

Vaccine Advisory Committee (VAC) Meeting

January 14, 2021

Interim Chair/Facilitator:

Dr. Scott Lindquist Washington State Department of Health

Members:

Dr. Amy Person

Dr. Christopher Chen

Amy Poel

Anita Alkire

Annie Hetzel

Dr. Beth Harvey

Dr. Daniel Moorman

Dr. Ed Marcuse

Dr. Jeff Duchin

Dr. Jenny Arnold

Dr. John Dunn

Dr. Linda Eckert

Dr. Mary Alison Koehnke

Dr. Mary Anderson

Dr. Rachel Wood

Sarah Murray

Dr. Stephen Pearson

Dr. Susan Westerlund

Tam Lutz

Tara Tumulty

Tristen Lamb

Dr. Usha Rao

Wendy Stevens

Representing:

Washington State Association of Local Public Health Officers

Health Care Authority

Urban Indian Health Institute

Childcare

Office of Superintendent of Public Instruction

Consultant

Washington Chapter of the American Academy of Pediatrics

Consultant

Public Health – Seattle/King County

Washington State Pharmacy Association

Managed Care

Consultant

Naturopathic Medicine

Internal Medicine Organization

Washington State Association of Local Public Health Officers

Washington State Association of Local Public Health Officers

Washington Chapter of the American Academy of Pediatrics

Washington Academy of Family Physicians

Northwest Tribal Epidemiology Center

National Association of Pediatric Nurse Practitioners

Washington State Association of Local Public Health Officers

Washington Academy of Family Physicians

American Indian Health Commission

Washington State Department of Health Staff:

Mary Huynh

Hannah Febach

Kathy Bay

SheAnne Allen

Michele Roberts

Greg Endler

Topic	Presented Information
Welcome and Introductions Dr. Scott Lindquist	Dr. Lindquist welcomed the committee members, he also gave an overview of meeting expectations and processes were introduced.
Approval of Previous Meeting Minutes Michele Roberts	The minutes from 12/31/2020 were approved.
COVID-19 Vaccine Response Update SheAnne Allen	SheAnne provided a brief update on few key pieces of the vaccine response: <ul style="list-style-type: none"> • The state is still working with limited vaccine supply. We are looking at the feedback collected from the weekly allocation survey providers respond to. We use this information to make the best, most informed, decision to get vaccine out across the state. • Provider enrollment snapshot, the team is currently working on the backlog of provider enrollment applications. • Team is working with partners to identify ways to increase vaccination rate. Currently vaccinating about 15,000 people/day and we have a goal of increasing that to 45,000 people/day. Working with providers and local partners on vaccine site strategies→ trusted community pop ups or pharmacies as examples. • Equity and Distribution: This continues to be a focus of the vaccine team. We are looking at common healthcare barriers and trying to identify nontraditional ways to get vaccine out. • Anyone authorized to vaccinate in our state can enroll as a COVID-19 vaccine provider. We have a matrix laying out who can vaccinate on our website and this tool will continue to be updated as necessary. • Our vaccine eligibility phases and our more detailed vaccine allocation and prioritization guidance is on our website.
Vaccine Science Advisory Workgroup Update Kathy Bay	Kathy provided a quick update from the Vaccine Science Advisory Workgroup: <ul style="list-style-type: none"> • Input tools for healthcare providers and community for education and vaccination planning • Review of information to inform regarding SARS-CoV-2 mutations and the effectiveness of mRNA vaccines currently available • Supporting presentations for healthcare providers representing specialty areas • Discussion of posting raw data from VAERS
Communications Update Greg Endler	Greg gave an overview of the communication strategy behind the COVID-19 vaccine response. We have 3 stages of outreach in our COVID-19 vaccine campaign. These are: <ol style="list-style-type: none"> 1. <u>Education</u>: this stage is to provide important information on how vaccines are made and how they work in the body. 2. <u>Intent</u>: this stage will assure safety and efficacy of COVID-19 vaccines and explain the phases of eligibility. PhaseFinder: FindYourPhaseWA.org is a key tool of this stage. Similar to our other public education tools, PhaseFinder is available in 37 languages.

