



2026 VPDCP Office Hours

**January Session:
Respiratory Season Insights and Vaccine Program
Updates**

Vaccine Preventable Disease Control Program
Los Angeles County Department of Public Health

January 7, 2025

Housekeeping



All participants are muted during the presentation.



This session is being recorded.



Slides used in today's presentation and the recording will be posted on [VPDCP Provider Information Hub](#) shortly after the Office Hours



Submit questions in the chat or raise your hand and we will unmute you. Questions will be answered at the end of the presentation.



If you experience technical issues, check your computer audio configuration, try refreshing your browser or re-joining the webinar again.

Announcements

January is Cervical Health Awareness Month



Cervical Cancer Prevention:

Vaccination:

- Previous recommendations for HPV vaccine series were to start at ages 11-12 years
- [AAP recommends](#) starting series between ages 9 and 12 years

Regular Screening:

- Pap test starting at age 21

Resources:

- [National Cervical Cancer Coalition](#)
- [LACDPH Teen Vaccines](#)
- [CDPH HPV Resources](#)

2026 VPDCP Office Hours

Description: Monthly Office Hours hosted by the Los Angeles County Department of Public Health's Vaccine Preventable Disease Control Program (VPDCP) provide VFC providers and immunization partners with timely updates on immunizations. Each session covers rotating topics relevant to Los Angeles County, offering guidance, resources, and opportunities for discussion with VPDCP staff.

First Wednesday of the month

12:00 – 1:00 pm

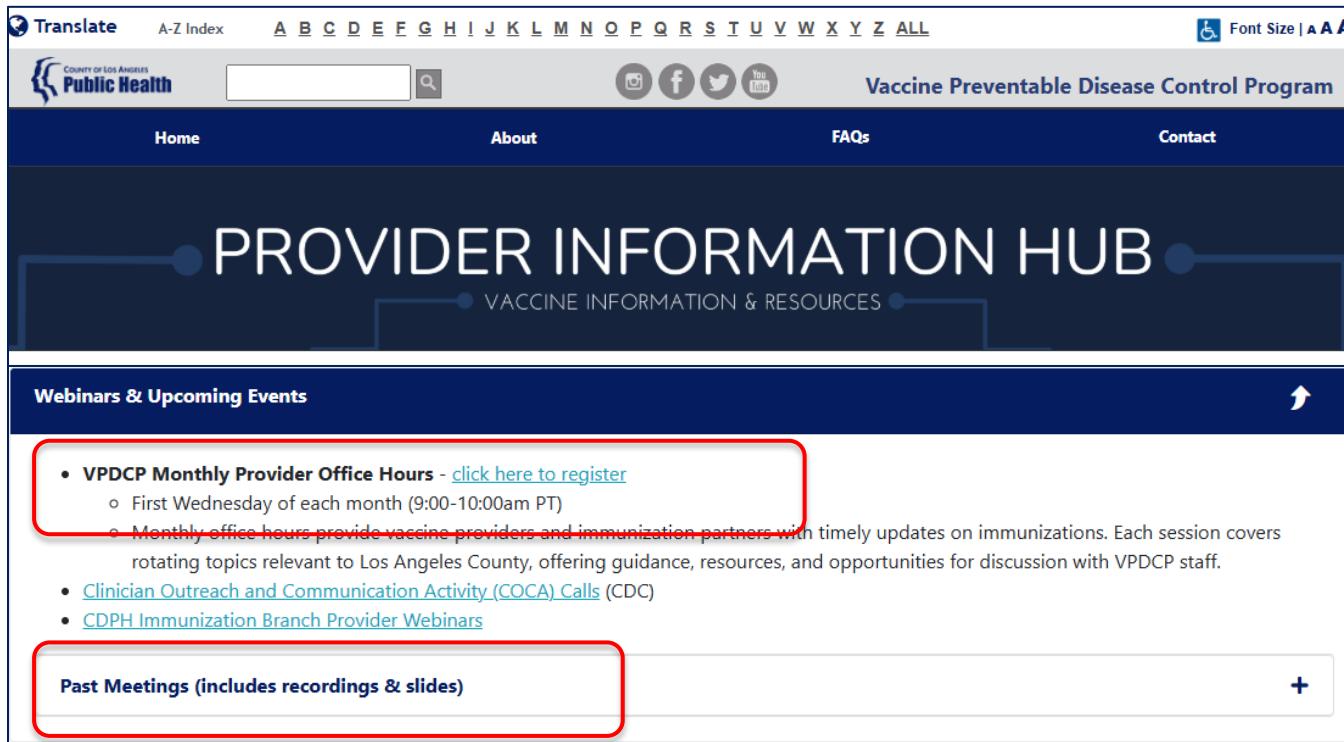
[Registration link](#)

Reminders



Forward

Please share the registration information for the future sessions with your colleagues.



The screenshot shows the VPDCP website with a dark blue header. The header includes links for Translate, A-Z Index, and Font Size. It also features the County of Los Angeles Public Health logo, a search bar, and social media icons for Instagram, Facebook, Twitter, and YouTube. The main title 'Vaccine Preventable Disease Control Program' is displayed. Below the header, a large banner reads 'PROVIDER INFORMATION HUB' and 'VACCINE INFORMATION & RESOURCES'. The 'Webinars & Upcoming Events' section contains the following list:

- **VPDCP Monthly Provider Office Hours** - [click here to register](#)
 - First Wednesday of each month (9:00-10:00am PT)
 - Monthly office hours provide vaccine providers and immunization partners with timely updates on immunizations. Each session covers rotating topics relevant to Los Angeles County, offering guidance, resources, and opportunities for discussion with VPDCP staff.
- [Clinician Outreach and Communication Activity \(COCA\) Calls \(CDC\)](#)
- [CDPH Immunization Branch Provider Webinars](#)

Below this section is a box labeled 'Past Meetings (includes recordings & slides)' with a '+' icon to its right. The entire list of events is highlighted with a red border.



Agenda

Respiratory Viruses & Influenza Subclade K	<i>Annabelle de St. Maurice, MD</i>
Navigating Recent Changes in the Vaccine Landscape Hepatitis B – First Dose Recommendations	<i>Nava Yeganeh, MD</i>
2026 Recertification Update	<i>Jerusalem Theodros</i>
VFC flu pre-book	<i>Jerusalem Theodros</i>
Quick Poll	<i>All attendees</i>
Q&A session	<i>All panelists</i>

