

Immunization Works November 2020

November 24, 2020: Content on this page kept for historical reasons.



Top Stories

New COVID-19 Vaccine Web Pages: CDC has added [vaccine-specific content](#) to its extensive COVID-19 website. CDC's new resources include information on vaccination planning and vaccine safety, as well as frequently asked questions. These resources are intended to build trust and confidence in future COVID-19 vaccines by clarifying how COVID-19 vaccine recommendations will be made and how the vaccines will be monitored for safety.

Look for frequent updates to this website and [CDC's Vaccines and Immunization website](#) as more information becomes available and as vaccines are authorized or approved and recommended for use in the United States. CDC is committed to ensuring jurisdictions and federal entities that will be receiving vaccine have the information and guidance needed to implement an effective COVID-19 vaccination program.

COVID-19 Vaccine Training: General Overview of Immunization Best Practices for Health Care Professionals: CDC has created a new, [web-on-demand, self-paced module](#) for health care providers who will be administering COVID-19 vaccine. This module provides health care providers with information about COVID-19 vaccine Emergency Use Authorization and safety, as well as general information about vaccine storage, handling, administration, and reporting. Continuing education will not be available for this module but there will be a certificate of completion available. Please visit the COVID-19 [Vaccination Resources page](#) for additional information.

HHS Video "Tell Me More About Vaccines": HHS recently released a video entitled "Tell Me More About Vaccines" to help answer commonly asked questions about the COVID-19 vaccine. The video shares why vaccines are so important and provides expert commentary and graphic illustration to help viewers understand the science of vaccine development. Tune in to hear from various experts, including Dr. Anthony Fauci (NIH), Dr. Stephen Hahn (FDA), and Dr. Robert Kadlec (ASPR), on the steps researchers and scientists are taking to develop a safe and effective vaccine. You are encouraged to add the [video link](#) to your website or promote it on social media.

Childhood Vaccination Coverage: The COVID-19 pandemic that has disrupted our lives so much this year also severely impacted delivery of ambulatory medical services, especially in the spring. We saw dramatic drops in provider ordering of public-sector childhood vaccines beginning in mid-March. Since then, as well-child visits have resumed, ordering has increased, but there still remains a substantial deficit compared with last year. That shortfall represents about 9 million doses, including almost a million doses of measles-containing vaccine (either MMR or MMRV) and more than a million doses of HPV vaccine. Claims data suggest that recovery has been faster on the private-sector side, highlighting the need for additional focus on populations eligible for the Vaccines for Children program.

We know that if children don't get caught up on vaccine doses they missed earlier this year, they will be left vulnerable to diseases that otherwise could have been prevented. There is an urgent need to work together to get children back into their healthcare providers' offices for well-child visits and vaccinations that were missed earlier this year. CDC recently published [vaccination coverage data from our 2019 National Immunization Survey](#). If we don't act now, we can expect childhood vaccination coverage in 2020 to be much lower than our report for last year.

Health care systems and health care providers can:

- Identify families whose children have missed doses and contact them to schedule appointments.
- Prompt clinicians when these children are seen to deliver vaccines that are due or overdue.

- Let families know what precautions are in place for safe delivery of in-person services.
- Encourage members to identify and follow up with families whose children have missed doses to get appointments scheduled.

State government agencies can:

- Send reminders to families about school immunization requirements.
- Implement follow-up for children who are not in compliance with requirements to encourage compliance.
- Use the state immunization information system's reminder-recall capacity to notify families whose children have fallen behind on vaccinations.

We all can:

- Communicate directly to families the importance of well-child visits and getting caught up on any recommended vaccines that were missed.

Updates to the Interim Guidance for Routine and Influenza Immunization Services During the COVID-19 Pandemic: CDC recently added a new section to the web page [Interim Guidance for Immunization Services During the COVID-19 Pandemic](#) . The section, entitled, "Additional Considerations for Influenza Vaccination of Persons in Healthcare Facilities and Congregate Settings During the COVID-19 Pandemic," provides recommendations specific for individuals living in supportive/congregate settings (such as long-term care facilities, group homes, and shelters). General measures for COVID-19 infection prevention and control are discussed, along with vaccination recommendations for patients who have come in close contact with an individual with COVID-19, patients with asymptomatic or presymptomatic COVID-19, and patients with symptomatic COVID-19.