	<p>3. <u>Action</u>: this stage will inform people how to get vaccinated and encourage people and their friends and family to get vaccinated.</p> <p>All of our communication and outreach tools are available in multiple languages. We are also receiving engagement feedback to better our efforts and to make this process seamless. We are focusing on making our communications transparent and accessible as possible using different angles to create a trustworthy relationship between media and our population. Organic social influencers are also being used.</p> <p><i>Upcoming tools: PhaseFinder and redesigned COVID-19 vaccine website.</i></p> <p>Greg also provided an overview of The Collaborative which will launch soon. Leaders, partners, and representatives from communities and sectors disproportionately impacted by COVID-19 and vaccination partners can join. The Collaborative will:</p> <ul style="list-style-type: none"> • Support COVID-19 vaccine planning and implementation efforts as guided by state and federal guidance. • Provide feedback on COVID-19 vaccine outreach efforts to ensure messaging is community-driven and builds vaccine confidence and trust within Washington communities. • Share COVID-19 vaccine updates and materials with their respective communities/sectors and other Collaborative members.
<p>VAC Discussion</p>	<p>VAC question: It has been challenging in my area for health care workers to access the vaccine if they are not directly employed by a large healthcare system. What is being done to address this?</p> <p>Answer: Our Phase 1a vaccine guidance makes eligible all workers in health care settings, this includes those workers who may not be directly affiliated with a large healthcare system. Examples are EMS workers or home health aides. We recognize that some of these subgroups have had challenges finding places to get vaccinated. To create more points of vaccine access, we are working with provider sites to become open points of access, where anyone eligible can come to get vaccinated, to ensure all subgroups of Phase 1a can receive vaccine.</p> <p>VAC question: How can providers maintain the 15 minute observation period post vaccination? This is especially important as a logistical factor for drive up clinics and pharmacies.</p> <p>Answer: This 15 minute observation period is a normal factor with flu and providers handle it in different ways. Larger rooms or spaces may be needed for mass vaccination clinics. Responsibility will be shared with the vaccinator/vaccinee and educating people that they need to stay around for their own safety. Repurpose buildings that are able to avoid lines out on the highway, staggered appointments, let everyone know/remind them when they are coming through. The 15 minutes is nonnegotiable.</p> <p>VAC question: How can we increase the vaccination rate?</p> <p>Answer: We are working with our local partners to develop both traditional and nontraditional vaccination pathways. Pharmacies, community pop ups, and another option is mobile vaccination clinics.</p>

<p>VAC question: Can you tell us more about PrepMod?</p> <p>Answer: Jeff Chorath, Acting Immunization Information System Manager, joined the call and clarified that PrepMod is an online, paperless system that local partners can use at their immunization clinics to schedule, screen, and report to the state’s Immunization Information System (IIS). There have been some delays in getting PrepMod up but those are resolved now and PrepMod should be live soon.</p> <p>VAC question: There is confusion around what, if any, public health measures a person needs to take once they are vaccinated.</p> <p>Answer: The state is recommending all public health measures continue including masking up and social distancing, even after a person is vaccinated.</p> <p>VAC question: Other states are opening up vaccine eligibility for people 65+ and older. Will Washington do this?</p> <p>Answer: This is certainly under consideration but a decision hasn’t been made yet. We will vocalize this when we get there. The biggest challenge to expanding eligibility is limited vaccine supply.</p>

Public Comments:

Public comments were received during the meeting. The comments expressed concerns around the timeline for approval by the FDA, the Emergency Use Authorization issued, and Vitamin D. As a reminder, the Committee does not respond directly to comments. Members receive comments and take them into consideration during discussions.