workshop in appreciation of their work
- The Tdap campaign was also supported by an area organization that helped contribute to copying, printing and mailing costs of packets
- The Task Force industry partners assisted by providing educational pamphlets included in the mailing

Budget

- Printing Costs for Tdap and Backpack Campaigns
  - $1,613.80
- Envelopes for Tdap Campaign
  - $179.80
- Postage expense for Tdap Campaign
  - $825.65
- Gift to sheltered workshop
  - $250.00

Postcard Survey Results

- Survey postcards returned by 64 daycare facilities
  - Collectively serve 1479 families
  - 489 had children younger than one, teenagers and/or an expectant mother
- In response to the informational packets
  - 74% indicated they would encourage Tdap vaccine for staff
  - 17% indicated they will require Tdap vaccination of staff
  - 3% will not address Tdap vaccine with staff
  - 6% did not respond
- Additional 1200 parent information packets requested

Postcard Survey Results

1. How many families are in your daycare? Total **1479**
   - Have a child less than 1 year old **215**
   - Expecting a new baby **72**
2. How many families in your daycare have teens in their household? **202**
3. How many parent packets do you want us to send you for your families? **1200**
4. Do you - **37** Encourage **10** Require **12** Have not addressed **5** NR
   - The recommended **Tdap vaccine** for you and your staff
5. Will you - **47** Encourage **11** Require **2** Won't address **4** NR
   - The recommended **Tdap vaccine** for you and your staff

Outcomes

- A large scale campaign can be successful when people are committed to the cause and the work load is shared by many
- This was an effective educational campaign to increase Tdap vaccine awareness and promotion for individuals in close proximity to infants
- This campaign was successful because of the dedication of Task Force members, the local community, and pharmaceutical industry partners.

Future Directions

- Sent packets to daycares again in 2012
- Possibilities of getting vaccine to the facilities
  - AmeriCares® G.I.F.T. Program – 200 doses to underserved daycare providers
- Increase education of child care providers
  - Midwest Child Care Association
- Various health fair events for child care providers and new parents

References

- Centers for Disease Control and Prevention
  - www.cdc.gov
- Immunization Action Coalition
  - www.immunize.org
- Nebraska Department of Health and Human Services
  - http://dhhs.ne.gov/publichealth/Pages/crl_childcare_ccc_ccc.aspx
- Morbidity and Mortality Weekly Report
  - http://www.cdc.gov/mmwr/PDF/wk/mm6118md.pdf

Questions

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