Updates were also made related to vaccinating persons with suspected or confirmed COVID-19 or in quarantine because of COVID-19 exposure. The section, "Deferring Routine Vaccination Visits for Persons with Suspected or Confirmed COVID-19 who are in Isolation or Persons with a Known COVID-19 Exposure who are in Quarantine," recommends postponing all vaccination visits for these individuals:

1. Asymptomatic and presymptomatic persons who have tested positive: 10 days from a positive test result
2. Symptomatic persons: Met criteria to discontinue isolation; 10 days after symptom onset, 24 hours with no fever without the use of fever-reducing medications, and COVID-19 symptoms improving; and no longer moderately to severely ill
3. Persons exposed to a person with COVID-19: After 14-day quarantine period has ended

See the section for additional guidance.

Other specific topics covered are considerations for routine vaccination, advice for vaccination of people with suspected or confirmed COVID-19, infection prevention practices, personal protective equipment (PPE), and strategies for promoting catch-up vaccinations. This guidance will be updated as the COVID-19 pandemic evolves. We encourage you to share this guidance widely.

Mass Vaccination Clinic Guidance: CDC has issued revised [Guidance for Planning Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations](#) to assist with jurisdictional planning and implementation of satellite, temporary, or off-site vaccination clinics by public and private vaccination organizations.

The guidance is broken down into four categories:

- [Planning activities](#)
- [Pre-clinic activities](#)
- [During the clinic activities](#)
- [Post-clinic activities](#)

The guidance also provides information on additional considerations required during the COVID-19 pandemic, including physical distancing, personal protective equipment (PPE), and enhanced sanitation efforts.

Influenza

There's No Time for Flu: In collaboration with the American Medical Association and the Ad Council, CDC launched a [flu vaccination educational campaign](#) called "No One Has Time for Flu." The campaign features TV, radio, and digital ads aiming to increase flu vaccination coverage with emphasis on [non-Hispanic Black and Hispanic/Latino groups](#), who are at higher risk of serious flu complications, but are less likely to be vaccinated.

Flu Vaccination is an Important Prevention Tool for People with Heart Disease: A new [CDC expert commentary](#) emphasizes the importance of annual flu vaccination, especially for people with heart disease. Flu illness is associated with an increase in heart attacks, even in people with no history of heart conditions. Flu vaccination is the best prevention against flu and has been associated with lower rates of some cardiac events among people with heart disease.

Workers in Long-Term Care Facilities Need a Flu Vaccine: CDC has a [Post-Acute and Long-Term Care Facility Toolkit](#) to help owners and administrators improve flu vaccination coverage among their health care personnel. The toolkit includes strategies to increase and tools to monitor flu vaccination coverage among staff throughout the flu season.

National Influenza Vaccination Week (NIVW): NIVW, which will be observed December 6–12, 2020, highlights the importance of continuing flu vaccination through the holiday season and beyond. Help promote vaccination throughout flu season by sharing [NIVW resources](#), including our digital toolkit, social media messages, communication resources, widgets, and more.

Influenza Update Video: The recommendation for annual influenza vaccination means that health care professionals should remain up to date in their knowledge of influenza vaccination practices. An [updated CDC video](#) briefly addresses the special importance of flu vaccination during the COVID-19 pandemic, frequently asked questions about influenza vaccine storage and handling, administration recommendations, and best practices for the 2020–21 influenza season.

You Call the Shots Modules: *You Call the Shots* is a series of interactive, web-based training courses developed through the Project to Enhance Immunization Content in Nursing Education and Training. These courses are ideal for medical or nursing students, new vaccination providers, or seasoned health care providers seeking a review. The [Influenza](#) module has recently been updated. Please visit the [You Call the Shots web page](#) to view all the modules. Continuing Education (CE) is available for viewing a module and completing an evaluation.

