NPAIHB Weekly Update

October 28, 2025





Agenda

- Welcome & Introduction: Bridget Canniff
- NPAIHB Announcements, Events, & Resources
- Legislative & Policy Update: Pakak Sophie Boerner
- Communicable Diseases Update: Dr. Tara Perti, Portland Area IHS
- State & Tribal Partner Updates
- Questions & Comments

Please sign in, using the chat box, with your full name and tribe or organization

Upcoming Indian Country ECHO Telehealth Opportunities

- Care and Access for Pregnant People ECHO 4th Tuesday of every month at 11am PT
 - Tuesday, October 28th at 11am PT
 - Didactic Topic: Pregnancy Care and Access in Indian Country
 - To join via Zoom: https://echo.zoom.us/j/87128078680?pwd=c2hMOEFnWU9QWVZMd2dpL0J0ODNidz09





COMMUNITY OF PRACTICE 2025-2026

As a community, we share our strengths and experiences about how we can uplift and support our Native youth.

Sessions include new resources and opportunities to engage with adolescent health experts.



REGISTER VIA THE EVENTS CALENDER

https://www.npaihb.org/

CONTACT US:

native@npaihb.org



WHEN?

Virtual gatherings are held the second Wednesday of each month starting in September 2025.

Start Time: 10:00 AM PT

Upcoming HNY CoP Sessions:

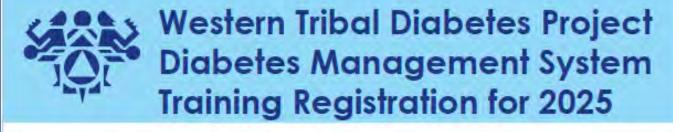
November 12, 10:00 - 11 AM Pacific

December 10, 10:00 – 11 AM Pacific

Registration:

https://us06web.zoom.us/meeting/register/4IjNGZ62TgyX1kuFlsWOZA

For more information or to request CoP recording with materials, please email: native@npaihb.org.





The Western Tribal Diabetes Project (WTDP) conducts quarterly Resource and Patient Management System trainings in the use of the Diabetes Management System (DMS) package. Participants will receive in-person or online instruction in the use of the DMS, Visual DMS, Case Management System, and the population management tool iCare. For the in-person

training, WTDP uses a training server with mock patient data to demonstrate actions and reports in the database. Registrants who opt for the online instruction will be required to use their facility's database. WTDP highly recommends In-person to the online option. Online will continue as a refresher course.

Registration for the classes can be accessed through the following link: https://www.surveymonkey.com/r/DMS_training2025

Register Online Here

DMS Training: Portland & Online December 2-4, 2025

Remaining DMS training date for 2025

The training is 830a-300p Pacific Time on the first two days (Tuesday, Wednesday), and 830a-1130a on the third day (Thursday).

Training materials will be provided to registrants in-person. For online participants, a Zoom link and training materials will be emailed the day before the trainings commence.

December 2-4

Dondi Head WTDP Manager Alyssa Farrow WTDP Specialist

920 NW 17th Avenue Portland, OR 97209 Email: wtdp@npaihb.org Website: www.npaihb.org



NPAIHB Weekly Update Schedule

 November 4: Environmental Public Health Update – Lead in Drinking Water Services for Schools & Childcare



- November 11: Veterans Day Holiday, No Weekly Update
- November 18: N CREW NWRRC Update NPAIHB & Tribal Substance Use Disorder (SUD) Projects
- November 25: Legislative & Policy Updates

LEGISLATIVE & POLICY UPDATE

October 28, 2025



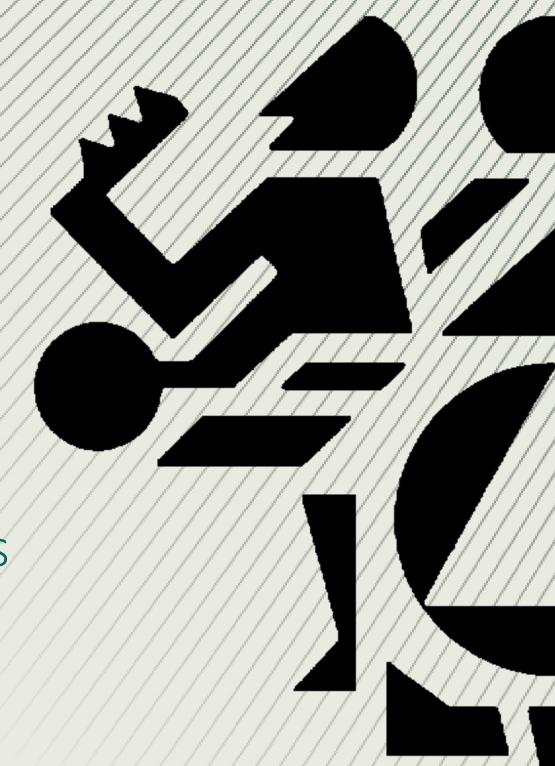
NPAIHB MISSION

To eliminate health disparities and improve the quality of life of American Indians and Alaska Natives by supporting Northwest Tribes in their delivery of culturally appropriate, high-quality health programs and services



AGENDA

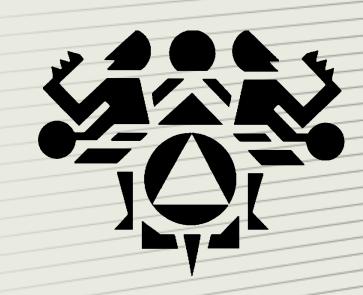
- Congressional Updates
- Federal Updates
- Regional Updates
- DTLL
- Consultations, Listening Sessions & Written Comments
- National & Regional Meetings
- NPAIHB Policy Resources



Congressional



Government Shutdown



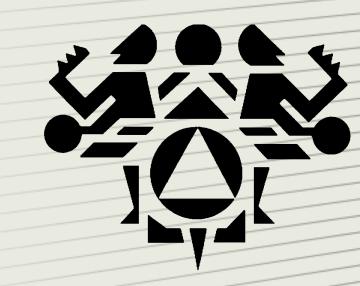
Shutdown Status:

- The Senate voted Wednesday for the 12th time on the House-passed Continuing Resolution (CR)
- The CR failed to meet the 60 votes necessary to pass

Impacts:

- Essential workers such as TSA employees or military members continue to work through the shutdown.
- Federal employees have now missed their first full paycheck.
- SNAP food benefits are being held from distribution starting November 1, 2025
- WIC benefits are "in survival mode" with some states unable to provide WIC benefits starting November 1, 2025

Senate Hearings



Senate Health, Education, Labor and Pensions (HELP) Committee: The Future of Biotech: Maintaining U.S. Competitiveness and Delivering Lifesaving Cures to Patients

Date: October 29

Time: 7:00am PST

Location: Online

Senate Committee on Indian Affairs:

"Impacts of Government Shutdowns and Agency Reductions in Force on Native Communities"

Date: October 29

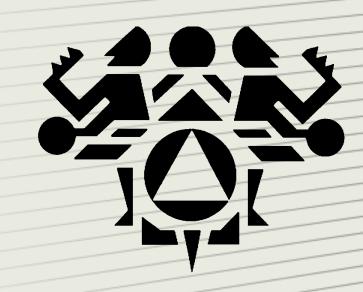
Time: 11:00am PST

Location: Online

Federa



Rural Health Transformation Fund



ID:

- Governor Little has determined a 3% set-aside for Idaho Tribes
- \$6 million/year for 5 years
- Idaho Tribes may apply for competitive sub-awards outside of the Tribal set-aside
- The timeline for sub-award project funding will be late spring 2026 due to the need for legislative approval

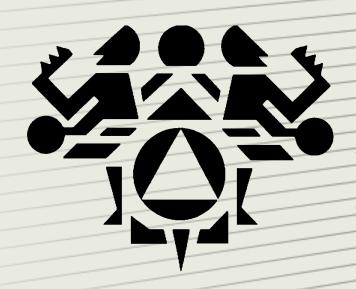
OR:

Governor Kotek has determined a 10% set aside for Oregon Tribes

WA:

• Governor Ferguson has determined a 10% set-aside for Washington Tribes

IHS

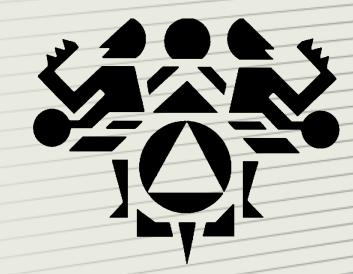


- Acting Director Ben Smith's term is ending this November
- HHS is reaching out to Tribal Leaders for recommendations to fill the director role
- What have your Tribes heard?

Regional



36th Centennial Accord



Washington Governor Ferguson signed Executive Order 25-10: "A NEW FOUNDATION FOR WASHINGTON STATE'S GOVERNMENTAL RELATIONS WITH SOVEREIGN TRIBAL NATIONS"

The **Executive Order** directs agencies to:

- Proactively engage with Tribal Nations on a regular basis to explore opportunities to work together. This includes visiting Tribal reservations, attending Tribal events, and engaging with Tribal leaders and community members.
- Engage in timely consultation when any of the agency's policies, programs or actions may impact Tribes.
- Recognize and incorporate Indigenous Knowledge where appropriate. Cabinet agencies that make decisions or set standards based on "best available science" must account for available and Tribally accepted Indigenous Knowledge in doing so.
- Identify and foster opportunities to support Washington state Native art and culture.
- Operate with transparency and accountability by producing an annual report regarding activities that involve or impact Tribal Nations.
- Have each agency's Tribal liaison report directly to the agency head, and a member of the agency leadership team and included in agency decision-making.