LA County Public Health Influenza Updates

Annabelle de St. Maurice MD MPH

Associate Professor

Unit Director, Community Outbreak Team and Syndromic
Surveillance Team

January 6, 2026 | 2 min read

 Add Us On Google

This Year's Flu Season Just Surpassed a Grim New Record

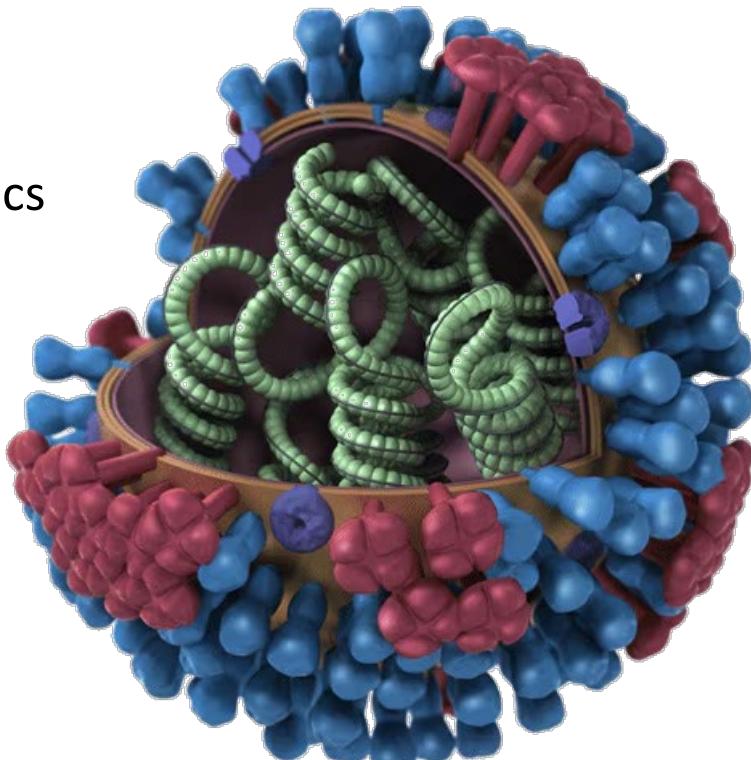
Almost one in 10 people who visited a doctor in the U.S. in the week ending on December 27 were there for flulike symptoms, according to new data

BY JACKIE FLYNN MOGENSEN EDITED BY CLAIRE CAMERON



Influenza

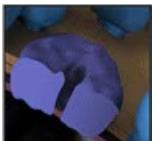
- 4 types of influenza viruses
 - A, B, C and D
 - A and B cause seasonal epidemics of disease in people
- Influenza A
 - the only flu virus to cause pandemics
 - divided into subtypes based on hemagglutinin (H) and neuraminidase (N)
 - 18 different H subtypes and 11 different NA subtypes



