

SOUTH CAROLINA CHAPTER OF THE AMERICAN ACADEMY OF PEDIATRICS' NEWSLETTER FEBRUARY 2021

PRESIDENT'S MESSAGE – Robert Saul, MD, FAAP

As promised in an email last month, the newsletter from the SCAAP will be sent monthly with a short lead article and then links to communications that are sent to the Executive Director or Executive Committee over the previous month. We want to keep open the lines of communication without flooding your inboxes. We had an excellent first Board meeting back in January and hope to communicate the action items from that meeting in an upcoming newsletter. Please do not hesitate to use the valuable resource of the website (www.scaap.org) as needed or reach to me (robertsaul@me.com) with questions. Please help us recruit new members and/or bring former members back into the fold. Membership is our lifeblood!

SCAAP Advocacy Action Network

The SCAAP is excited to introduce the SCAAP Advocacy Action Network. Modeled after the AAP's Federal Advocacy Action Network, the SCAAP Advocacy Action Network will allow you to engage your state legislators with ease in a manner that best suits your needs—all while ensuring we have a unified pediatric voice speaking for our children and their families. With your support and engagement, we aim to enhance our advocacy work to improve the health of all children in our state.

The Advocacy Action Network allows for multichannel action (e-mail, phone call, Twitter, Facebook, in-person meeting, letter to the editor/op-eds, testifying, etc.), supports numerous initiatives simultaneously, notifies users when bills of interest are introduced, and supplies voter engagement information, to name a few features. Follow the link to contact your legislators about our current Advocacy Action Items (www.scaap.org/advocacy):

- Support Local Tobacco Control Policies (Bills [S. 498/H. 3681](#))
- Support Higher Education and Professional Licensure for DACA Recipients (Bills [S. 24/H. 3243](#))

We welcome any feedback and requests for new Advocacy Action Items can be submitted via this online form: <https://forms.gle/Q99oTwhagdqzVoa89>.

BabyNet Upgrade

Jennifer Buster from SCDHHS met with the Pediatric Advisory Committee at one of our past meetings to discuss BabyNet referrals. As a result of your feedback, changes made to the professional online referral form. The following notice was sent out earlier today to the BabyNet community.

Upgrades have been made to the BabyNet Online Referral portal. Users should no longer receive error messages when attempting to submit referrals. Also, BabyNet has revised both the professional and parent forms based on referral source feedback. Users will notice that both forms have been revised to collect more concise information.

To make a referral to BabyNet:

- Visit <https://babynet.scdhhs.gov/> to access the online referral portal, or
- Call 1-866-512-8881 to speak with a Central Referral Team member.

Please feel free to forward this message to local referral sources.

Thank you for all you do for the children of South Carolina!

Fran C. Boone
Division of Children's Health and Perinatal Services
S.C. Dept. of Health & Environmental Control
2100 Bull Street
Columbia, SC 29201
Office: (803) 898-0735
Fax: (803) 898-0577
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



Hollings Cancer Center Celebrates Rise in HPV Vaccination Rates

Early detection of cancer can mean all the difference in patients' outcomes. Even better is preventing the cancer altogether.

That's why researchers and clinicians supporting [MUSC Hollings Cancer Center's HPV Initiative](#) were thrilled to see the latest vaccination rates that were just published in August 2020 based on the 2019 [NIS-Teen adolescent vaccination survey](#). This is the primary survey used to monitor adolescent HPV, or human papillomavirus, vaccination rates in the nation. For the first time, South Carolina's rates are on par with the overall national rates.

Helping Kids

MUSC Health pediatrician [James R. Roberts, M.D.](#), said the rise in rates reflects the past three years of concerted effort by statewide partners and members of the South Carolina chapter of the AAP (SC AAP) to educate parents and health providers as well as a focus on integrating preventive care into their practices. "This is where the immunizations happen, in the health care provider's office — the medical home. It's important that the medical home is strong and intact, as otherwise we have a fragmented health care system." The rise in rates also reflects efforts to begin the immunization series at an earlier age. The HPV vaccine can be started as early as 9 and improves the chances of becoming "series complete" at the 11-year-old well visit, and that if the series is started after 15, three doses are needed.