Dear Tribal Leader Letters



IHS DTLL

October 1, 2025

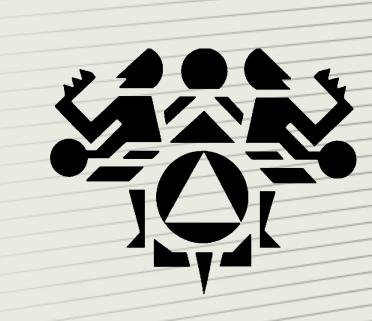
IHS has received advance appropriations in the Full-Year Continuing Appropriations and extensions Act, 2025 (P.L. I 19-4). This provides \$5.2 billion for FY26, for almost all programs in the IHS Service and Facility accounts. However, Section 105(I) Leases, Contract Support Costs or Tribal Lease, did not receive advanced appropriations. For more information from IHS please visit their website which can be accessed here.

September 29, 2025

The IHS Acting Director <u>announced</u> the IHS National Supply Service Center's (NSSC) launch of **LINK**, a new IHS Enterprise Resource Planning system. LINK is part of a broader modernization initiative to strengthen the Agency's supply chain infrastructure in support of IHS, Tribal, and Urban (I/T/U) healthcare facilities.

September 17, 2025

The IHS Acting Director writes to request your comments and recommendations on the combined **Fiscal Years** 2022 and 2023 Report to Congress on the Administration of the Indian Health Service Tribal Self-Governance Program. IHS is requesting comments and recommendations be submitted no later than November 17, 2025 via email at: consultation@ihs.gov.



Consultations, Listening Sessions & Written Comments



IHS

IHS Health IT Modernization Tribal Consultation/ Urban Confer Pilot Sites

Date: November 6

Location: Registration



DHHS

HHS - Administration for Children & Families

Date: November 18

Location: University of Washington (in-person & virtual), Seattle, WA

Discussion: Supporting America's Children & Families Act

RSVP for In-Person Participation: <u>Tribal Consultation In-Person RSVP</u>

Zoom Registration for Virtual Participation: **Zoom Link Registration**



National and Regional Meetings



Upcoming Meetings

SCIA:

"Impacts of

Government

Shutdowns and

Agency

Reductions in

Force on Native

Communities"

Date: October

29

Time: 11:00am

PST

Location:

<u>Online</u>

Medicare,

Medicaid, and

Health Reform

Policy

Committee

Face-to-Face

Meeting

Date:

November 7

Time: 9:00-

11:35am PST

Location:

Virtual

CMS Tribal

Technical

Advisory

Group (TTAG)

Face-to-Face

Meeting

Date:

November 12-14

Location:

Washington, DC –
National Museum of
the American Indian

IHS: Portland Area Budget

Formulation

Date:

November 14

Time: All Day

Location: NARA

NW River House, 211 SE Caruthers St,

Portland, OR 97214

NCAI Annual Convention

Date:

November 16-21

Time: All Day

Location:

Seattle Convention
Center|Summit

Building

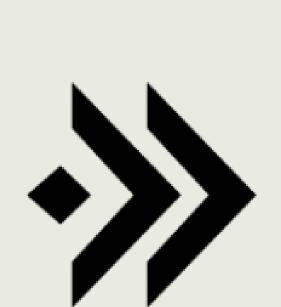
NPAIHB Policy Resources



Become a Tribal Partner! Join our mailing list:

NPAIHB Policy Resourch





Health and Wellness for * The Seventh Generation



MEETTHETEAM



Hilary Edwards

Director of Legal &
Government Affairs

(Swinomish Indian Tribal Community)
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Pakak Sophie Boerner

Health Policy Specialist

(Iñupiaq, Native Village of Kiana)

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Thank you



Partner Updates

Portland Area IHS Communicable Diseases Update

TARA PERTI, MD, MPH

MEDICAL EPIDEMIOLOGIST

IHS, PORTLAND AREA OFFICE

October 28, 2025

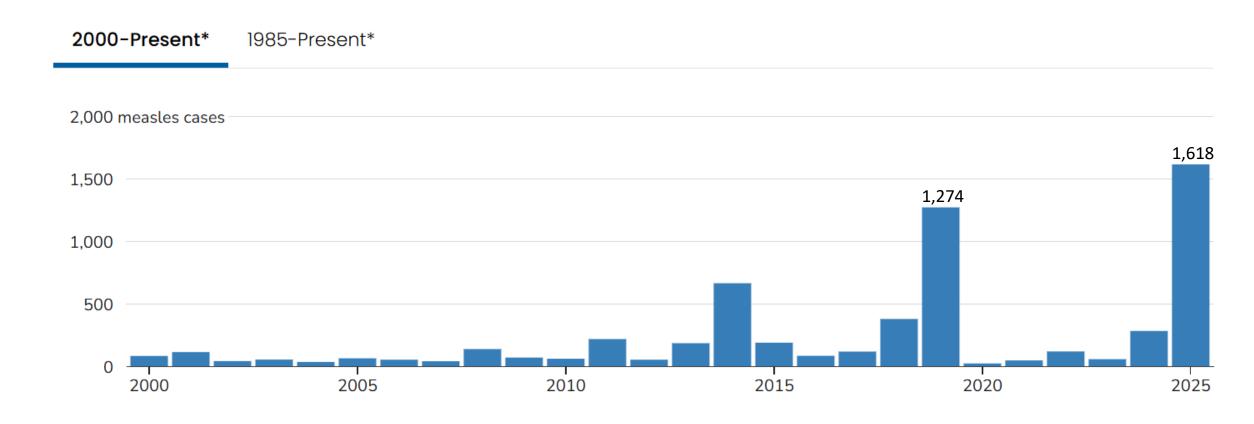


Outline

- Measles
- Respiratory Virus Season (COVID-19, Influenza, RSV) Update

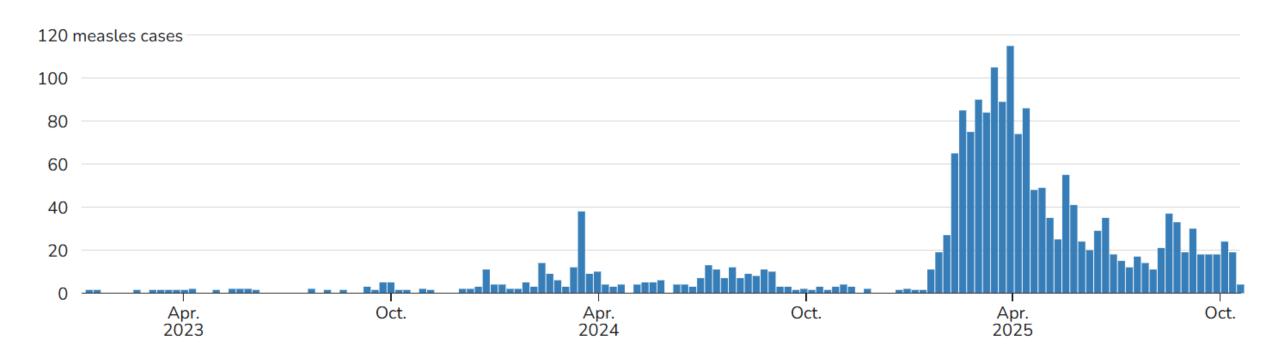
Yearly Measles Cases – United States, 2000-Present

as of October 21, 2025



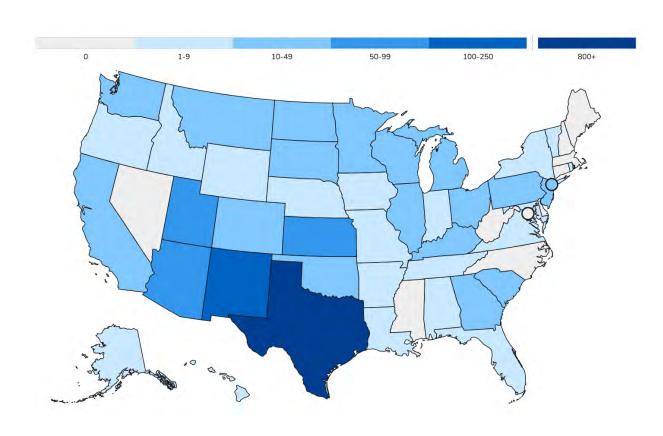
Measles – United States, 2023-2025 (through 10/21)

2023–2025* (as of October 21, 2025)

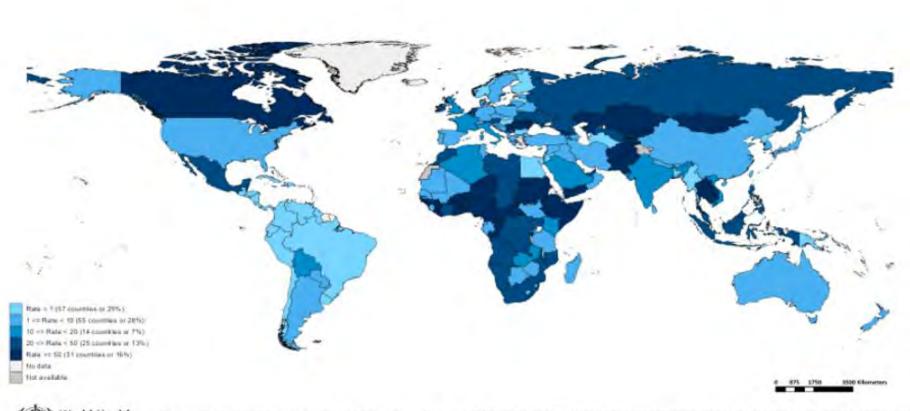


Measles — United States, 2025

- 1,618 confirmed cases among 41 states through 10/21.
- 87% of cases from one of 43 outbreaks (≥3 related cases).
- Age: 27% <5 years-old, 40% 5-19 years-old, 33% ≥ 20 years-old.
- 12% hospitalized overall (22% of those <5 years-old hospitalized).
- 3 deaths among unvaccinated individuals, including 2 healthy school-aged children.
- 92% unvaccinated or with unknown vaccination status, 4% one MMR dose, 4% two MMR doses.