Hemagglutinin



Neuraminidase



M2 Ion Channel

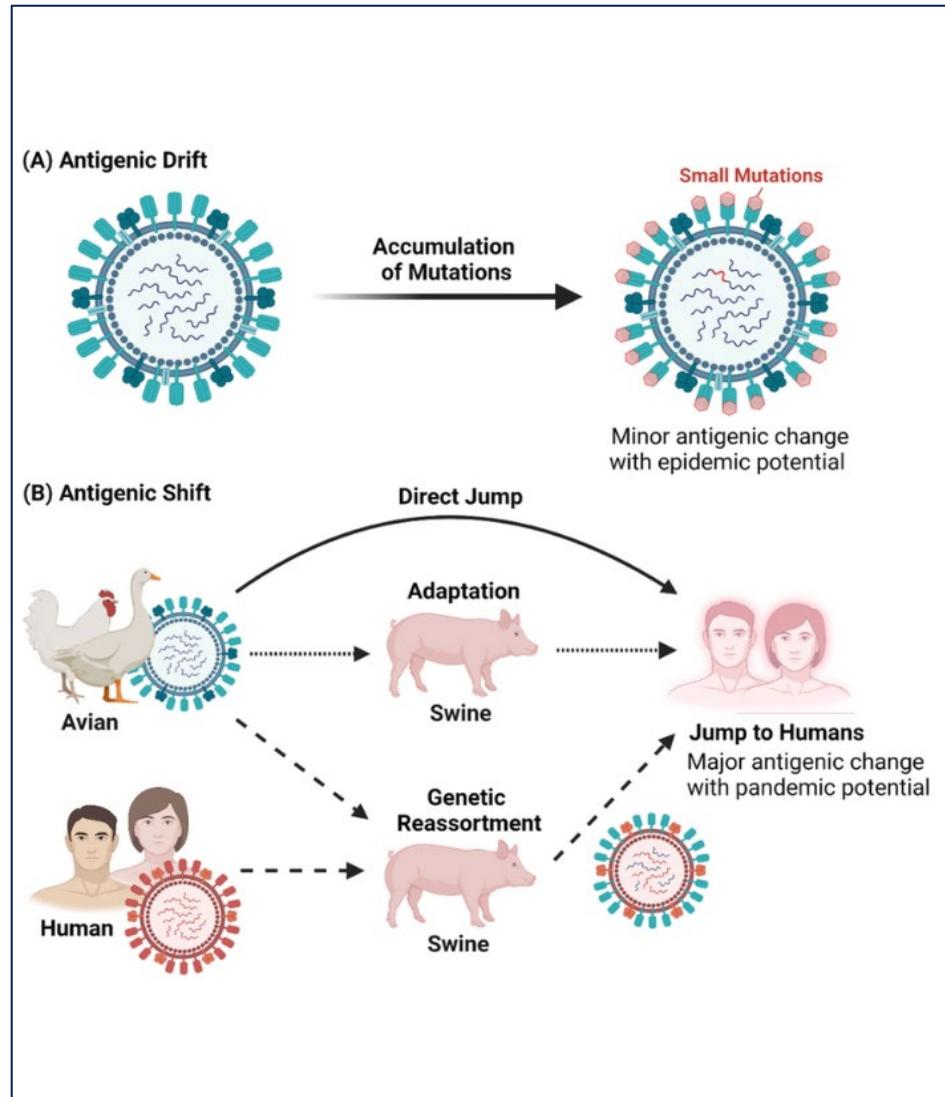


RNP

Influenza H3N2 Subclade K

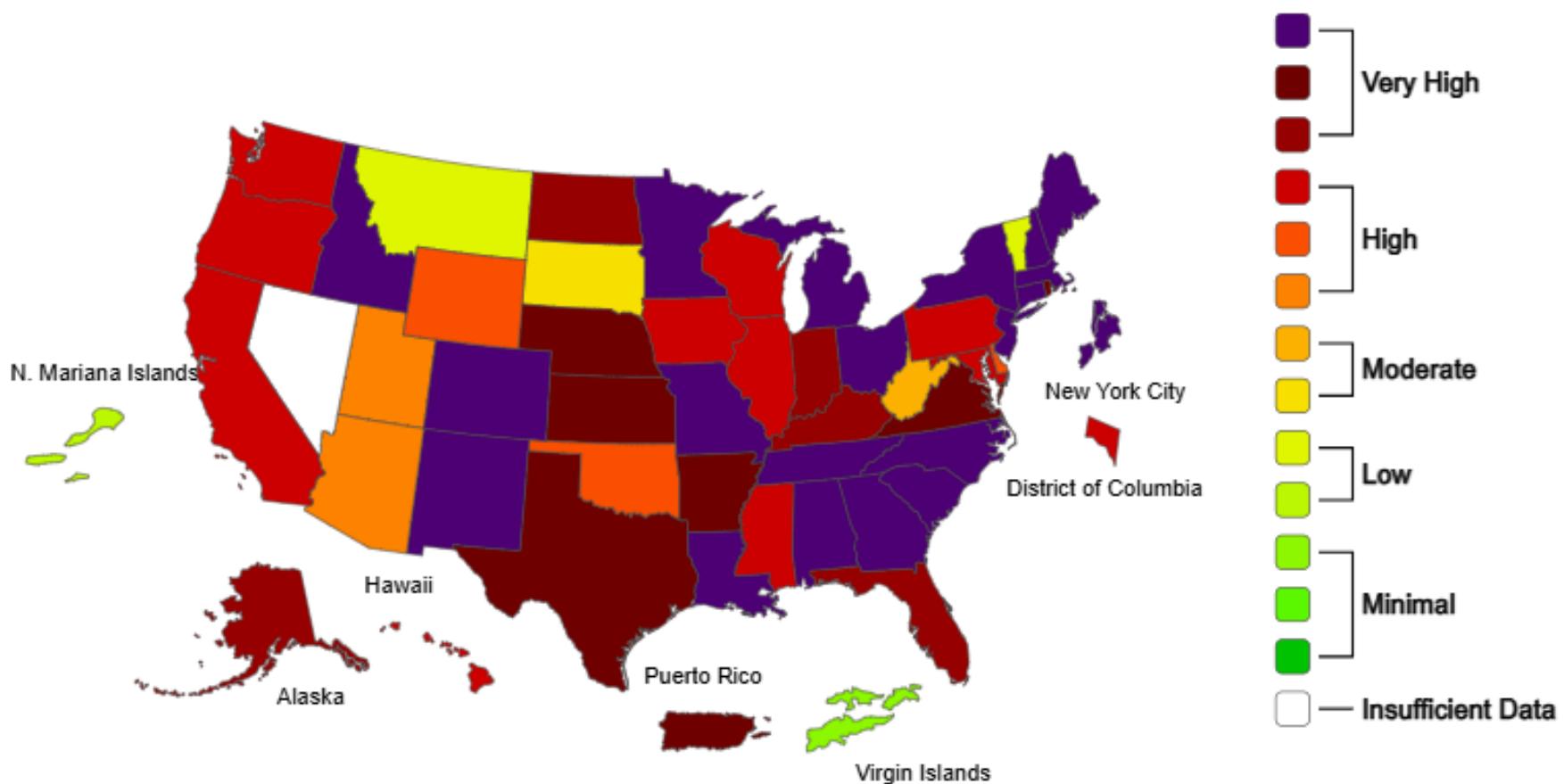
- During COVID-19 pandemic there was minimal change in influenza strains
- **Subclade K** is an example of antigenic drift
- UK study demonstrated effectiveness against influenza-associated hospitalizations
 - 72-75% for children age 2-17 years
 - 32-39% for all adults

<https://PMC12639273/>



National flu data

2025-26 Influenza Season Week 52 ending Dec 27, 2025



ACDC A-Z Index Disease Reporting & Information Toolkits Additional DPH Programs



RESPWatch

Respiratory Illness Surveillance

Los Angeles County Department of Public Health

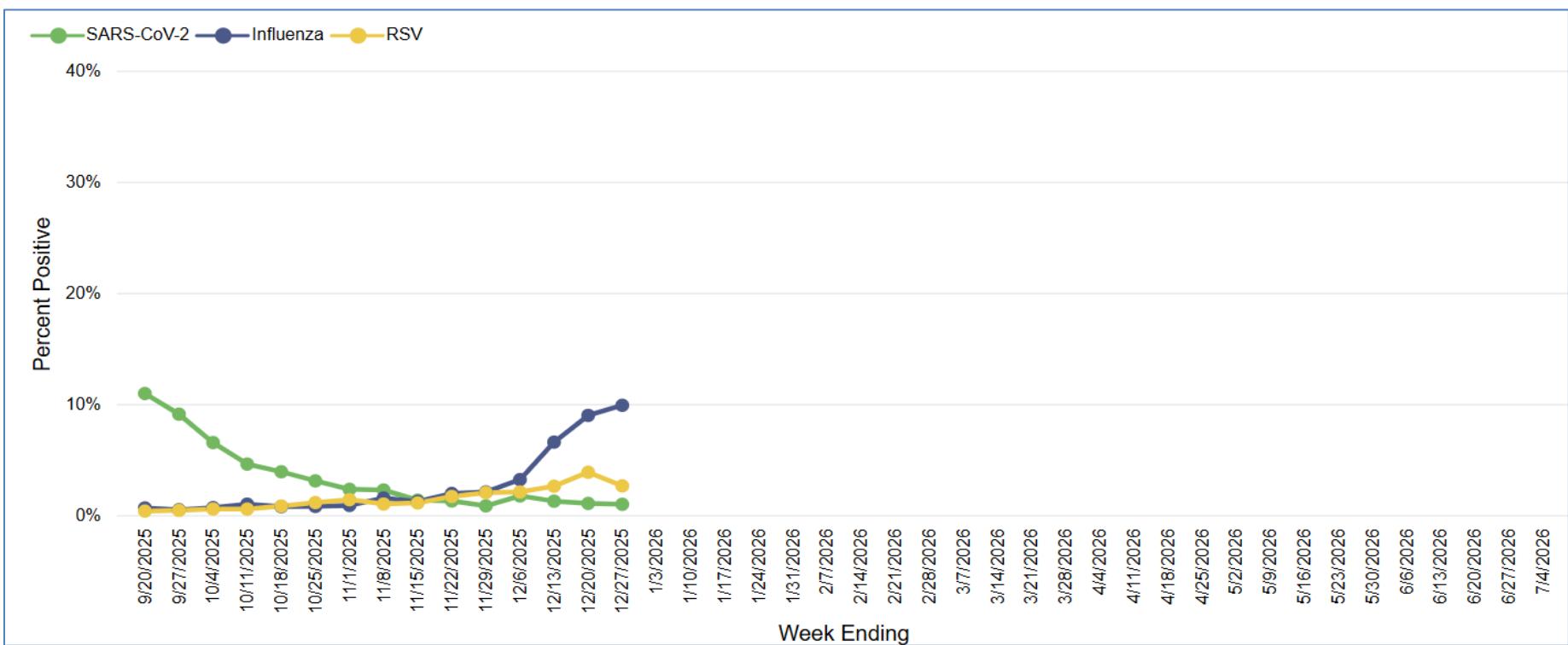
- One stop surveillance information for respiratory viruses circulating in Los Angeles County
- Updated on a weekly basis

MMWR Week:52
Ending on: 12/27/2025

Respiratory Surveillance At-A-Glance

Virology Percent Positivity at LAC Sentinel Laboratories			Illness Emergency Department Visits	Severity Viral Respiratory Deaths
Influenza ↗ 9.9% <i>Increasing</i> Low	COVID-19 ↗ 1.0% <i>Stable</i> Low	RSV ↘ 2.6% <i>Decreasing</i> Low	Percent of ED Visits for Influenza-like Illness ↗ 6.8% <i>Increasing</i> Low	Pneumonia, influenza, or COVID-19 accounted for 10.5% of deaths registered in LAC in MWWR Week 51 . Since the start of the 2025-2026 respiratory season, 3 influenza-coded deaths and 66 COVID-coded deaths have been identified through death certificate data.

Percentage of Specimens Testing Positive by Viral Etiology, Los Angeles County Sentinel Surveillance Laboratories, 2025-26 Influenza Season



RESPWatch



Flu Vaccines

Vaccination is especially important for people at higher risk to prevent getting very sick with the flu.