Innovative Approaches

Tactics the groups are using include social media and digital campaigns, educational events with providers and school nurses and targeted programs within health systems. Dr. Kathleen Cartmell, PhD, a Hollings Cancer Center researcher and associate professor in Clemson University's Department of Public Health Sciences, said it has to be a multifaceted approach, and they are studying what tactics are the most successful to leverage resources more effectively.

The MUSC Hollings Cancer Center's HPV Initiative provides additional expertise, resources and a Quality Improvement (QI) Collaborative among four of South Carolina's Health Systems. Resources provided were mini grants awarded to Mcleod Health, MUSC, Prisma Health and Spartanburg Regional to implement regional HPV vaccination interventions. The physician champions of this initiative are Dr. Thomas Drzymala with Mcleod Health, Dr. James R. Roberts with MUSC, Drs. George Haddad and Meenu Jindal with Prisma Health, and Drs. Erin Bailey and Vincent Slater with Spartanburg Regional. Each physician champion is supported by a team of nurses, office staff, QI champion and a representative from the American Cancer Society to collect HPV vaccination data from their multiple practices.

Additionally, to aid in communications about the statewide HPV vaccination awareness campaign, a social media toolkit is now available for use. This toolkit provides key campaign messages as well as photos and visuals that can be used to highlight the importance of vaccinating our state's youth against HPV. The purpose of this digital toolkit is to provide sample messages that highlight the importance of vaccinating adolescent boys and girls against HPV for promotion on your organization's social media platforms. The goal is to increase the rate of HPV vaccinations across our state by engaging both parents and health care providers.

This FREE toolkit can be shared with your organization's social media and communications teams with your endorsement and encouragement to join in the digital conversation. If interested, please email Ashley White at whitashl@musc.edu and she will send it to you.

COVID-19 Impact

Drs. Cartmell and Roberts both agree that the increase in HPV vaccination seen in the 2020 report won't reflect any slowing of HPV vaccination in 2020 that occurred due to COVID-19 since the NIS-Teen survey was done prior to the pandemic. "Hopefully, we won't lose too much ground due to COVID-19 in terms of our HPV vaccination rates." Dr. Roberts said he understands parents' fears and concerns about bringing their child to their health care provider's office, particularly earlier in the summer when COVID rates were higher. As a result, the vaccination issue is critical for all age groups and not just the HPV vaccine. "Many families have not brought their child in for important vaccine series. This will result in a drop in the herd immunity to the point that we are likely to see a return of pertussis and measles. Equally concerning will be the coming flu season this fall and winter with COVID, influenza and possibly pertussis all circulating in the community, so families should definitely get a flu shot this year."

To read the full news release please go to:

<https://web.musc.edu/about/news-center/2020/09/03/hpv-vaccination-rates-rise-in-south-carolina>



SCHPCA

South Carolina Health Professionals for Climate Action

Dear South Carolina Health Professionals for Climate Action members!

This is our **first** monthly email blast! You can look forward to a monthly email from us with upcoming events, ways to get involved and great educational material!

Volunteer Opportunities

Carolinas Heat Health Coalition: A coalition that brings together a diversity of organizations and individuals from different sectors in NC and SC to share knowledge about and develop ways to improve heat-health awareness, heat warning systems, and heat-illness prevention measures. Members include representatives from agriculture, athletics, community planning, health and human services, the Department of Labor, DoD, and parks and recreation, among others. **They are looking for a representative from SC Health Professionals for Climate Action. If you are interested, please email info@shealthclimate.org and we will connect you with the organization and get you more information.**

SC Energy Office: The SC Energy Office is embarking on an **Electric Vehicle Stakeholder Initiative**. They are looking for a representative from SC Health Professionals for Climate Action. The stakeholder group meets twice a year with the possibility that a working group could meet monthly. **If you are interested, please email info@shealthclimate.org and we will connect you with the organization and get you more information.**

Educational Opportunities



Health in Virginia's Changing Climate

• 2021 WEBINAR SERIES •

Virginia Clinicians for Climate Action offer a monthly webinar about climate and health. Sign up here to join live! Their website also has recordings of past webinars here. CME credit is available for attending the webinars. [Click here for more information.](#)

Upcoming Webinar

[Medication Disposal: Starting the Conversation](#)

Sustainable Pharmacy Project

Thursday, February 18th, 2021 12:30-1:30pm (ET)

Join VCCA for a presentation from Sustainable Pharmacy Project to learn about how research into medication disposal practices has highlighted key areas of improvement in the effort of reducing the impact of pharmaceuticals on the environment. Lack of patient education on proper disposal and ineffective advertising of disposal services have contributed to a major question mark in what happens after the medication leaves the pharmacy. Through awareness, it allows us to create a new conversation between patients and providers.