Measles Incidence (Cases per Million), 9/2024-8/2025



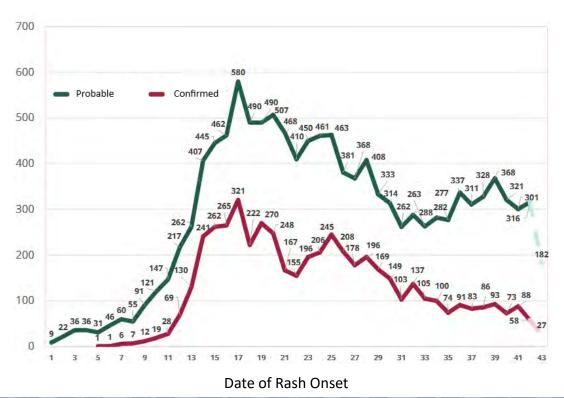
Country	Cases	Rate
Kyrgyzstan	10000	1,391.59
Yemen	33092	815.41
Mongolia	1617	485.25
Romania	7004	368.34
Afghanistan	10897	255.51
Tajikistan	2284	215.66
Lao People's Democratic Republic	1480	190.48
Georgia	697	183.05
Kazakhstan	2860	138.89
Serbia	727	107.92

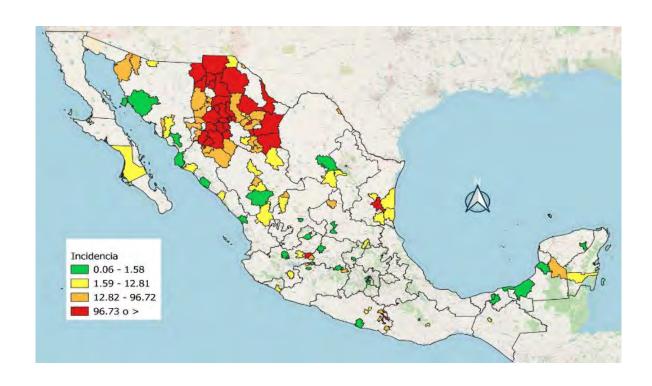
World Health Organization

Map production: World Health Organization, 2025. All rights reserved. Data source: IVB Database. Disclaimer: The boundaries and names shown and the designations used on this map do notimply the expression of any opinion what soever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which these may not yet be full agreement.

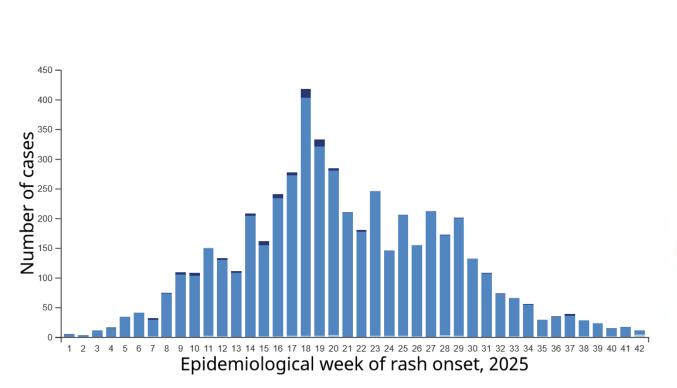
Measles — Mexico, 2025 (through 10/27)

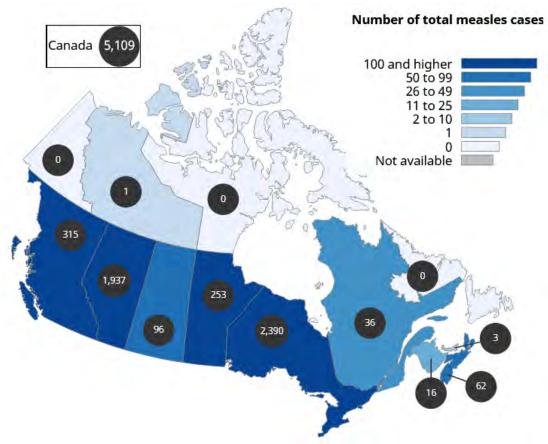
- 11,604 confirmed and probable cases; 5,089 confirmed cases as of 10/27/25
- 25 states; 4,414 (87%) confirmed cases in Chihuahua
- Deaths: <u>23</u> (Chihuahua: 21, Sonora: 1, and Durango: 1)





Measles — Canada, 2025 (through 10/18)





Number of confirmed cases: 4,748

Measles — Idaho, 2025 (N=7)

Date Reported	County	Age	Exposure
8/12/25	Kootenai	Child	Unknown
	(Panhandle Health District)		
8/14/25	Bonneville	Child	International Traveler
	(Eastern Idaho Public Health)		(household)
8/20/25	Bonner	Child	Unknown
	(Panhandle Health District)		
~9/12/2025	Bonneville	4 individuals –	Linked to First Case in Bonneville County
	(Eastern Idaho Public Health)	details not	
		provided	

^{*}There have been 2 additional cases among travelers to Idaho, who are not residents of Idaho (one reported on 8/7/25 in Bonneville County) and one previously reported on 5/23/25 by South Central Health District (Cassia County).

Measles — Washington and Oregon, 2025

Washington (N=11)*					
Date Reported	County	Age	Exposure		
2/26/25	King	Infant	International Travel		
3/17/25	Snohomish	Adult	Linked to 1 st Case		
4/1/25	Snohomish	Adult	International Travel		
4/4/25	King	Adult	International Travel		
4/20/25	King	Infant	International Travel		
5/20/25	King	Adult	International Travel		
6/20/25	Whatcom	Not provided	Not Provided		
6/23/25	Whatcom	Not provided	Linked to 1st Case in Whatcom County		
6/25/25	King	1 adult and 1 child in the same household	International Visitor		
8/25/25	Spokane	Not Provided	Linked to Case from North Idaho		

<5 year-old: 5 (46%), 5-17 years: 1 (9%), ≥ 18 years: 5 (46%)

^{*}There have also been 3 additional cases among travelers to Washington State, who are not residents of Washington State.

		Oregon (N=1)	
Date Reported	County	Age	Exposure
6/24/25	Multnomah	Not provided	International Travel

^{*} Measles virus detected in wastewater from Marion County on 10/6/25. No cases reported yet.

MMR Vaccination Rates by IHS Area, June 30 vs. September 30, 2025

	19-35 months % Vaccinated with 1 dose of MMR				13-17 years ed with 2 doses	of MMR
	June 30	September 30	Improvement	June 30	September 30	Improvement
National	<mark>83.4</mark>	<mark>83.6</mark>	<mark>0.2</mark>	<mark>92.9</mark>	<mark>92.9</mark>	<mark>0.0</mark>
Alaska	87.9	86.3	-1.6	96.8	96.6	-0.2
Albuquerque	85.6	84.9	-0.7	95.8	93.5	-2.3
Bemidji	76.9	76.1	-0.8	94.1	70.6	-23.5
Billings	75.5	80.0	4.5	92.2	91.9	-0.3
California	66.6	69.3	2.7	79.9	78.2	-1.7
Great Plains	87.1	88.2	1.1	97.4	97.8	0.4
Nashville	82.3	83.1	0.8	94.2	97.6	3.4
Navajo	95.3	95.7	0.4	91.5	97.8	6.3
Oklahoma	74.2	76.5	2.3	84.7	92.6	7.9
Phoenix	79.0	76.8	-2.2	96.7	95.6	-1.1
Portland*	<mark>68.9</mark>	<mark>80.9</mark>	<mark>12.0</mark>	<mark>95.7</mark>	<mark>96.9</mark>	<mark>1.2</mark>
Tuscon	92.4	88.1	-4.3	99.0	98.8	-0.2

^{*}Based on 11 (24.4%) of 45 reporting facilities

DTaP/Tdap Vaccination Rates by IHS Area, September 30, 2025

			19-59 years
	19-35 months	13-17 years	% Vaccinated with
	% Vaccinated with	% Vaccinated with	1 dose of Tdap ever AND
	4 doses of DTaP	1 dose of Tdap	Tdap or Td < 10 years
National	69.6	77.2	38.6
Alaska	73.8	19.2	No Data
Albuquerque	71.7	90.3	36.9
Bemidji	55.0	68.5	52.8
Billings	58.2	87.5	31.2
California	55.3	77.4	48.3
Great Plains	71.2	84.8	39.2
Nashville	74.8	96.2	26.7
Navajo	81.0	95.6	45.1
Oklahoma	67.3	90.2	23.4
Phoenix	63.3	94.4	37.0
Portland*	63.8	92.8	49.5
Tuscon	78.9	98.0	82.1
Healthy People	90%		
2030 Goal	(2020 data from NIS: 79.6%)		

DTaP Vaccine Recommendations for Children (5 doses): 3 dose primary series at 2, 4 and 6 months, followed by a booster dose at 15-18 months and 4-6 years.