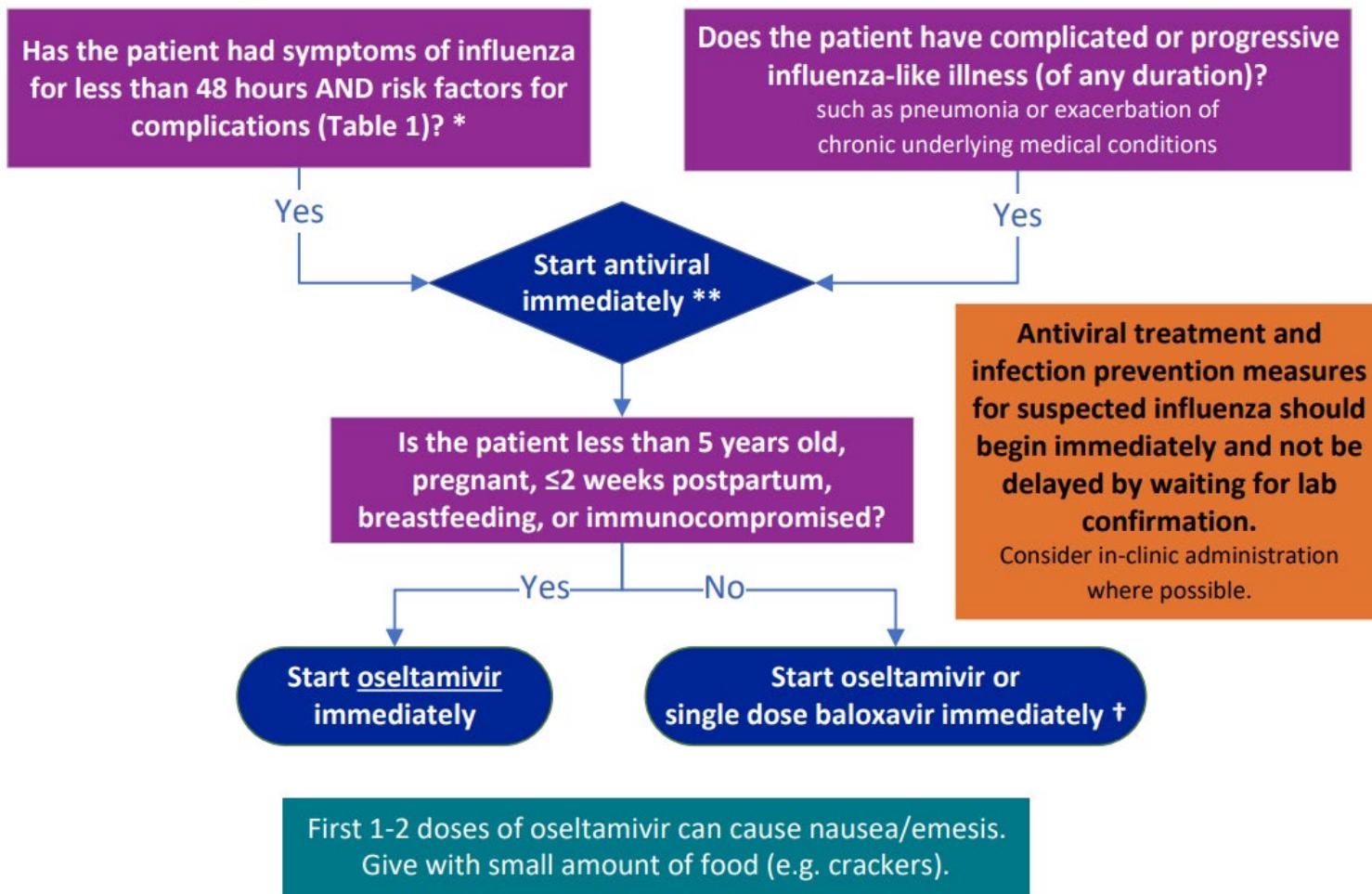
- Everyone 6 months and older is recommended to get a flu vaccine **every season.**
- Many flu vaccine options
 - For people 65 years and older high dose influenza vaccine is recommended
 - Children less than 8 years of age may need more than 1 dose of flu vaccine depending on the number of doses they have received in the past.

Influenza Testing

- Antigen testing:
 - Rapid
 - Inexpensive
 - Can be done at home
 - **Lower sensitivity/false negative**
 - Do not provide subtype
- Nucleic Acid detection/Molecular:
 - **Higher sensitivity**
 - More expensive
 - May have longer turn around time



Don't Delay, Start Antiviral for Suspected Influenza Immediately



Resources

- LAHAN: <http://publichealth.lacounty.gov/eprd/lahan/alerts/CAHANInfluenza010526.pdf>
–Influenza Health Alert
- CDC COCA
Call: https://www.cdc.gov/coca/hcp/trainings/seasonal_influenza_2025-2026.html
–CDC review of testing, prevention, and treatment recommendations



Year in Review for Vaccines

Nava Yeganeh, MD MPH

Medical Director

Vaccine Preventable Disease Control Program



February

April

May

June

August

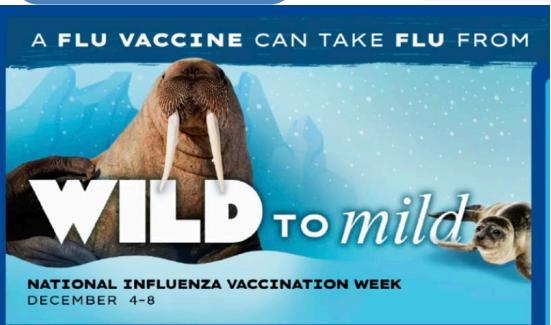
HHS halts
vaccine
education
campaign

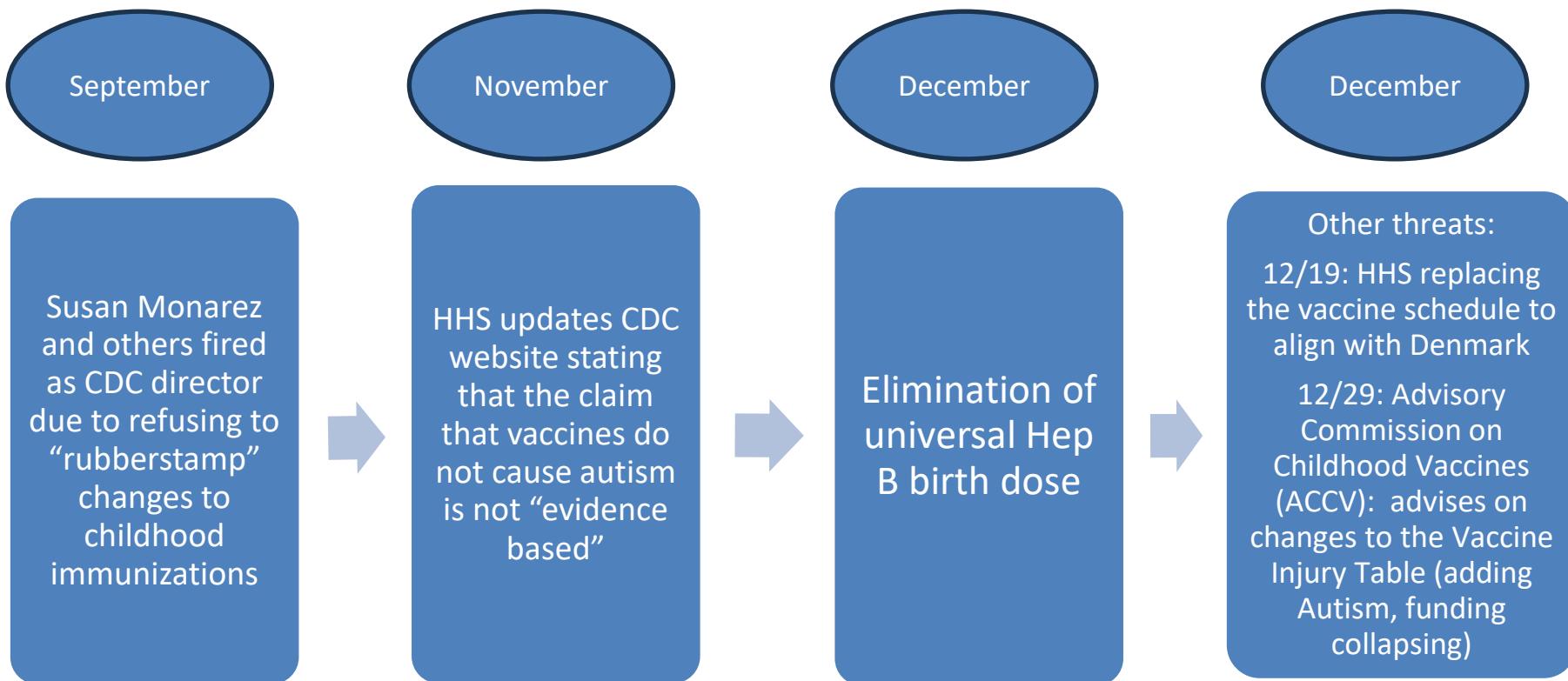
Announces
that Mr.
Grier will
conduct
study
“examine
link
between
vaccines
and
autism”