[SC Interfaith Power & Light](#): Educating and engaging people of faith to work together for a just and sustainable future. SCIPL offers programs and resources for advocacy, action, energy conservation, education, networking, and worship.

SC Interfaith Power & Light and **SC Health Professionals for Climate Action** are teaming up for a 6 part webinar series on climate and health! SCIPL's target audience is the faith community so we will ground the talks in an understanding of stewardship and care for all people. **The kick-off event is February 23rd at 6:30 pm.** [Register here.](#) After registering, you will receive a confirmation email containing information about joining the meeting.

2021 Carolinas Climate Resilience Conference

Carolinas Integrated Sciences & Assessments team conducts applied research in NC and SC that incorporates climate information into water, health and coastal management and decision making.

SAVE THE DATE: May 10-12

Durham Convention Center, Durham, NC

More information [here](#)

What We're Reading/Listening To/Watching

Podcast: **The Climate Question** by the BBC World Service. This is a weekly, free podcast with a new in-depth climate topic with each episode. Recent topics have included: "Does Africa have a voice on climate?" and "How can we live with the SUV?" Each episode is about 20 - 25 minutes long, perfect for a car ride.

YouTube Video: [13 Misconceptions About Global Warming](#) by Veritasium. A funny, engaging, fast look at the most common misconceptions about global warming.

Book: *The Story of More* by Hope Jahren. Really interesting read that is generally about how we consume and waste too much of everything. Very objective with a lot of data, but still easy and fun to read.

REMINDER: SC Health Professionals for Climate Action is an affiliate of the Medical Society Consortium on Climate and Health. All SCHPCA members and supporters are encouraged to sign up as a medical advocate and log recent activities relating to climate and health!

Know of an upcoming event? Please email us at info@shealthclimate.org

If you're interested in being a part of our health professional coalition, please do not hesitate to contact us at info@shealthclimate.org or visit www.shealthclimate.org.

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South Carolina Health Professionals for Climate Action

E: info@shealthclimate.org

W: shealthclimate.org



State Legislative Update

December 23, 2020

The 2021 South Carolina General Assembly session will begin Tuesday, January 12th. The 2021 session is the first year of the two-year session. As of this writing, it is unclear to what extent the pandemic will impact the legislature's ability to conduct business as usual. In addition to the usual work on the budget, the legislature will also be tasked with re-districting, finishing up work on education, and, if agreement can be found, legislation to address the Santee Cooper utility.

Both chambers have pre-filed legislation, and there are numerous bills affecting children's health, safety, and well-being – along with bills affecting medical practice and the hospitals. Not included in this list are numerous pro-gun owner right bills, bills regarding the Certificate of Need program (repeal or reform), and abortion bills. *Please contact me if you want additional information on any of those bills.*

In an effort to streamline a review of the pre-filed bills, all are categorized by topic on the following pages. For reference:

- "S" denotes Senate Bill.
- "H" denotes House Bill.
- "JCLCC " bill denotes a Joint Citizens and Legislative Committee on Children bill.

Please do not hesitate to reach out if you have any questions or concerns regarding any of the following legislation.

Maggie Cash, Executive Director
South Carolina Children's Hospital Collaborative
Cell: 843-270-0533
Email: maggie@scchildrenshospitals.org

Child Abuse and Child Welfare

(Note: This is not an exclusive list of child abuse/welfare bills – just the most relevant bills.)

