

Vaccine Advisory Committee (VAC) Meeting

July 14, 2022

Chair/Facilitator:

Dr. Tao Kwan-Gett Washington State Department of Health

Members:

Adrian Dominquez

Anita Alkire

Annie Hetzel

Dr. Alisa Kachikis

Dr. Amy Person

Dr. Beth Harvey

Dr. Christopher Chen

Dr. Daniel Moorman

Dr. Ed Marcuse

Dr. Jeff Duchin

Dr. Jenny Arnold

Dr. John Dunn

Dr. John Merrill-Steskal

Dr. Kristy Riniker

Dr. Mark Larson

Dr. Mary Alison Koehnke

Dr. Mary Anderson

Stephane Stookey

Dr. Stephen Pearson

Tam Lutz

Tara Tumulty

Tristen Lamb

Wendy Stevens

Representing:

Urban Indian Health Institute

Childcare

Office of Superintendent of Public Instruction

American College of Obstetricians and Gynecologists

Washington State Association of Local Public Health Officers

Consultant

Health Care Authority

Washington Chapter of the American Academy of Pediatrics

Consultant

Public Health Seattle – King County

Washington State Pharmacy Association

Managed Care

Washington Academy of Family Physicians

Washington Academy of Family Physicians

Washington State Association of Local Public Health Officials

Naturopathic Medicine

Internal Medicine Organization

Washington State Association of Local Public Health Officials

Washington Chapter of the American Academy of Pediatrics

Northwest Tribal Epidemiology Center

National Association of Pediatric Nurse Practitioners

Washington State Association of Local Public Health Officers

American Indian Health Commission

Washington State Department of Health Staff Presenters:

Hannah Febach

Mary Huynh

Kathy Bay

Greg Endler

External Presenters:

Dr. Sherri Zorn

Topic	Presented Information
<p>Welcome, Announcements, Introductions, Land Acknowledgement</p> <p>Dr. Tao Kwan-Gett</p>	<p>Dr. Tao Kwan-Gett welcomed the committee members, including new member Stephane Stookey, and VAC members gave introductions. He also provided a land acknowledgment.</p>
<p>Immunizations Program Update</p> <p>Michele Roberts</p>	<p>Michele Roberts provided an immunization program update. The Office of Immunization continues the recruitment process for the Office Director position. The agency is currently reaching the final stages of interviews with potential candidates.</p> <p>Michele also provided a brief update on monkeypox vaccination. The federal government is making available additional vaccine and broadening distribution to other population groups in high transmission areas. The Food and Drug Administration (FDA)-approved vaccine, JYNNEOS, will continue being distributed to the state. The second round of allocations to states will begin by end of the month.</p>
<p>Conflict of Interest & Approval of Previous Meeting Minutes</p> <p>Hannah Febach</p>	<p>Hannah read the committee’s Conflict of Interest Policy.</p> <p>No conflicts of interest were declared.</p> <p>The minutes from the May 5th, 2022, meeting were approved.</p>
<p>COVID-19 Vaccine Response Director Update</p> <p>Mary Huynh</p>	<p>COVID-19 Vaccine Updates</p> <ul style="list-style-type: none"> • As of June 13, 2022, 82.3% of the population 5 and up has received at least one dose and 74.8% is fully vaccinated • COVID-19 vaccine is now recommended for ages 6 months and up • County level data for the youngest age group is not published yet <p>New: COVID-19 Vaccine Product Characteristics</p> <p>Infographics help providers navigate the products and which age group they are indicated for. Centers for Disease Control and Prevention (CDC) created resource guides to help navigate situations for when a child changes from one age group to the next in between their primary series doses. Resources available at Pediatric Vaccine Provider Toolkit (wa.gov)</p> <p>Novavax</p> <ul style="list-style-type: none"> • FDA authorized Novavax COVID-19 vaccine (2 dose series, 3 weeks apart) • State expected to receive shipments week of July 19th <p>COVID-19 Vaccine Variant Selection and Future Boosters (Tentative Timeline)</p> <ul style="list-style-type: none"> • Moderna bivalent vaccine against Omicron: Aug-Sept 2022 • Pfizer, monovalent BA.1 Omicron booster, also producing BA.4/BA.5 – Oct 2022