HHS
changes
CDC COVID-
19 vaccine
recs without
transparenc
y

Removes members
from ACIP for
“conflicts of
interest”, appoints
new members.
New members less
expertise, many
expressing anti-
vaccine sentiment.
ACIP meetings no
longer lead by
scientists with an
expertise in
vaccines, but by
known anti-vaccine
advocates.

\$500 million
grant
funding for
mRNA
vaccine
research
(pandemic
response)
cut





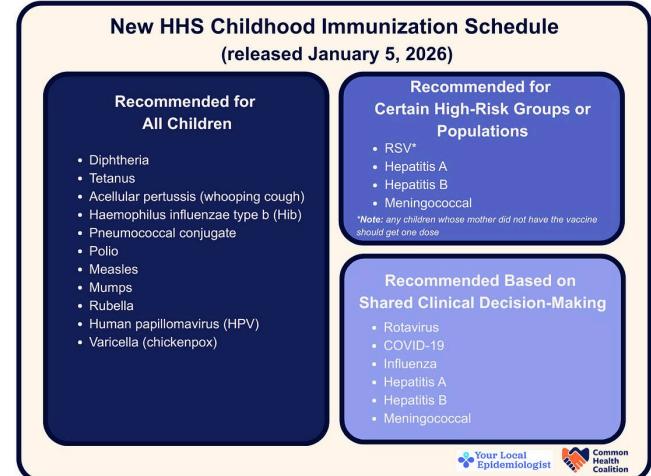
KEY POINTS

- The claim "vaccines do not cause autism" is not an evidence-based claim because studies have not ruled out the possibility that infant vaccines cause autism.
- Studies supporting a link have been ignored by health authorities.
- HHS has launched a comprehensive assessment of the causes of autism, including investigations on plausible biologic mechanisms and potential causal links.





- On December 5, 2025, via a [Presidential Memorandum](#), President Trump directed the Secretary of HHS and the Acting Director of CDC to examine how peer, developed nations structure their childhood vaccination schedules
 - Denmark protects against 10 diseases, Germany 15, and Japan against 14
 - Well-funded universal health care system and family support
 - Eg: Denmark has 46 weeks of maternity leave and 100% of pregnant persons receive prenatal care
- No input by CDC or outside subject matter experts
- No transparent review of disease epidemiology, disease burden, or modeling of outcomes.
- On January 5th, CDC acting director (not a health professional, not yet confirmed by congress) signed this unilateral decision to change schedule





Consequences:

- Increase in vaccine preventable diseases
 - Pertussis and measles resurgence, loss of measles elimination status
- False or misleading information and confusion given prominent stage by politicians
 - Barrage of front-page news suggesting science backed interventions (eg acetaminophen, vaccines) are “dangerous” and unstudied medical interventions (leucovorin, vitamin A) should be recommended
 - Increased burden on the medical community to address these concerns, especially those taking care of children and pregnant persons/women’s health
- ACIP and CDC vaccine recommendations changed despite dearth of science or transparency (removal of thimerosal, MMRV not recommended for children <4, new vaccine schedules)
- CDC experts dismissed or sidelined in important vaccine policy decisions.
 - “The CDC cannot be trusted as a source. It’s a weapon.” --Demetre Daskalakis (former Director of the CDC’s National Center for Immunizations and Respiratory Diseases.)



Rays of hope

- State vaccine coalitions formed to coordinate and promote science-based immunization guidance:
 - West Coast Health Alliance (CA, OR, WA, HI)
 - Northeast Public Health Collaborative (CT, DE, MA, MD, NJ, NY, PA, RI)
- Third party orgs conducting independent review of vaccines
 - Vaccine Integrity Project
 - The Evidence Collective
- Professional Organizations have published vaccine schedules based on science (AAP, AAFP, ACOG)

DECEMBER 2, 2025

Universal Hepatitis B Vaccination at Birth

Safety, Effectiveness, and Public Health Impact

An independent evidence review of the safety, effectiveness, and public health impact of universal hepatitis B vaccination at birth to compare current recommendations with a delayed first hepatitis B vaccine dose at one month or more after birth.

Why is the hepatitis B birth dose so important?

Because many people with hepatitis B **don't know they have it at first.**



California's stance on vaccines remain unchanged

CDPH Immunization Recommendations



Vaccines for All

The California Department of Public Health (CDPH) is committed to improving the health and wellness of all Californians including by ensuring continued access to life-saving immunizations.

CDPH stands by science and is committed to ensuring Californians have access to safe, effective vaccines.

Recent changes in national vaccine guidelines have caused confusion on who should get vaccines and when. CDPH bases [recommendations for vaccines](#) on guidelines from trusted medical professional organizations.

The trusted medical groups include the following:

- [The American Academy of Pediatrics \(AAP\)](#)
- [The American College of Obstetricians and Gynecologists \(ACOG\)](#)
- [The American Academy of Family Physicians \(AAFP\)](#)

California has joined the [West Coast Health Alliance](#) (WCHA) to increase consistency of recommendations across states and increase public confidence.

- On September 17th, 2025, California Governor Newsom signed [Assembly Bill \(AB\) 144](#):
 - Shifts from the State's reliance on CDC's Advisory Committee for Immunization Practices (ACIP) to the California Department of Public Health (CDPH) for setting vaccine recommendations.
- CDPH recommended vaccines must be [covered by California Health Plans](#), including [Medi-Cal managed care plans](#).
- Liability protection to providers who administer vaccines based on CDPH recommendations.
- Allows pharmacists to independently initiate and administer immunizations recommended by CDPH.