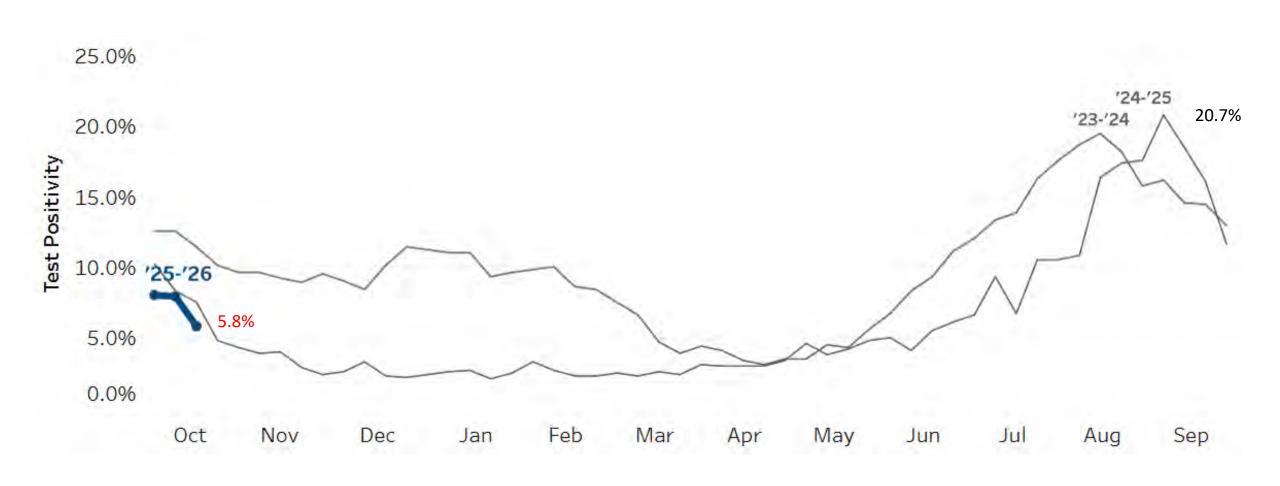
Tdap: 1 dose at age 11-12 years, then either Td or Tdap every 10 years.

During EACH pregnancy, in the early part of 27-36 weeks gestation.

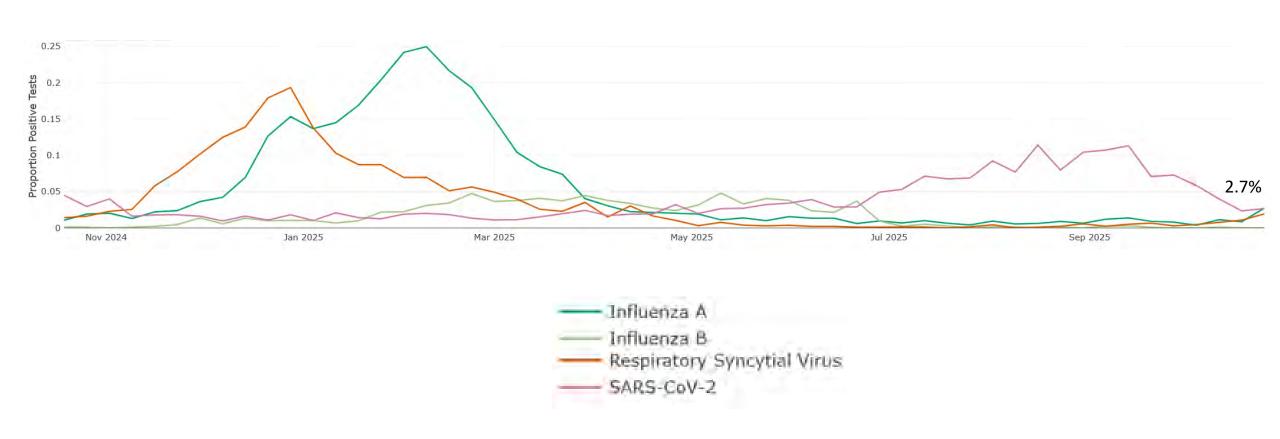
^{*}Based on 11 (24.4%) of 45 facilities reporting data, including 5 of 5 IHS Service Units for 19-35 month and 13-17 yo data and 10 (22.2%) of 45 facilities reporting data for adults.

IHS National Immunization Reporting System Reports. Available at: https://www.ihs.gov/nonmedicalprograms/ihpes/Immunizations/index.cfm?module=immunizations&option=reports

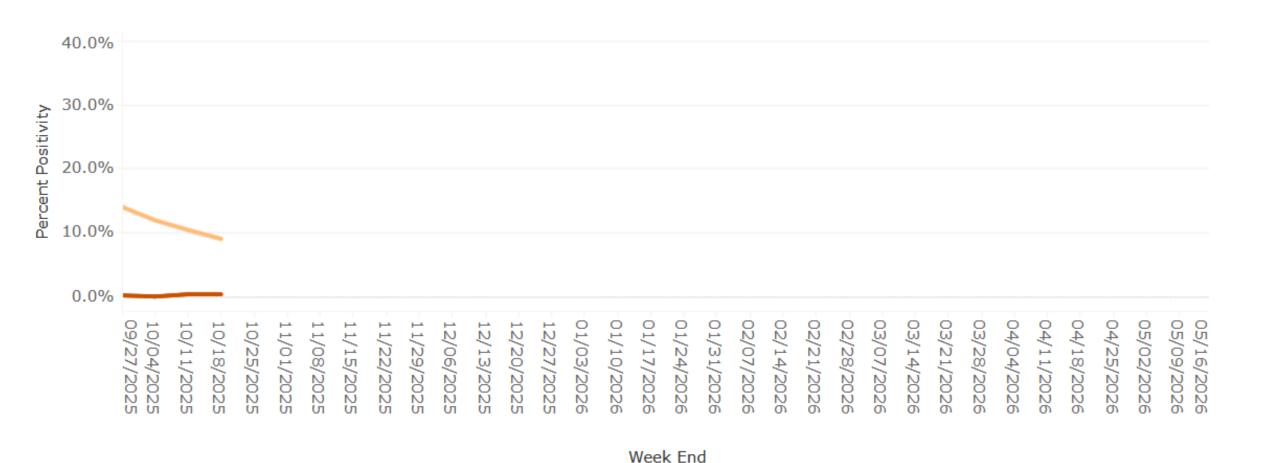
Percent of Tests Positive for COVID-19 — Oregon, 2025-26 (through 10/18) and Past Two Seasons



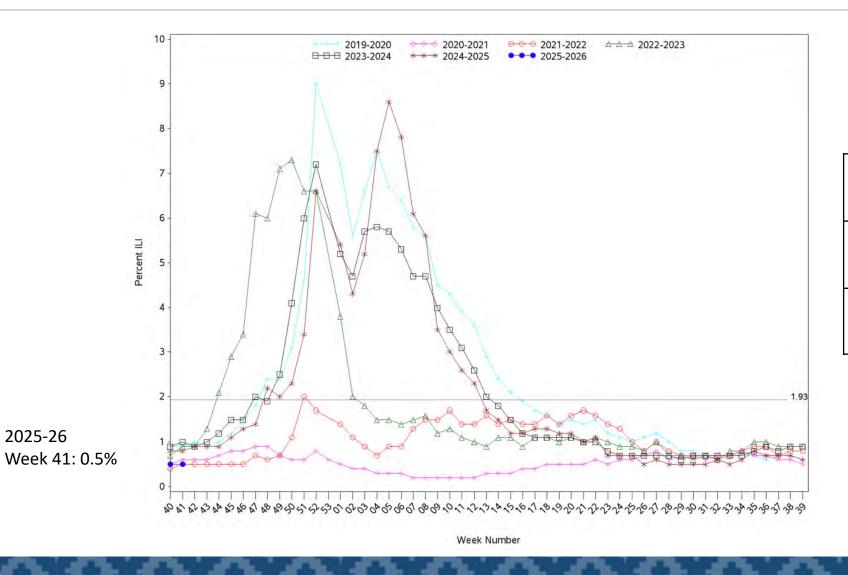
Proportion of Tests Positive for COVID-19, Influenza and RSV in the Northwest — University of Washington and Seattle Children's Hospital, 2024-2025 (through 10/25)