Bill #	Sponsor	Description
S 221	Shealy/JCLCC	Foster Care: Creates the Extended Foster Care Program", voluntary foster care option for ages 18-21 years and to provide for permanency planning for 18-21 years.
S 222	Shealy/JCLCC	Foster Care: Defines "fictive kin" (someone who child has emotionally significant relationship with) and allows fictive kin to be eligible as kinship foster care givers <i>Companion bill: H 3214 (Bernstein)</i>
S 223	Shealy	Trafficking/Domestic Violence: Addresses confidentiality for human trafficking/domestic violence victims. Victims can establish a designated address in lieu of a residence address through Attorney General program.
S 224	Shealy/JCLCC	Trafficking: Being a human trafficking victim is an affirmative defense for a charge of prostitution.

		Companion bill: H 3224 (Fry)
S 225	Shealy/JCLCC	Minors/Sex Offender Registry: Family court to have discretion on placing minor on sex offender registry; limits public access to information on registry. Companion H 3215 (Bernstein)
S 229	Shealy/JCLCC	SC Child Abuse Response Protocol – requires multidisciplinary teams involved in child abuse investigations and prosecutions to follow protocol Companion bill H 3209 (Bernstein)
S 230	Shealy/JCLCC	Trafficking: Presumes trafficked minors under coercion, provides for an affirmative defense and for expungement
S 288	Climer	“Free range parenting” bill , provides for exceptions to definitions of child abuse and neglect. <i>Note: We had concerns about the previous bill and although the language in this version is somewhat improved, it is still problematic for some children, particularly those with special needs. The bill is not needed as current statutory definitions allow for normal parenting practices.</i>
H 3113	Collins	Foster Care: Adds foster care kids to exceptional needs child education credit
H 3219	Collins	Foster Care: Directs SC DSS to establish program to help foster care teens get driver’s license, addresses liability issues, provides immunity for foster parents
H 3371	West	Reporting Infants Affected by Substance Use: Requires healthcare provider to report to DSS a child, birth to 1 year, diagnosed with NAS or fetal alcohol syndrome or who is medically affected by prenatal exposure to a substance, controlled or illegal, or withdrawal from a substance. The report must be made regardless of whether the exposure constitutes abuse. <i>Note: Federal law requires reporting to facilitate the development of a safe plan of care for the infant. DSS is trying to address through policy but many feel state legislation is needed to ensure compliance.</i>

Child Health and Safety

Bill #	Sponsor	Description
S 6	Jackson	Tobacco: Unlawful to smoke a tobacco product with minor in a vehicle. This would presumably include vaping products.
S 26	Hutto	Tanning Beds: Prevents minors under the age of 18 years from using tanning machines; requires tanning salons request IDs

S 23	Hutto	Gun Safety: Prohibit possession or discharge of firearm within 1,000 feet of a school without express permission from authorities in charge of the premises.
S 231	Shealy	Suicide: Requires student school ID cards to have the national suicide hotline number
H 3166	King	Sickle cell: Directs SC DHEC to establish the Rena Grant Sickle Cell Voluntary Patient Registry
H 3234	Huggins	Hearing Aid Coverage for Children Act – requires hearing aid coverage by group health insurance and group health benefit plans.
H 3245	Collins	School & PE: Increases physical activity requirements for students and prohibits school day from starting before 8:30 a.m.
H 3464	Gilliam	Seizure Safe Schools Act: Based on the Epilepsy Foundation’s Seizure Safe Schools Initiative, this bill requires the establishment of seizure action plans in public schools, providing requirements for the action plans. The action plan must include the name of the student, the seizure medicine prescribed, dosage and method of administration, symptoms necessitating administration of the seizure rescue medicine, and a written statement from parent whether school personnel or volunteers meeting training requirements are permitted to administer the medicine.
H 3336	GM Smith	Diabetes in School: Allows trained volunteer school personnel to administer glucagon, insulin, or both to certain students diagnosed with diabetes.

Perinatal

Bill #	Sponsor	Description
S 379	Cash	Midwives: Requires DHEC to promulgate regs to integrate midwives into perinatal care regulations in 61-16. Requires policies and protocols concerning transfer of pregnant woman from birthing center to hospital.
H 3225	Garvin	SC Dignity in Pregnancy and Childbirth Act, requires implicit bias training
H 3232	Hill	Perinatal Integration Act of 2021: Requires DHEC to promulgate regulations to integrate midwives into the organization of perinatal levels of care; defines “integrate”
H 3233	Howard	SC DHEC Newborn Screening Advisory committee changes to “Newborn Screening and Rare Disease Council. The council is charged