Concerns for 2026

- Federally funded programs including Vaccine for Children's program and the National Injury Compensation Program are unchanged for now but may become future targets.

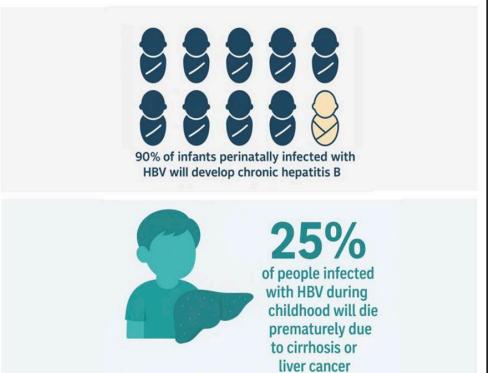
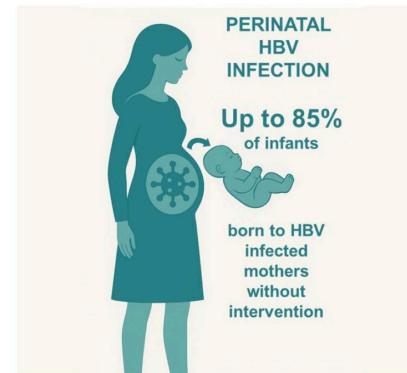


Hepatitis B Birth Dose



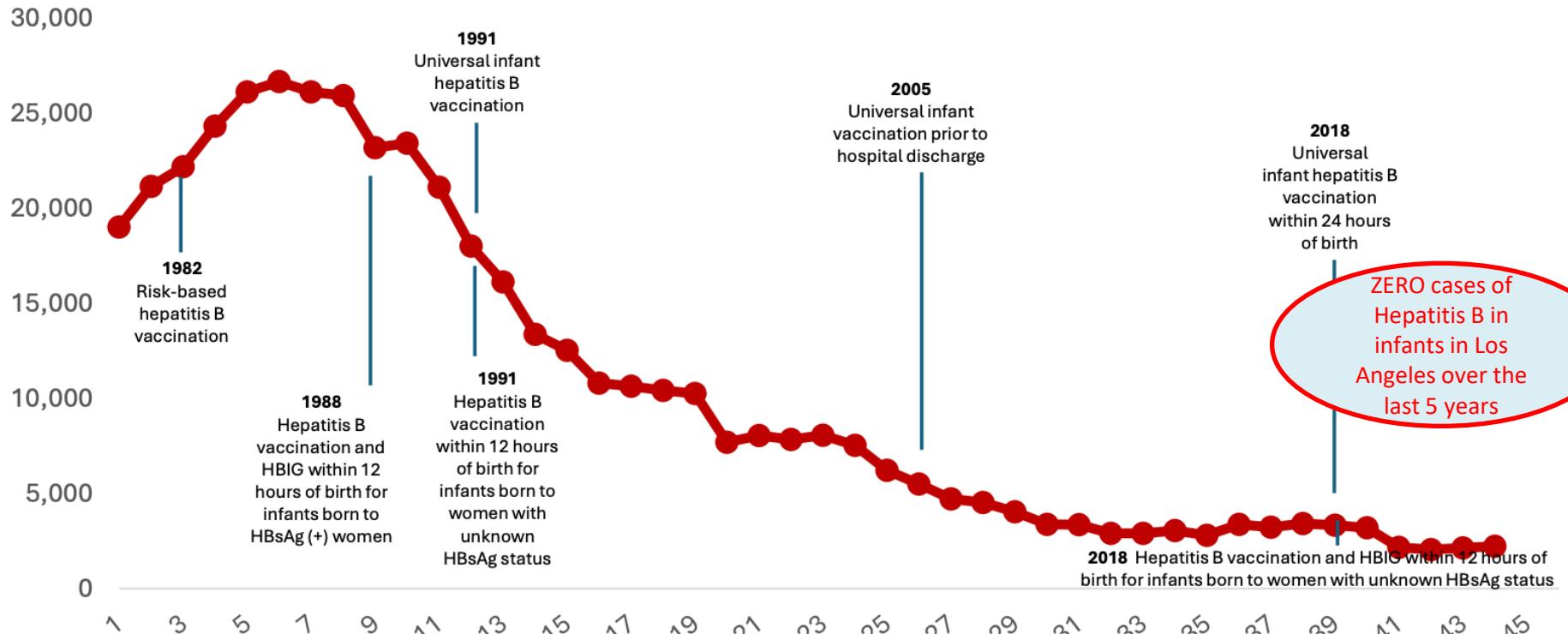
Background:

- Hepatitis B virus infection in children occurs predominantly through maternal-infant transmission
 - Pregnancy, labor, and delivery
 - Postnatal transmission primarily through household contacts and caretakers.
- Without prophylaxis at birth:
 - Approximately 90% of newborns infected perinatally will develop chronic hepatitis B infection
 - 25% of those with chronic infection will die prematurely from chronic liver disease, including cirrhosis and hepatocellular carcinoma



Universal Vaccination of Infants Recommended in 1991

Reported cases of acute hepatitis B and key ACIP vaccination recommendations among infants, United States, 1980-2023



HBIG = Hepatitis B immune globulin; [CDC NNDSS Viral Hepatitis Surveillance](https://www.cdc.gov/hepatitis/php/statistics-surveillance/index.html) (<https://www.cdc.gov/hepatitis/php/statistics-surveillance/index.html>);

*From 1991-2010 all case classifications included (i.e., confirmed, probable, suspect, unknown); from 2011-2023 only confirmed cases included
 Bixler D, Roberts H, Panagiotakopoulos L, Nelson NP, Spradling PR, Teshale EH. Public Health Rep. 2023 Jun 9



Gaps in Care

- More than 17,000 infants are born annually to women with HBV
 - 18% of pregnant women do not receive hepatitis B testing
 - 35% of women who test positive receive all recommended follow-up care.
- Delaying the first dose leaves infants vulnerable to both undiagnosed maternal infection and HBV exposure after birth.

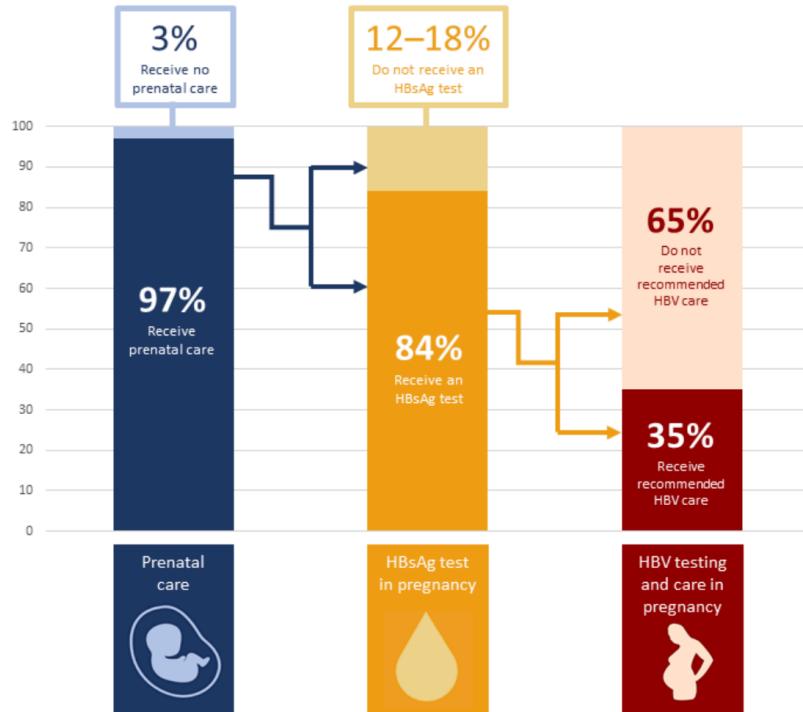


Figure 2: Continuum of care for prenatal HBV screening and care of pregnant women before and after delivery.