Percent of Tests Positive for COVID-19 and RSV — Idaho, 2025-26



Percentage of Outpatients Visits for Influenza-like Illness — IHS (IHS Influenza Awareness System), 2025-26 (through 10/11) and Past Six Seasons

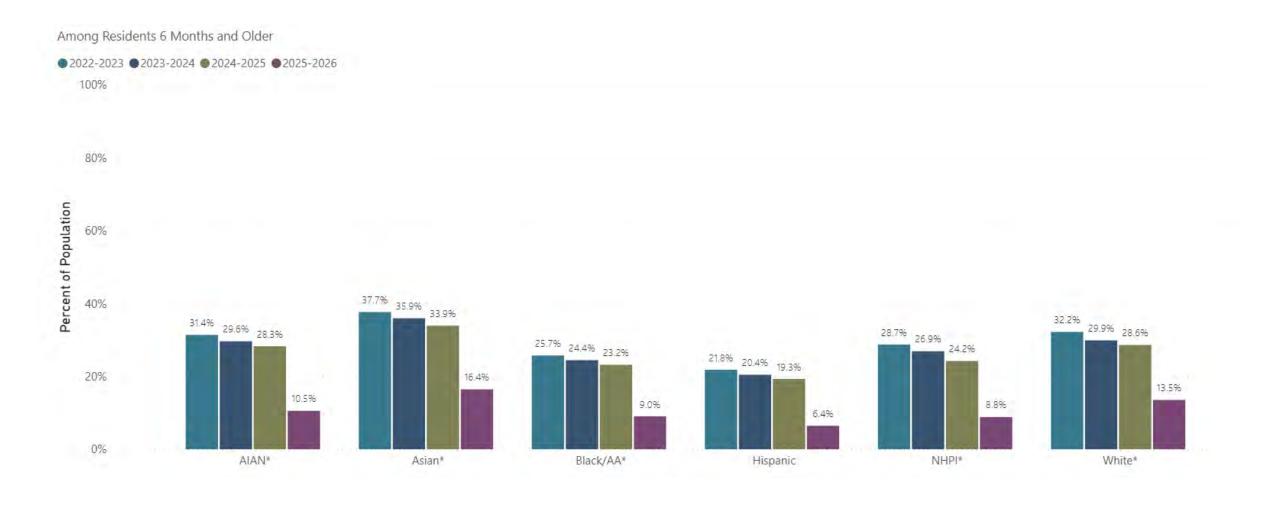


	% ILI Visits Week 40	% ILI Visits Week 41
Portland Area	0.0	0.3
National	0.5	0.5

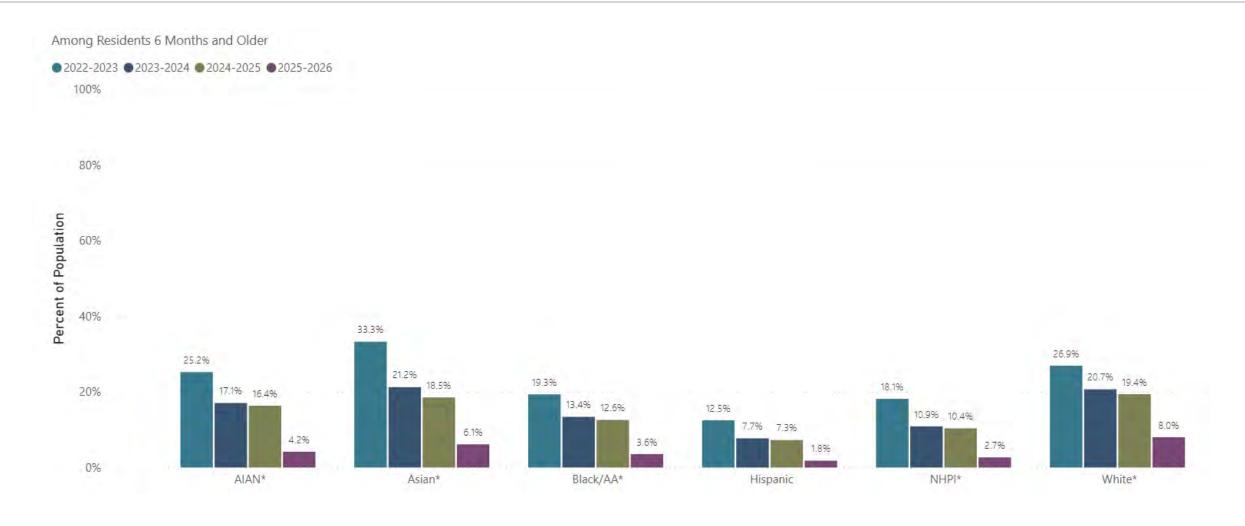
Influenza Immunization Rates – IHS, Portland Area vs. Nationally, 2025-26 (through 10/11/25)

Age Group	% Vaccinated Portland Area	% Vaccinated Nationally
6 mo – 17 years	2.5	5.3
18+ years	7.6	8.0
65 + years	17.2	15.7
Overall (6 months +)	6.3	7.3

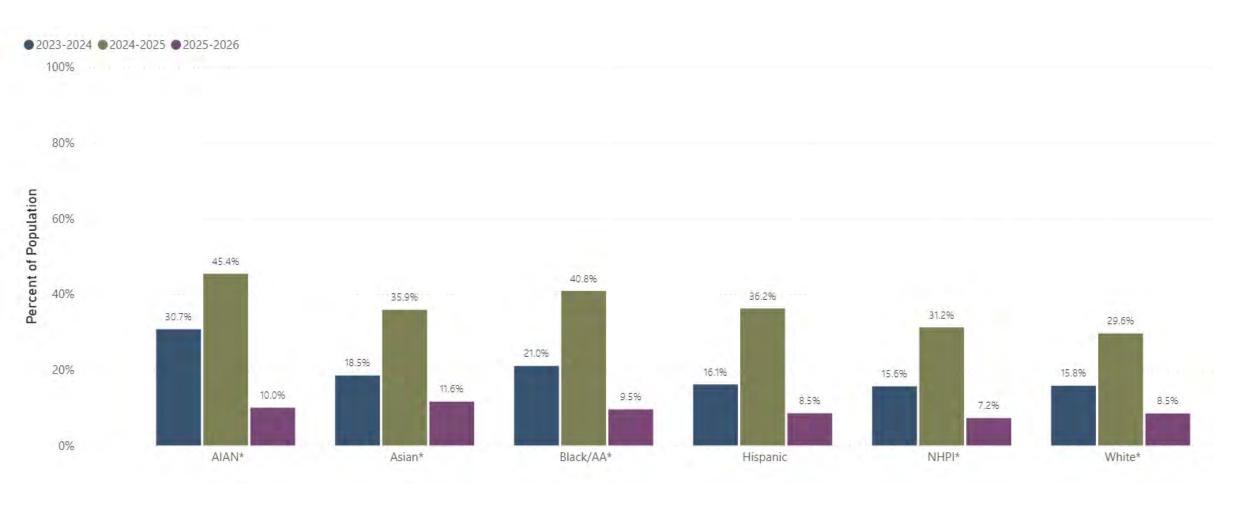
Percent of People who Received and Influenza Vaccine by Race/Ethnicity — Washington State, Current (through 10/20) and Past 3 Seasons



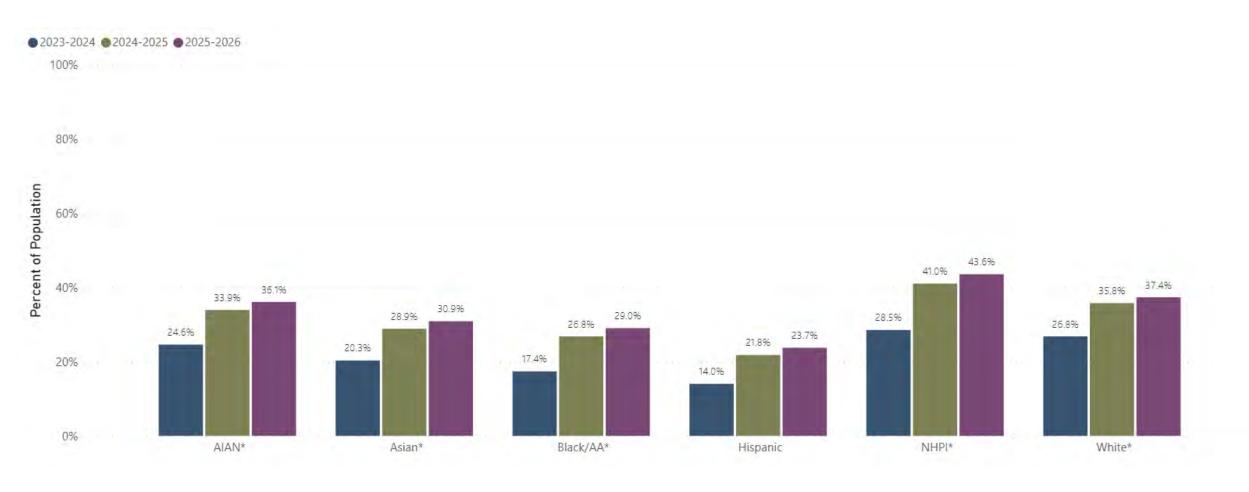
Percent of People who Received a COVID-19 Vaccine by Race/Ethnicity — Washington State, Current (through 10/20) and Past 3 Seasons