Flu Vaccination Campaign Toolkit: Please visit [Getmyflushot.org](https://getmyflushot.org) [🔗](#) to find everything you need to help extend the reach of this important campaign. Included are campaign PSAs and helpful tips on engaging media and other partners in your community. Please encourage all Americans to get a flu shot to protect themselves and those around them. To help get the word out on social media, we've provided social media messages and graphics that you can share across Facebook, Instagram, and Twitter.

Morbidity and Mortality Weekly Report (MMWR)

The Advisory Committee on Immunization Practices' Ethical Principles for Allocating Initial Supplies of COVID-19 Vaccine in the U.S., 2020: COVID-19 vaccines are essential to reduce the spread of SARS-CoV-2, the virus that causes COVID-19 and its associated impacts on health and society. The federal government is working to produce and deliver safe and effective COVID-19 vaccines for the entire U.S. population. The Advisory Committee on Immunization Practices (ACIP) has broadly outlined its approach for developing recommendations for the use of each COVID-19 vaccine authorized or approved by the Food and Drug Administration (FDA) for Emergency Use Authorization or licensure. ACIP's recommendation process includes an explicit and transparent evidence-based method for assessing a vaccine's safety and efficacy as well as consideration of other factors, including implementation. Because the initial supply of vaccine will likely be limited, ACIP will also recommend which groups should receive the earliest vaccine allocations. The ACIP COVID-19 Vaccines Work Group and consultants with expertise in ethics and health equity considered external expert committee reports and published literature and deliberated the ethical issues associated with COVID-19 vaccine allocation decisions. The purpose of this report is to describe the four ethical principles that will assist ACIP in formulating recommendations for the allocation of COVID-19 vaccine while supply is limited, in addition to scientific data and implementation feasibility: 1) maximize benefits and minimize harms; 2) promote justice; 3) mitigate health inequities; and 4) promote transparency. These principles can also aid state, tribal, local, and territorial public health authorities as they develop vaccine implementation strategies within their own communities based on ACIP recommendations.

The ACIP COVID-19 Vaccines Work Group met several times per month (approximately 25 meetings) since its establishment in April 2020. Work group discussions included review of COVID-19 epidemiology and consultation with experts in ethics and health equity to inform the development of an ethically principled decision-making process. The work group reviewed the relevant literature, including frameworks for pandemic influenza planning and COVID-19 vaccine allocation, summarized this information, and presented it to ACIP. ACIP supported the four fundamental ethical principles listed above to guide COVID-19 vaccine allocation decisions in the setting of a constrained supply. Essential questions that derive from these principles can assist in vaccine allocation planning. Read the [November 23 MMWR](#) for the full report.

Routine Vaccination Coverage—Worldwide, 2019: Endorsed by the World Health Assembly (WHA) in 2020, the Immunization Agenda 2030 strives to reduce morbidity and mortality from vaccine-preventable diseases across the life course. The [November 13 MMWR](#), which updates previous reports, presents global, regional, and national vaccination coverage estimates and trends as of 2019. It also describes the number of surviving infants who did not receive the first dose of diphtheria and tetanus toxoids and pertussis-containing vaccine (DTP1) during the first year of life (i.e., zero-dose children), which serves as a proxy for children with poor access to immunization and other health services. Global estimates of coverage with the third dose of DTP (DTP3), the first dose of measles-containing vaccine (MCV1), and the third dose of polio vaccine (Pol3) ranged from 84% to 86% during 2010–2019. Worldwide, 19.7 million children (15%) were not vaccinated with DTP3 in 2019, 13.8 million (70%) of whom were zero-dose children. During 2010–2019, the number of zero-dose children increased in the African, Americas, and Western Pacific regions. Global coverage with the second MCV dose (MCV2) increased from 42% in 2010 to 71% in 2019. During 2010–2019, global coverage with underused vaccines increased for the completed series of rotavirus vaccine (rota), pneumococcal conjugate vaccine (PCV), rubella-containing vaccine (RCV), *Haemophilus influenzae* type b vaccine (Hib), hepatitis B vaccine (HepB), and human papillomavirus vaccine (HPV). Achieving universal coverage with all recommended vaccines will require tailored, context-specific strategies to reach communities with substantial proportions of zero-dose and incompletely vaccinated children, particularly those in remote rural, urban poor, and conflict-affected communities.