Approximately 35% of those who test positive for HBsAg in pregnancy receive recommended follow-up HBV testing and care; 65% do not receive recommended follow-up and care.

Abbreviations: HBsAg: hepatitis B surface antigen; HBV: hepatitis B virus

Sources: [Ayoola 2010](#), [Holcomb 2021](#), [McElfish 2025a](#), [Kolasa 2017](#), [Harris 2018](#), [Pham 2023](#)



Hepatitis B birth dose vaccination and immune globulin (HBIG) substantially reduce the risk of mother-to-child transmission.



HEPATITIS B
BIRTH DOSE
VACCINATION
Reduces
mother to
child transmission
~75%



HBIG
Reduces
mother to
child transmission
~71%



HBIG +
BIRTH DOSE
VACCINATION
Reduces
mother to
child transmission
~94%

EARLIER BIRTH DOSE VACCINATION HAS GREATER EFFECTIVENESS

Setting	Time after birth vaccinated	Number of Children	% HBsAg+
Palau	> 3 days	30	6.7%
	≤ 3 days	323	0.6%
Micronesia	> 3 days	78	2.6%
	≤ 3 days	217	0.0%
Indonesia	> 7 days	656	3.0%
	≤ 7 days	1717	1.4%

Schillie S. MMWR Recomm Rep. 2018; Beasley RP et al. Lancet. 1983; Lee C et al. 2006; Beasley RP et al. 1977; Armstrong GL. Pediatrics. 2001; Mahoney. Pac Hth Dialog 1996; Ruff TA. The Journal of Infectious Diseases. 1995

*Image(s) generated by ChatGPT 5.0 (OpenAI), August 2025. Content originated as data from scientific publications and was transformed into an image via text prompts



Hepatitis B Vaccine

- September 19th, ACIP met to discuss the hepatitis B vaccine. Presentations were given by CDC subject matter experts
- Vote to delay hepatitis B vaccine birth dose
- On December 5th, 2025, ACIP met again to discuss delaying hepatitis B vaccine birth dose.
 - CDC subject matter experts attended but did not present. Alternative speakers were chosen.
 - Risks of hepatitis B vaccine at birth presented were largely speculative in nature
 - Very little data shown—mostly opinion that the 1991 recommendation was erroneous and that we should align with Denmark's schedule



Votes passed

- **Vote 1:** For infants born to HBsAg-negative women, ACIP recommends individual-based decision making to give HBV vaccine, including birth dose. For those not receiving, it is suggested that the initial dose is administered no earlier than 2 months of age. (adopted by CDC Acting Director)
- **Vote 2:** The use of serology testing to evaluate the need for subsequent HBV vaccine doses
- **Vote 3:** Updated VFC resolution



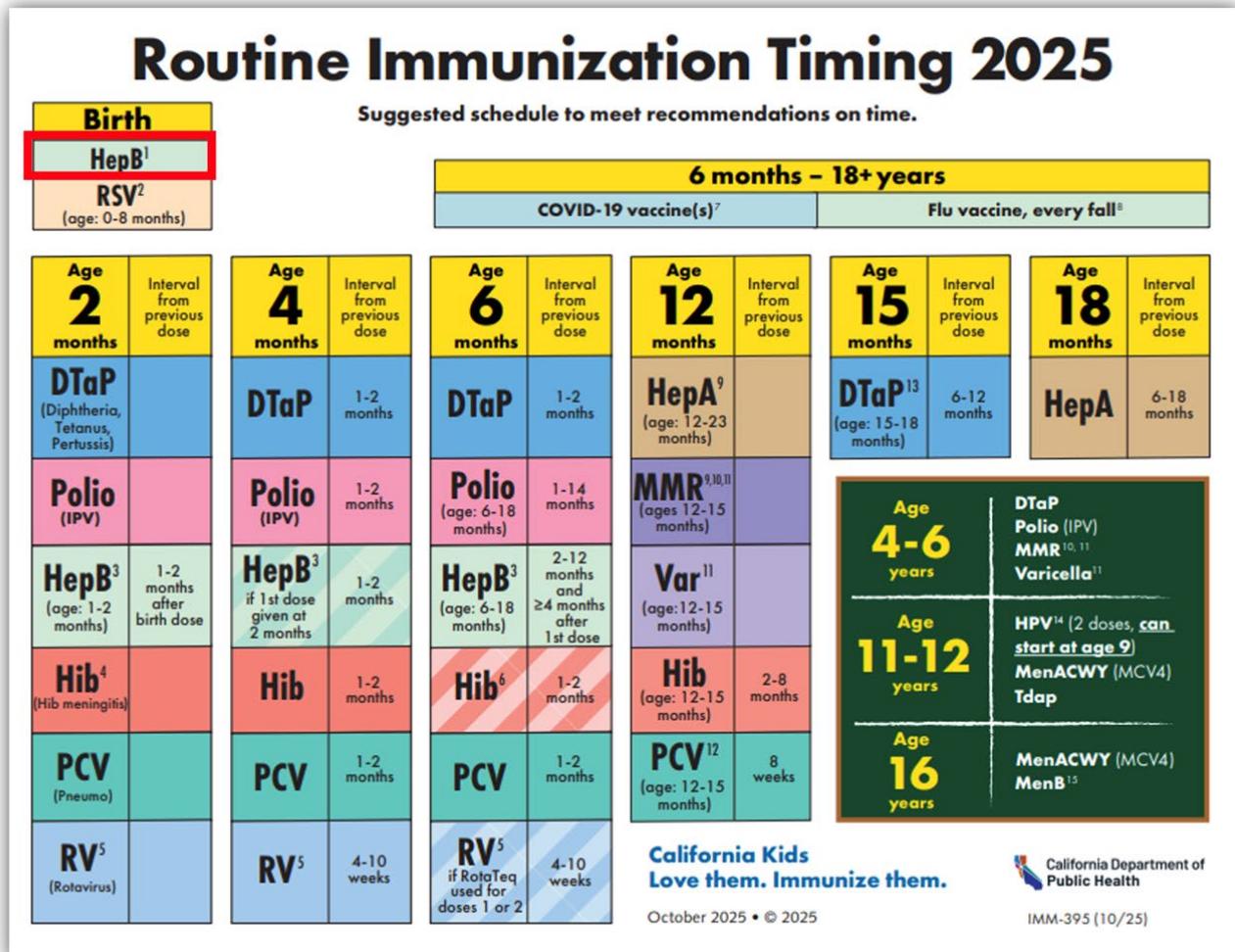
LA County DPH:

- We align with recommendations from the California Department of Public Health, the [West Coast Health Alliance](#), the [American Academy of Pediatrics \(AAP\)](#), the [American College of Obstetricians and Gynecologists \(ACOG\)](#), and the [American Nurses Association](#) to continue to strongly recommend that providers routinely offer and administer the first dose of the hepatitis B vaccine to all eligible newborns at birth.
- We continue to update and produce materials and trainings for healthcare professionals — such as provider FAQs, immunization schedules, and clinical guidance — so that providers are confident in recommending and administering the first dose of the vaccine at birth.