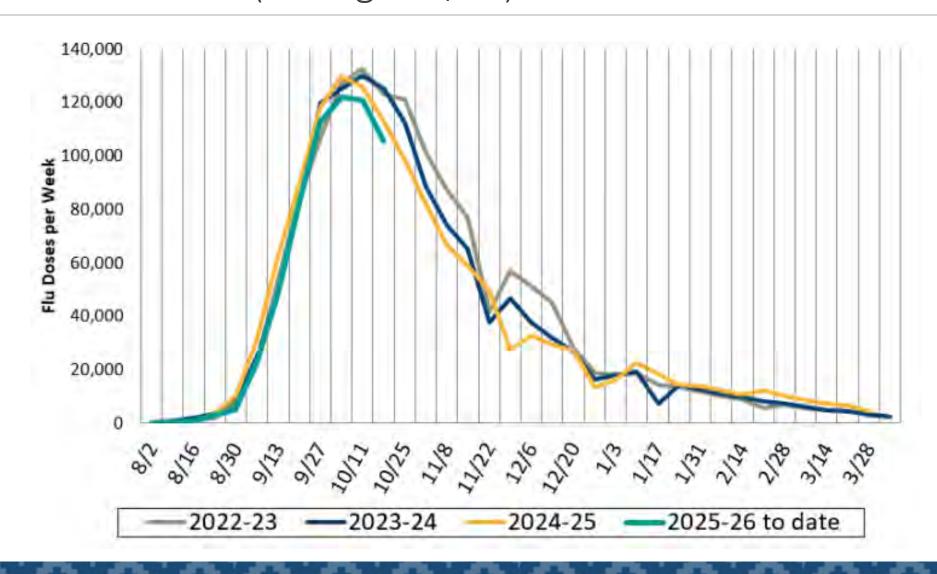
Percent of Infants 0-7 Months Old who Received a RSV Monoclonal Antibody by Race/Ethnicity — Washington State, Current (through 10/20) and Past 2 Seasons



Percent of Adults ≥ 75 years old Ever Vaccinated for RSV by Race/Ethnicity — Washington State, Current (through 10/20) and Past 2 Seasons



Weekly Number of Influenza Immunizations Administered — Oregon, Current (through 10/18) and Past 3 Seasons



Summary

- Measles
 - Idaho: Seven cases among Idaho residents have been reported (Bonneville, Kootenai, and Bonner counties). No cases reported since mid-September.
 - Washington: 11 cases of measles among Washington State residents (King, Snohomish, Whatcom, and Spokane Counties), most related to international travel; no outbreak so far.
 - Oregon: One case in Multnomah County reported on 6/24. Measles virus detected in wastewater from Marion County on 10/6. No new cases reported.
 - U.S.: 1,618 measles cases in 41 states (through 10/21) with 3 deaths. 92% unvaccinated or with unknown vaccination status. 87% of cases associated with one of 43 outbreaks.
 - MMR vaccination rates have significantly improved in the Portland Area among 19-35 month old children for facilities reporting into the National Immunization Reporting System, but is still well below the goal of ≥ 95%.
- DTaP vaccination rates have also significantly improved in the Portland Area among 19-35 month old children, but is still well below the Healthy People 2030 goal of 90%.
- COVID-19, Influenza, and RSV: Still early in respiratory virus season with low levels of activity.
- There is a window of opportunity now to vaccinate against influenza, COVID-19, and RSV prior to increased respiratory virus activity.

Recommendations

- Ensure patients at your clinics are up to date on immunizations, including influenza, COVID-19 and RSV, to protect your patients, their families, and the community during respiratory virus season.
- Consider using multiple strategies to increase vaccination rates (e.g. reminder/recall, electronic prompts, standing orders, increasing patient access, provider audit and feedback with benchmarks, CME on provider communication techniques (e.g. boostoregon.org webinars including on motivational interviewing), vaccine clinics, reviewing/addressing vaccination status with WIC beneficiaries, messaging utilizing trusted messengers).
- Ensure anyone traveling internationally (including to Mexico and Canada) without presumptive evidence of measles immunity are vaccinated at least 2 weeks prior to travel (those ≥ 12 months old should receive 2 doses at least 28 days apart, infants ≥6 months old should receive 1 dose (revaccinated with 2 dose series starting at 12 months).

HHS: All individuals are encouraged to consult with their health care providers to understand their options regarding vaccinations.

Informing "Individual Decision-Making" Discussions for COVID-19 Vaccines: AI/AN at Increased Risk for Severe COVID-19 Outcomes

ACIP recommendations: COVID-19 vaccination for all individuals ≥ 6 months old based on "individual decision-making" (i.e. shared clinical decision-making) with health care providers (including physicians, physician assistants, nurse practitioners, registered nurses, and pharmacists), noting that the risk-benefit of vaccination in individuals under age 65 is most favorable for those who are at an increased risk for severe COVID-19 and lowest for individuals who are not at an increased risk, according to the CDC list of COVID-19 risk factors.

When having discussions with patients or parents regarding COVID-19 vaccinations, as part of "individual decision-making," it is important to consider that American Indians and Alaska Native people, including both children and adults, are at increased risk for severe outcomes from COVID-19, which is not accounted for by medical comorbidities alone.

Influenza Vaccination Recommendations for 2025-2026

- Routine annual influenza vaccination is recommended for all persons aged ≥6 months who do not have contraindications.
- Adults ≥65 years old recommended to preferentially receive a high dose or adjuvanted influenza vaccine (i.e. HD-IIV3, RIV3, or aIIV3); another age-appropriate influenza vaccine can be used if not available.
- FluMist, a live attenuated influenza vaccine (LAIV3) administered as a nasal spray, previously approved for persons age 2 through 49 years of age, was approved for self-administration for those age 18 years or older and caregiver administration for those age 2 through 17 years old (no longer requiring administration by a health care provider) in September 2024.
 - LAIV3 should not be given to pregnant or immunocompromised persons, close contacts and caregivers of severely immunosuppressed persons, children < 2 years-old, children age 2-4 years with asthma or history of wheezing in the past 12 months (asthma in persons ≥ 5 years is a precaution), or children receiving aspirin or salicylate containing therapy, persons with cochlear implants or cranial CSF leak.
- FluBlok, a recombinant influenza vaccine (RIV3), previously approved for persons 18 years or older, was approved for persons 9 years or older in March 2025.
- ACIP recommended that single-dose formulations are used which do not contain thimerosal as a preservative (This recommendation was not reviewed with a standard systematic review and evaluation of evidence. This topic was not discussed and the recommendation was not provided by the ACIP Influenza Workgroup).
- Timing: Start now and offer for entire flu season as long as flu viruses are circulating. Avoid delay particularly for:
 - Pregnant women in the third trimester.
 - Children who need 2 doses (children aged 6 months through 8 years who have never received influenza vaccine or who have not previously received a lifetime total of ≥2 doses) should receive their first dose as soon as possible after vaccine becomes available to allow the second dose (which must be administered ≥4 weeks later) to ideally be received by the end of October.
 - Patients for which concern exists that later vaccination might not be possible.

RSV Vaccination Recommendations for Adults

- ≥ 75 years-old: One-time vaccine.
- Ages 50-74 at increased risk
 - Chronic heart, lung, or liver disease, end-stage renal disease, diabetes mellitus (c/b nephropathy, retinopathy, or other end organ damage or requiring treatment with insulin or a SGLT2 inhibitor), neurologic or neuromuscular condition affecting airway clearance or resulting in respiratory muscle weakness, hematologic disorder, morbid obesity ≥ 40 kg/m², moderate-severe immunocompromise, residence in nursing home, frailty, or residence in a remote community.

RSV Prevention for Infants and Toddlers

- September-January: RSV vaccination with <u>Pfizer's Abrysvo</u> (only RSV vaccine approved for pregnancy) recommended for those 32-36 weeks pregnant who did not receive RSV vaccine during a prior pregnancy.
- Monoclonal antibody (nirsevimab or clesrovimab):
 - For babies born to mothers who did not receive the maternal RSV vaccine during pregnancy or received it <2 weeks before delivery (if mother received RSV vaccine during a *prior* pregnancy, monoclonal antibody recommended for baby).
 - If born during October through March, nirsevimab (FDA approved in 2023) or clesrovimab (FDA approved in June 2025) should be given within 1 week after birth.
 - For others age < 8 months born outside of RSV season, administer nirsevimab or clesrovimab before RSV season (October-March; typically peaks in December/January).
 - Dose: < 5 kg: 50 mg IM X 1, ≥5kg: 100 mg IM X 1.
 - Children age 8-19 months at increased risk for severe RSV (<u>all AI/AN children</u> and others at increased risk including those with chronic lung disease of prematurity, severe immunocompromise, severe cystic fibrosis): Prior to entering their 2nd RSV season (regardless of prior receipt of monoclonal antibody or vaccination of mother during pregnancy).
 - Nirsevimab is the only approved monoclonal antibody for this indication. Dose: 200mg (100 mg IM given in 2 different sites).