Progress Toward Regional Measles Elimination—Worldwide, 2000–2019: In 2010, the World Health Assembly set the following three milestones for measles control to be achieved by 2015: 1) increase routine coverage with the first dose of measles-containing vaccine (MCV1) among children age 1 year to $\geq 90\%$ at the national level and to $\geq 80\%$ in every district, 2) reduce global annual measles incidence to < 5 cases per 1 million population, and 3) reduce global measles mortality by 95% from the 2000 estimate. In 2012, WHA endorsed the Global Vaccine Action Plan, with the objective of eliminating measles in five of the six World Health Organization (WHO) regions by 2020. The [November 13 MMWR](#) describes progress toward WHA milestones and regional measles elimination during 2000–2019 and updates a previous report. During 2000–2010, estimated MCV1 coverage increased globally from 72% to 84% but has since plateaued at 84%–85%. All countries conducted measles surveillance; however, approximately half did not achieve the sensitivity indicator target of two or more discarded measles and rubella cases per 100,000 population. Annual reported measles incidence decreased 88%, from 145 to 18 cases per 1 million population during 2000–2016; the lowest incidence occurred in 2016 but, by 2019, incidence had risen to 120 cases per 1 million population. During 2000–2019, the annual number of estimated measles deaths decreased 62%, from 539,000 to 207,500; an estimated 25.5 million measles deaths were averted. To drive progress toward the regional measles elimination targets, additional strategies are needed to help countries reach all children with 2 doses of measles-containing vaccine, identify and close immunity gaps, and improve surveillance.

[Top of Page](#)

Resources and Information

Vaccine Storage and Handling Toolkit: The [Vaccine Storage and Handling Toolkit](#) is a comprehensive guide that describes best practices for vaccine storage and handling from ACIP recommendations, product information from vaccine manufacturers, and scientific studies.

The toolkit has been updated for 2020 to clarify language including:

- Beyond use date (BUD)
- Routine maintenance for vaccine storage units
- New definition added to the glossary

The toolkit also contains a COVID-19 Vaccine Storage and Handling Addendum with information on storage and handling best practices for COVID-19 vaccines. This addendum will be updated with specific storage and handling information for each COVID-19 vaccine product.

“Keys to Storing and Handling Your Vaccine Supply” Video: Two of the most important safeguards for the nation’s vaccine supply are proper vaccine storage and handling. An updated [web-on-demand video](#), titled “Keys to Storing and Handling Your Vaccine Supply,” is designed to decrease vaccine storage and handling errors by demonstrating recommended best practices and addressing frequently asked questions. Continuing Education (CE) is available.

Epidemiology and Prevention of Vaccine-Preventable Diseases (the Pink Book) 2020 Video Series: CDC is offering a series of weekly, one-hour, web-on-demand videos that provide an overview of vaccination principles, general best practices, immunization strategies, and specific information about vaccine-preventable diseases and the vaccines that prevent them. Each video will include updated information from recent Advisory Committee on Immunization Practices (ACIP) meetings and votes. The series started July 1, 2020, and ended October 14, 2020. This year, because of limited staff availability during the ongoing COVID-19 response, the videos were prerecorded rather than live webinars. Visit the [Pink Book video series web page](#) for the videos and additional information. Continuing Education (CE) is available for each video.