IMM-395 Routine Immunization Timing Chart

¹Monovalent HepB vaccine is recommended within 24 hours of birth for stable infants weighing ≥ 2 kg. For others, see schedule.





Resources

- LAC DPH Viral Hepatitis page—[Hep B](#)
- LACDPH Vaccine Preventable Disease Control Program:
[Perinatal Hep B](#)
- LACDPH Vaccine Preventable Disease Control Program:
[Hepatitis B page](#)
- [LACDPH Birth dose Hep B vaccine FAQ's](#)
- Press release: [LA County Public Health advisories reaffirming hepatitis B vaccine guidance.](#)



VFC Program Update

Jerusalem Theodros, MPH
Vaccine Program Management Unit



VFC, VFA, and LHD 317 Recertification

- Opened in mid-December and **will be due January 30, 2026.**
- Recertification is an annual program requirement to maintain providers' active status.
- If recertification is not submitted by the deadline, program location accounts will be suspended and eventually terminated from the program.
- [EZIZ Recertification Resources](#)



Recertification Trainings on EZIZ

- EZIZ recertification trainings can be accessed [here](#).
- Users who previously passed the 2025 recertification lesson and received a passing score on the pre-lesson quiz are eligible to test-out of lessons.
- To receive credit for the annual training requirement, complete lessons or test-out starting 12/01/25:
 - The lesson completion date on the EZIZ Learning History page must be 12/01/2025 or later.
- Ensure that your email address, First Name, and Last Name on your EZIZ training account and your myCAvax account match so that your lesson completion can be validated.
- New EZIZ training page in myCAvax allows providers to view staff training status for their location.



Recertification FAQ

Q: Who can access the recertification form in myCAvax?

Account status: Active, On Hold, Suspended (for all reasons except for mandatory corrective actions)

User Types: Primary, Backup, Additional and Organization Vaccine Coordinators

Q: Who needs to take the EZIZ training? Key staff only?

Yes, the Provider of Record, Provider of Record Designee, Vaccine Coordinator and Backup Coordinator must take the EZIZ trainings. If your clinic has an Additional Vaccine Coordinator or Organization Vaccine Coordinator, they are required to take the same lessons as the Primary Vaccine Coordinator as well.

Q: For locations that participate in multiple programs, will there be an option to recertify for all programs at one once?

Not at this time. There is information collected for each individual program location so there is no option to recertify all at once.



VFC Flu Pre-Book for 2026-27 Season

- Opens mid to late January and will be due in early February.
- Start discussing with your organization the flu products you anticipate needing for 2026 – 2027 season and the number of doses.
- Providers that don't pre-book are allocated doses based on remaining supply and will not have brand preference.



Navigating to the Dashboard

The screenshot shows the myCAvax dashboard interface. At the top, there is a navigation bar with links: Home, My Programs, My Turn (with a dropdown arrow), Vaccine Orders, Program Locations, and a 'More' dropdown menu. The 'More' menu is expanded, showing a list of options: Vaccine Inventory, Transfers, Returns and Waste, Excursions, Shipment Incidents, Enrollment, Recertification, Reports, Storage Units, Provider Locator, and Knowledge Center. A red arrow points to the 'More' dropdown menu. A red circle highlights the 'myCAvax Dashboard' link in the bottom right corner of the expanded menu. The main content area displays four program tiles: BAP (COVID-19 Vaccination Program), State General Fund (SGF), LHD 317, and VFC. Each tile has a 'Home', 'Order Vaccine', and 'Manage Locations' button. A 'Chat with us' button is located in the bottom right corner of the dashboard area.

myCAvax
California Vaccine Management System

Home My Programs My Turn Vaccine Orders Program Locations More 

Vaccine Inventory

Transfers

Returns and Waste

Excursions

Shipment Incidents

Enrollment

Recertification

Reports

Storage Units

Provider Locator

Knowledge Center

myCAvax Dashboard

Welcome

myCAvax Program Messages

BAP
COVID-19 Vaccination Program

Home Order Vaccine Manage Locations

STATE
General Fund Vaccine

State General Fund (SGF)

Home Order Vaccine Returns and Waste

LHD 317

VFC

Chat with us



myCAvax
California Vaccine Management System

Home My Programs My Turn Vaccine Orders Program Locations More

Program Selected:
Select program name

State General Fund
LHD 317
Vaccines for Children
COVID-19

For any BAP, SGF Flu, LHD-317, and VFA program or policy inquiries, contact us at:

✉ ProviderCallCenter@cdph.ca.gov
☎ (833) 502-1245
Mon-Fri
8AM to 5PM

For any VFC program or policy inquiries, contact us at:

✉ MyVFCvaccines@cdph.ca.gov
☎ (877) 243-8832
Mon-Thurs 9AM to 4:30PM
Fri 9AM to 4PM

For any technical difficulties, contact us at:

✉ mycavax.hd@cdph.ca.gov
My Turn:
✉ myturn.clinic.hd@cdph.ca.gov

Resources

Local Health Services
EZIZ
My Turn Administration
Join CAIR
Privacy Policy



Chat with us



Flu Dashboard

myCAvax California Vaccine Management System

Home My Programs My Turn Vaccine Orders Program Locations Vaccine Inventory More

 **VFC** Vaccines for Children - Dashboard

myCAvax Dashboard **Flu Ordering Dashboard** 

Refresh

Flu Ordering Dashboard (VFC)
Displays Flu Ordering for Providers (VFC)
Viewing as Jerusalem Theodos

Doses Ordered vs. Season Target

Total Doses Ordered No data. Try refreshing the dashboard.	Season Target No data. Try refreshing the dashboard.	Season Target % No data. Try refreshing the dashboard.	Amount Needed to Reach Season Tar... No data. Try refreshing the dashboard.
			
View Report	View Report	View Report	View Report

Doses Administered (Self-Reported) vs. Season Target

Total Doses Administered (Self-Report... No data. Try refreshing the dashboard.	Season Target No data. Try refreshing the dashboard.	Season Target % No data. Try refreshing the dashboard.	Amount Needed to Reach Season Tar... No data. Try refreshing the dashboard.
			
View Report	View Report	View Report	View Report



Resources

- Vaccine Program Management email vaccinereq@ph.lacounty.gov
 - ‘DPH-VaccineReq’
- If you are not currently on the CDPH Immunization Branch distribution list and would like to be added, [register here](#)
- CDPH Immunization Updates for Providers Webinar (occurs once a month) [Register](#) for the next session:
 - **Friday, January 23, 2026, 9:00 am – 10:30 am (PT)**
 - CDPH will no longer share slides due to ADA restrictions. Instead, the video archive will be available on the EZIZ website at <https://eziz.org/provider-ed/webinars/>
- EZIZ website address change in early 2026 to eziz.cdpf.ca.gov

Upcoming Office Hours Session

- **2026 VPDCP Office Hours**

First Wednesday of each month 12:00 pm – 1:00 pm

[Registration link](#)