Patient Education Resources for Respiratory Viruses/Immunizations

IHS Division of Epidemiology and Disease Prevention Educational Resources; National IHS Public Health Council Public Health Messaging

Northwest Portland Area Indian Health Board (NPAIHB): Email vaccinative@npaihb.org to access the vaccine resource folder (while website is down; in the future, resources will be available at indiancountryecho.org).

American Academy of Family Physicians. COVID-19 Vaccine: Fall 2025-26 Immunization Recommendations

American Academy of Pediatrics:

Recommendations for COVID-19 Vaccines in Infants, Children, and Adolescents: Policy Statement.

Recommended Child and Adolescent Immunization Schedule

https://www.aap.org/immunization; https://www.healthychildren.org/immunizations (e.g. COVID-19 What Families Need to Know)

American College of Obstetricians and Gynecologists. <u>COVID-19 Vaccination Considerations for Obstetric–Gynecologic Care</u>

Children's Hospital of Philadelphia: Vaccine Education Center; Vaccine and Vaccine Safety-Related Q&A Sheets (e.g. Q&A COVID-19 Vaccines What You Should Know); Protecting Babies from RSV: What You Should Know); Influenza: What You Should Know).

Boost Oregon: Videos and Resources

Personal Testimonies: Families Fighting Flu: Our Stories

Washington State Department of Health: Flu Overview; Materials and Resources; Influenza (Flu) Information for Public Health and Healthcare

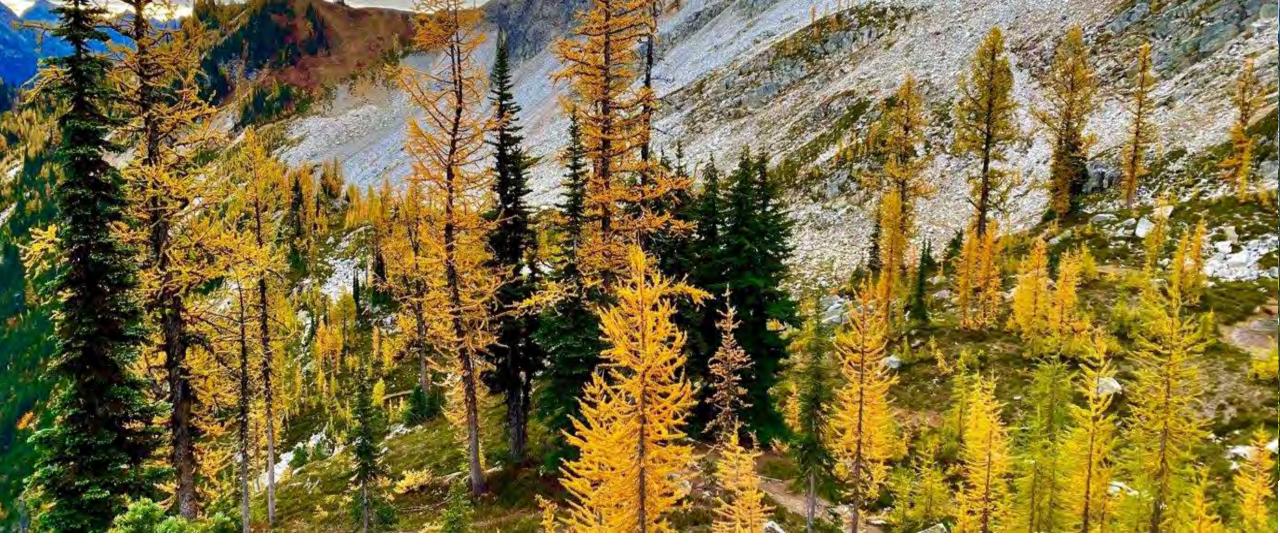
COVID-19; DOH COVID-19 Vaccine Schedule; Washington State Statewide Standing Order for COVID-19 Vaccine FAQs for the Public; West Coast Health Alliance announces vaccine recommendations for COVID-19, flu, and RSV | Washington State Department of Health

Oregon Health Authority: Flu Prevention; Immunization Resources; Immunize.org: Influenza (Flu)

Idaho Department of Health & Welfare: Flu (Seasonal and Pandemic); Child and Adolescent Immunization and Adult Immunization; COVID-19

Centers for Disease Control and Prevention: <u>Preventing Seasonal Flu; Flu Resources</u>; <u>Preventing Spread of Respiratory Viruses When You're SickIndian Country ECHO/UNM Project ECHO: Making a Strong Vaccine Recommendation: Vaccine Communication; <u>RSV</u></u>







WA DOH Office of Tribal Public Health & Relations









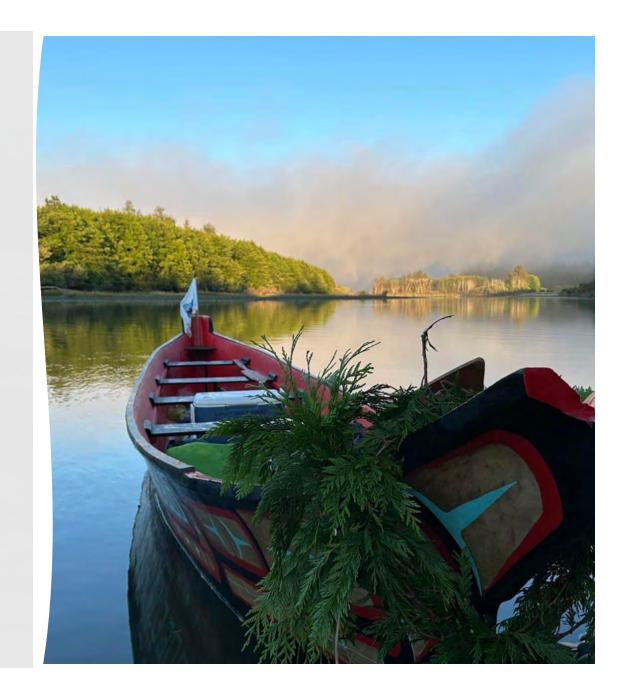
Tuesday October 28, 2025 **NPAIHB Meeting**



Agenda

OTPHR Updates

Contact Info & Closing



Dear Tribal Leader Letters

Date	Letter Subject	Meeting Information
October 17	Informative – information on agency rulemaking for October 1-15, 2025 (PDF)	
October 07	Informative – information on agency rulemaking for September 16-30, 2025 (PDF)	
October 07	Informative – Office of Immunization funding information sessions – action requested (PDF)	 Information session 1: 3:30-4 p.m. October 27 - Zoom link Information session 2: 11-11:30 a.m. October 30 - Zoom link
September 23	Informative – update on the status of the State Emergency Medical Reserve Corps (SEMRC) (PDF)	
September 22	Collaborative – maternal mental health funding opportunity (PDF)	 Office hours 1: 10-11 a.m. October 6 - Zoom link Office hours 2: Noon-1 p.m. October 17 - Zoom link
September 22	Informative – information on agency rulemaking for August 16-31, 2025 (PDF)	NA





Federal Public Health Updates

- Federal Funding Lapse
 - Day 9 of Federal shutdown
 - Senate has voted 6 times rejecting dueling government funding bills
 - Watch for pain points for impacted workers including missed paychecks; polling and media reports related to TSA staff shortages; mounting unaddressed impacts to WIC funds
 - DOH Grants Dashboard | Healthier Washington Collaboration Portal
- Federal Regulatory
 - DOH participates in the federal rulemaking process by submitting public comments on proposed regulation. Federal Rulemaking | Healthier Washington Collaboration Portal
- Federal Agencies
 - Continue to monitor changes at HHS including the proposed reorganization and impacts to federal public health investments
- Federal Engagement
 - WA State Public Health Systems Monthly Update
 - Virtual meetings and in person engagement with CODEL
 Washington Stg





Upcoming Event(s)

Washington School-Based Health Alliance 2025 Student Health Summit **Cultivating Community** Strengthening collective power for student health and wellness. Presented by Wellpoint November 7, 2025 9:00 am - 3:00 pm Registration & Breakfast at 8:15 Bellingham, WA **Western Washington University** Discounted Hotel Block Available --- Free Parking

Washington State Department of Health

2 Upcoming Informational Tribal Calls on Immunization Funding Opportunity!

The Office of Immunization and Care-a-Van team will be holding two informational calls to provide additional details and answer your questions on the new funding sources, activities, and deliverables that was sent out in the Dear Tribal Leader Letter on 10/07/2025.

We look forward to meeting with you!

DTLL: Informative – Office of Immunization funding information sessions – action requested (PDF)

- Information session 1:3:30-4 p.m. October 27 Zoom link
 - Information session 2: 11-11:30 a.m. October 30 - Zoom link



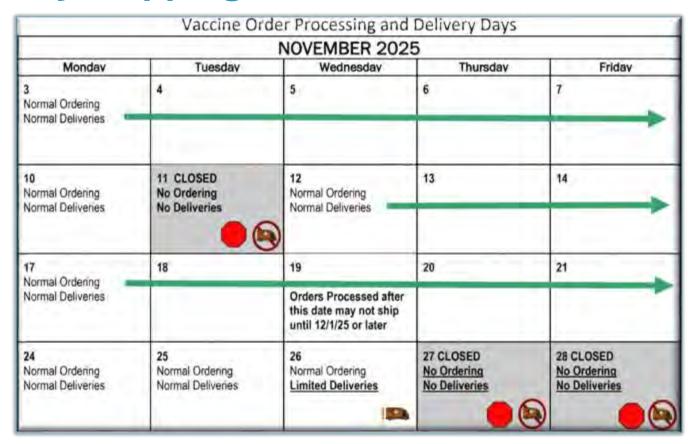
Washington State Department of Health

CVP and AVP Holiday Shipping Calendar

- Please be mindful of shipping delays, limited or no shipping days, and plan your vaccine orders accordingly.
- Ensure your accountability reports are up to date prior to placing orders to ensure expedited processing.
- Update your shipping hours in your provider agreement if needed.
- Check out the <u>holiday shipping calendar</u> on our website for more information.