	<p>Capacity Survey – August</p> <p>New questions will be sent out to enrolled COVID-19 vaccine providers to help understand barriers to vaccinating ages 6 months through 5 years of age. Clinicians previously shared brief comments – clinics experiencing increased waitlists for wellness visits, decreased staff capacity, & vaccine hesitancy, especially with regards to younger age groups.</p>
<p>HPV Vaccination</p> <p>Dr. Sherri Zorn</p>	<p>Human Papilloma Virus (HPV) Vaccine Beginning at 9 Provides Powerful Cancer Prevention</p> <p>Prevents more than 90% of 6 cancers caused by HPV</p> <p>Best cancer protection when vaccination series is completed before age 13</p> <ul style="list-style-type: none"> • Study shared impact of age at vaccination with 12-13 providing 87% protection against cervical cancer The effects of the national HPV vaccination programme in England, UK, on cervical cancer and grade 3 cervical intraepithelial neoplasia incidence: a register-based observational study - ScienceDirect • 2030 goal for HPV vaccine series completion is 80% <p>Pandemic Effect on HPV Vaccination</p> <ul style="list-style-type: none"> • Pandemic decreased progress for HPV vaccination with 3.5 million fewer doses of HPV administered • Disproportionate effect on minorities and higher percentage of missed vaccines in Medicaid population • Predict 10 years to catch up to pre-pandemic levels <p>Vaccine trends in Washington State (2019-2021)</p> <ul style="list-style-type: none"> • Coverage rates: 11–12-year HPV (1) decreased 3.2% (39.6 to 36.4%) <p>New Strategy: Starting HPV at 9</p> <ul style="list-style-type: none"> • Best immune response if started ages 9-12 & immunity doesn't wear off • Parents like having fewer shots at each visit • Time saving for parents when paired with annual well care visits at ages 9 and 10 <p>WA Clinics implementing HPV vaccination at age 9 have seen a substantial improvement in HPV series completion from 2018-2022:</p> <p><u>Clinic A HPV strategies (2018-2022)</u></p> <ul style="list-style-type: none"> • Standardized HPV vaccination recommendation • Cleaned patient panel in state immunization registry • Clinic staff training & cue cards • Outreach & periodic reminders to parents <p><u>Clinic B HPV strategies (May 2021 – May 2022)</u></p> <ul style="list-style-type: none"> • HPV vaccination at 9 virtual recorded training • Immunization schedule posted in exam rooms • Electronic Health Record prompt at 9 • HPV vaccination info/cue cards
<p>HPV Vaccination DOH Update</p>	<p>HPV vaccination related work at DOH:</p> <ul style="list-style-type: none"> • HPV-Free Task Force participation • Recently shared childhood/adolescent immunization report/data with local health

<p>Mary Huynh</p> <p>Kathy Bay</p> <p>Greg Endler</p>	<ul style="list-style-type: none"> Health Plan Partnership (HPP) meeting discussions to look at ways to help expand MCO/HPP work in this area <p>Brief Data highlights for HPV vaccine series initiation & completion by end of 2021 among 11-12, and 13–17 years old:</p> <ul style="list-style-type: none"> HPV vaccine series completion rates increases as children get older, even with rates decreasing in most age groups since 2019 Adolescents receiving on time vaccination (2 doses) by 13th birthday was 26% HPV series initiation vaccination rates are higher than completion rates: <ul style="list-style-type: none"> -56-57% of 13-17 yrs initiated vaccine with 43% of 13-17 yrs completing the series -36% of 11-12 yrs initiated vaccine with only 12% completing the series <p>HPV Free Task Force Breakdown</p> <p><u>Description:</u> group of representatives from various sectors including: federally-qualified health centers, payors, hospitals, primary care providers, government, tribal entities, and more. Meetings held quarterly.</p> <p><u>Mission:</u> increase HPV vaccination rates in Washington and reduce the amount of HPV associated disease by engaging and supporting diverse partners & increasing knowledge about HPV and cancer prevention.</p> <p><u>Goal:</u> attain a measurable reduction of HPV associated disease in Washington by achieving 80% vaccination series completion rate by age 13 by 2030.</p> <p>To get involved with the HPV Free Task Force, contact: Katie Trend, katie.trend@doh.wa.gov Comprehensive Cancer Control Coordinator, Lead of WA HPV Free Task Force</p> <p>HPV as Cancer Prevention Resources</p> <p>For parents, individuals: Human Papillomavirus (HPV) Washington State Department of Health For health care providers: Human Papillomavirus (HPV) Information Healthcare Providers Washington State Department of Health Questions and Answers about HPV (Human Papillomavirus) and HPV Vaccine Washington State Department of Health</p> <p>HPV Vaccine: Long-Lasting Cancer Protection (wa.gov)</p> <p>Promoting HPV Vaccine</p> <p>DOH continues to conduct a wide-scale communication campaign to push messages out to providers, parents and the public to consider starting HPV vaccination as early as age 9. This includes social media posts, pintables, clinical & school materials, verbal/in person trainings and webinars. Info is available at Human Papillomavirus (HPV) Washington State Department of Health.</p>
<p>VAC Discussion</p>	<p>VAC discussed the benefits and challenges of promoting HPV vaccination starting as early as age 9.</p> <p>Member Pearson then proposed a motion to the group to formally request the Department of Health to encourage HPV vaccination beginning at age 9 by:</p> <ol style="list-style-type: none"> 1. Encouraging providers to consider routinely starting HPV vaccination at age 9 years,

	<p>in accordance with current CDC guidance, and convey this information on all HPV immunization materials</p> <ol style="list-style-type: none">2. Changing the forecasting prompt in the state’s immunization registry to age 9,3. Tracking and publishing state and county level data on HPV vaccination coverage rates for children ages 9-10 annually <p>The group voted and the motion passed, with Dr. Kwan-Gett abstaining. Read the full motion here.</p>
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Public Comments:

Public comments were received during the meeting that raised concerns related to COVID-19 vaccination for children as well as concerns with promoting HPV vaccination. As a reminder, the Committee does not respond directly to comments. Members receive comments and take them into consideration during discussions.