		with, in addition to newborn screening, to advise on the research, diagnosis treatment, and education relating to rare diseases. New council members include an emergency room physician, a “medical researcher with experience conducting research concerning rare diseases”, at least two persons age 18+ with a rare disease, at least one caregiver of a person with a rare disease, and at least three representatives from rare disease patient organizations. <i>Note: I’ve already reached out with concerns regarding this bill. As this bill is sponsored by a committee chairman, I do expect it to be scheduled for subcommittee action.</i>
H 3510	Hill	Midwife Practice Act: Establishes the board of midwifery within DHEC, practice and licensure requirements, gives DHEC the authority to promulgate regulations.
H 3371	West	Reporting Infants Affected by Substance Use: Requires healthcare provider to report to DSS a child, birth to 1 year, diagnosed with NAS or fetal alcohol syndrome or who is medically affected by prenatal exposure to a substance, controlled or illegal, or withdrawal from a substance. The report must be made regardless of whether the exposure constitutes abuse. <i>Note: Federal law requires reporting to facilitate the development of a safe plan of care for the infant.</i>

Marijuana

Bill #	Sponsor	Description
S 335	McLeod	Decriminalizes and regulates marijuana
H 3174	Rutherford	Authorizes registered patients to use marijuana for medical purposes.
H 3228	Henderson	Decriminalizes marijuana and hashish under a certain amount (<1 oz of marijuana and <10 grams of hashish)
H 3361	Herbkersman	SC Compassionate Care Act – establish medical cannabis program and requirements

Vaccines, Telehealth, & Practice Related

Bill #	Sponsor	Description
S 151	Davis	Injectable Contraception: Pharmacists can prescribe and administer injectable contraception Companion bill: H 3175

S 265	Matthews	Telehealth: Prevents hospitals from using telehealth to deliver critical care
S 269	Matthews	Hospitals: Requires hospitals to have critical care doctor on duty 24/7
S 287	Gambrell	Physical Therapists: New licensing requirements for physical therapists. Companion bill: H 3327 (Lowe)
S 314	Fanning	Surprise Billing: Prohibits surprise billing. (Note: Federal legislation passed as part of the omnibus bill passed December 21, 2020.)
H 3217	Chumly	Vaccines/Prescribing: Allows individuals to opt out of infectious/contagious vaccines for any reason; prevents regulatory/licensing entity from interfering with a practitioner/patient relationship regarding the prescribing of a controlled substance.
H 3179	GM Smith	Controlled Substances: Exempts surgically implanted drug delivery system for controlled substances from 31-day supply limitation.
H 3230	Herbkersman	Telehealth: Requires SC DHHS to reimburse practitioners for mental health telehealth services delivered to patients enrolled in Medicaid.

Medicaid & Research

Note: SC is one of 12 states that have not expanded Medicaid under ACA.

Bill #	Sponsor	Description
S 210	Johnson	Medicaid expansion - Requires SC DHHS to cover adults up to 133% FPL
H 3171	Pope	Research: "Cure Act", SC enters the multi-state Cure Compact for research
H 3226	Garvin	Medicaid expansion for adults under age 65 whose income is at or below 133% FPL
H 3573	Thigpen	SC Medicaid Buy-In Act: SC DHHS to establish a Medicaid buy-in plan and benefits for qualified individuals.

COVID-19 Vaccines

COVID-19 vaccines are now available in South Carolina to help prevent this infectious disease. The South Carolina Department of Health and Environmental Control (DHEC) is encouraging everyone to continue wearing masks, staying physically distant, avoiding crowds – and to get vaccinated as soon as your turn comes. Visit the DHEC website to learn when you will be able to be vaccinated and more information about CoVID-19.

[COVID-19 Vaccines](#)

[COVID-19 Vaccine Frequently Asked Questions](#)

[COVID-19 Information](#)

[COVID-19 Frequently Asked Questions](#)

Have a general question about COVID-19? Call the DHEC Care Line at 1-855-472-3432 between 8 a.m. and 6 p.m. daily.

Thanks for all you do.

Warren

Warren Bolton

Communications Liaison

Bureau of Communicable Disease Prevention and Control

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3670

Mobile: (803) 261-5241

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



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