Reminder: DOH Offices will be closed Tuesday, November 11th.

See Vaccine Blurbs & AVP Newsletter for more details



Washington State Department of Health

DOH Affirms WCHA Vaccine Recommendations

Protect infants with either prenatal RSV vaccine or infant dose of nirsevimab or clesrovimab.

DOH affirms the West Coast Health Alliance (WCHA) respiratory vaccine recommendations that were previously announced for the 2025-2026 season.

These recommendations have been reviewed and are supported by the Washington Vaccine Advisory Committee.



Age/Condition	COVID-19	Influenza	RSV
Children	 All 6-23 months All 2-18 years with risk factors or never vaccinated against COVID-19 All who are in close contact with others with risk factors¹ All who choose protection¹ 	All 6 months and older	All younger than 8 months ² All 8-19 months with risk factors
Pregnancy	All who are planning pregnancy, pregnant, postpartum or lactating	All who are planning pregnancy, pregnant, postpartum or lactating	32-36 weeks gestational age ²
Adults	 All 65 years and older All younger than 65 years with risk factors All who are in close contact with others with risk factors All who choose protection 	• All	All 75 years and older All 50-74 years with risk factors

IMM-1481 (9/15/25)

Washington State Department of Health

RSV Vaccine Ordering Open in the IIS

- We are still asking providers to advertise excess doses and for providers in need of product to regularly check the advertisements before placing an order.
- Orders will be processed weekly on Wednesdays
- Orders must be in "Pending State Approval" status in the IIS by close of business Tuesday
- Please allow at least 3 days for accountability checks and order approval.
- **Flexible ordering:** Respiratory product orders can be placed anytime and as often as needed.

See full announcement and additional details here:

Vaccine Blurbs #261: RSV
Vaccine Ordering Open
Today

Ordering and Inventory Controls Training:

PDF | FAQ
Zoom Webinar Recording



For Office of Immunization Updates

- Please check the <u>Tribal Resources PartnerHub</u> page for Office of Immunization updates
- If you would like to be added to the OI Liaison emailing list and to PartnerHub, please email jessica.haag@doh.wa.gov





WWW.DOH.WA.GOV



Mobile Health Services:

- Naloxone (Narcan) Distribution
- Blood Pressure Screening
- BP Management Education
- A1C & Blood Glucose Screening
- Pre-Diabetes, Prevention, & Diabetic Management Guidance
- BMI Screening
- Nutritional Counseling
- No Cost Telehealth Referral
- Mental Health Screening
- Local Health Insurance Enrollment Specialists
- Dental Service
- Vision Testing

Care-A-Van is ready to provide excellent mobile healthcare in your community!

- As of 7/1/25, Care-A-Van is fully operational and continuing to expand it's health and social care services, with a special focus on underserved communities.
- We currently do not provide immunizations, but we are exploring partnerships to offer vaccines again soon.
- We are always looking for new partners and more event opportunities. Please contact us to discuss collaborating together at care-a-van@doh.wa.gov.



Community Events:

- Insurance Is Not Required
- All Ages Welcome
- Walk-up Service
- No cost for event or services
- We bring staff and equipment to create accessible pop-up clinics.

Request a clinic or review upcoming events doh.wa.gov/careavan to find one near you.

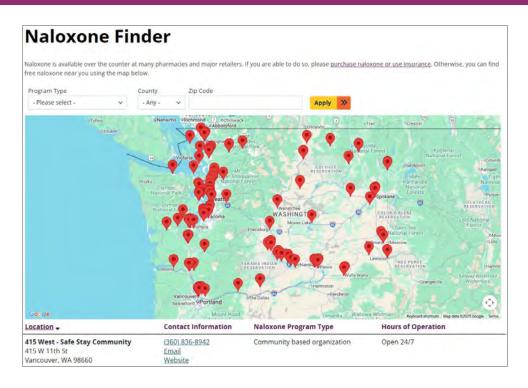


DOH Naloxone Finder Tool

The <u>Naloxone Finder</u> is now hosted on the DOH website, making it easier for the public to find **free** naloxone in their area.

Map data is from organizations that provide free naloxone to the public

If your organization provides access to free naloxone, list your program on this website by <u>completing this form.</u>



Flyers and Handouts for awareness and use of the Naloxone Finder:

- Find Free Naloxone Near You 8.5x11 Flyer
- Find Free Naloxone Near You 5.5x8.5 Handout 2UP

WA Telebuprenorphine Hotline

The WA Telebuprenorphine Hotline (Telebupe) is expanding and will be statewide by early 2026.

The hotline, run through UW
Department of Emergency
Medicine, provides low-barrier
access to buprenorphine, a
medication for opioid use disorder.

Statewide Expansion



Learn more through the <u>Telebupe Introductory Webinar Recording</u>

Tribal Health Resources on the Partner Hub

Washington State Department of Health

The <u>Tribal Health Resources</u>
page is a dedicated space within
the <u>The Partner Hub</u>, designed to
support Tribal health partners in
easily finding and accessing Dep
artment of Health information,
meetings, training, and tools that
are most relevant to your work
and communities.

To register for access to The Partner Hub, visit the website and click "Request Access" or email Partner Hub@doh.wa.gov to request access.

Washington State Department of HEALTH



As part of the broader

Partner Hub, the Tribal

Health Resources page

reflects the priorities of

Tribal Leaders across WA. It

supports a stronger, more

resilient, and better
connected public health

system.

<u>The Partner Hub</u> is designed to:

- Connect our Tribal partners with relevant information.
- Serve as a central location to find DOH resources, meeting information, program sites, and more.
- Host relevant public health training.

The Partner Hub

doesn't replace one-on-one interactions with
Department of Health. If you would like to connect with
DOH leaders, staff, or resources, reach out to us!

Let us know what you would like to see on the Tribal Health Resources page!

Are you a Governmental Public Health System Partner?
Register for The Partner Hub by visiting the website or emailing PartnerHub@doh.wa.gov

WA-DOH Tribal Attestation

As you know, based on <u>Substitute House Bill 2075</u>: Concerning licensing of Indian health care providers as establishments and the 2024 amendment to begin issuing Residential Treatment Facility (inpatient facility) and Psychiatric hospital licensure through tribal attestation by July 1, 2025 – WA-DOH held a series of Tribal listening sessions and workshops to establish the fees and update forms and resources. This work has been completed!

DTLL: <u>DTLL-RTF-PsychiatricHospitalTribalAttestationFeeRulemakingHearing.pdf</u>

<u>Tribal Attestation | Washington State Department of Health</u>

<u>Facilities New, Renew or Update | Washington State Department of Health</u> – Tribal Attestation is linked under "T" on this page.

<u>Applications and Forms | Washington State Department of Health</u> – This is the BHA application and Forms webpage.

BHA License Requirements | Washington State Department of Health

Apply for a License as a RTF | Washington State Department of Health

Apply for a Private Psychiatric Hospital License | Washington State Department of Health



FIFA 2026 Locations

Canada – 2

Mexico – 3

United States – 11





FIFA Fan Zones: Designated areas outside of stadiums, or in other locations, where fans can gather to watch World Cup matches on large screens, participate in themed activities, enjoy food and entertainment, and experience the excitement of the tournament.

FIFA Team Base Camps: Designated locations where national teams reside and train during the FIFA World Cup.

FIFA

International Federation of Association Football





Statewide 2026 FIFA World Cup Surveillance Workgroup



- Bi-monthly meeting for epidemiologists for epidemiological investigation or data collection to collaborate on public health surveillance during the 2026 FIFA World Cup
 - Share information
 - Discuss key topics
 - Develop and provide feedback on tools, resources, and procedures
- 2nd & 4th Tuesdays of each month, 2-3pm
 - 2nd Tuesday: <u>Meeting Link</u>
 - 4th Tuesday: <u>Meeting Link</u>

If you have any questions, you can reach Emily Laskowski, CSTE Applied Epidemiology Fellow in the Office of Communicable Disease Epidemiology

at <u>Emily.laskowski@doh.wa.gov</u>, Kacey Ingalls <u>Kacey.Ingalls@doh.wa.gov</u> and Michelle Holshue <u>michelle.holshue@doh.wa.gov</u>.

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FIFA Public Health & Medical SME Workgroup





- FIFA Public Health & Medical Subject Matter Experts Workgroup
- Monthly on the 3rd Wednesday at 9am



Washington State Department of

HEALTH

Office of Tribal Public Health & Relations

OTPHR@doh.wa.gov

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To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.



Questions



Comments