Vaccine Administration e-Learn: An [e-Learn on vaccine administration](#) is now available. Proper vaccine administration is critical for ensuring that vaccines are both safe and effective. Vaccine administration errors happen more often than you might think. Of the average 36,000 reports received annually by the [Vaccine Adverse Event Reporting System \(VAERS\)](#) [↗](#), about 1,500 are directly related to administration error. Some of the most common vaccine administration errors include:

- Not following the recommended immunization schedule
- Administering improperly stored or expired vaccine and/or diluent
- Administering the wrong vaccine—confusing look-alike or sound-alike vaccines such as DTaP/Tdap or administering products outside age indications

The e-Learn is a free, interactive, online educational program that serves as a useful introductory course or a great refresher on vaccine administration. The self-paced e-Learn provides comprehensive training, using videos, job aids, and other resources to accommodate a variety of learning styles. A certificate of completion and/or Continuing Education (CE) is available for those that complete the training.

Current Issues in Immunization Webinars (CIIW): The latest webinar on October 21, 2020, offered an update on the recommendations for the 2020–21 influenza season. The webinars, held several times during the year, are designed to provide clinicians with the most up-to-date information on immunization. The webinars are live, one-hour events combining an **online visual presentation** with **simultaneous audio** via telephone conference call, along with a live **question-and-answer** session. Registration, Internet access, and a separate phone line are needed to participate. The latest webinar, archived webinars, and additional information are available on the [CIIW web page](#).

Vaccines for Children (VFC) Fact Sheet for Providers: CDC has posted a new [VFC fact sheet](#) [📄](#) for health care providers. This accompanies the updated VFC fact sheet for parents that was recently posted in [English](#) [📄](#) and [Spanish](#) [📄](#).

Redesigned HPV Vaccine Website for Health Care Professionals: As part of its effort to optimize digital content for use on multiple devices, CDC has redesigned the [HPV vaccine website for health care professionals](#). The website includes HPV cancer statistics, continuing education resources, tips for answering parents’ questions, and more. It also features a new page on HPV vaccine safety and effectiveness data, which outlines the key data that health care professionals need to know as they address questions from parents. Please share this new resource with colleagues or members of your health care professional association.

Updated Infographic: HPV is the Best Protection Against 6 Types of Cancer: CDC has updated its “HPV iceberg” infographic to include the latest data about HPV cancers. [Share it](#) on social media or [download](#) [📄](#) and print it to post in provider offices.

CDC and Medscape: This special [series of commentaries](#) [↗](#), part of a collaboration between CDC and Medscape, is designed to deliver CDC’s authoritative guidance directly to Medscape’s physicians, nurses, pharmacists, and other health care providers. In this series, CDC experts offer video commentaries on current topics important to practicing clinicians. NCIRD has contributed to a variety of commentaries. You will need to sign up and log in as a member to view the commentaries and registration is free.

Immunization Resources: Various publications are available for ordering at [CDC-INFO On Demand](#). You can search for immunization publications by using the “Programs” drop-down menu and selecting “Immunization and Vaccines,” or you can search by “Title.”

CDC Job Openings: CDC is committed to recruiting and hiring qualified candidates for a wide range of immunization and other positions. Researchers, medical officers, epidemiologists, and other specialists are often needed to fill positions within CDC. For a current listing, including international opportunities, please visit [CDC’s employment web page](#).

[Top of Page](#)

Calendar of Events

[ACIP Meeting](#), February 24–25, 2021, Atlanta, GA

[Vaccine Summit Ohio](#) [↗](#), March 1–3, 2021, Columbus, OH

[Massachusetts Adult Immunization Conference](#) [↗](#), April 13, 2021, Framingham, MA

[North Dakota Immunization Conference](#) [↗](#), June 22–23, 2021, Bismarck, ND

[ACIP Meeting](#), June 23–24, 2021, Atlanta, GA

[ACIP Meeting](#), October 20–21, 2021, Atlanta, GA

[NCIRD Calendar of Events](#)

[Immunization Action Coalition \(IAC\) Calendar](#) [↗](#)

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[Top of Page](#)

Page last reviewed: November 24, 2020