

## Vaccine Advisory Committee (VAC) Meeting

March 4, 2021

### Interim Chair/Facilitator:

Dr. Scott Lindquist                      Washington State Department of Health

### Members:

Dr. Amy Person

Dr. Christopher Chen

Adrian Dominquez

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
<p><b>Welcome and Introductions</b></p> <p><b>Dr. Scott Lindquist</b></p>	<p>Dr. Lindquist welcomed the committee members, he also gave an overview of meeting expectations and processes were introduced.</p> <p>New VAC member, Adrian Dominquez, was introduced. Adrian is the new representative for the Urban Indian Health Institute.</p> <p>It was Rachel Wood’s last VAC meeting. Her retirement was congratulated and goodbyes were made.</p>
<p><b>Approval of Previous Meeting Minutes</b></p> <p><b>Dr. Scott Lindquist</b></p>	<p>Hannah read the VAC Conflict of Interest Policy. Conflict of Interest was not declared by any member of the VAC.</p> <p>The minutes from the January 14<sup>th</sup>, 2021 meeting were approved.</p>
<p><b>COVID-19 Vaccine Response Update</b></p> <p><b>SheAnne Allen</b></p>	<p>SheAnne provided a brief update on few key pieces of the vaccine response:</p> <ul style="list-style-type: none"> <li>• The state has met its 45k doses administered/day goal</li> <li>• Janssen (Johnson &amp; Johnson) vaccine was granted an emergency use authorization, WA has been allocated 60,900 doses</li> <li>• State is working closely with local health jurisdictions to determine the best places to prioritize allocating Janssen vaccine.</li> <li>• Provider Enrollment Snapshot (we have enrolled 1,367 providers to date), knowing we are only able to allocate to about 25% of providers at this time due to constrained vaccine supply</li> <li>• Vaccine supply is the biggest barrier. We are seeing small increases. However, we won’t be receiving another Janssen allocation until the end of March</li> <li>• The federal government has now given states a 3 week forecast to help with vaccine planning. We are working to create more stability for counties now that we have this forecast.</li> <li>• Federal Retail Pharmacy Partnership working closely with the Department (Social vulnerability index) to distribute vaccines to needed populations.</li> <li>• Four DOH-run mass vaccination sites have been stood up. Averaging 895 doses administered per location per day.</li> <li>• Equity is a cross cutting factor in the state’s distribution of vaccine. The Department has identified multiple strategies to address current inequities.</li> <li>• Provider Compliance Process has been set up.</li> <li>• Finding a vaccine site has been frustrating. To this end, we have re-done the state’ Vaccine Locator webpage.</li> <li>• Phase finder is now in a paper format for those without internet access. Providers are encouraged to have copies of this on hand. People seeking vaccine without online access should contact their provider to get the form/communication form 211.</li> </ul>
<p><b>Janssen (Johnson &amp; Johnson) Vaccine Overview</b></p> <p><b>Kathy Bay</b></p>	<p>Kathy Bay shared an overview of information concerning the recently authorized Janssen (Johnson &amp; Johnson) COVID-19 vaccine candidate:</p> <ul style="list-style-type: none"> <li>• Janssen vaccine was granted an emergency use authorization by the FDA on February 27<sup>th</sup></li> <li>• The CDC’s Advisory Committee on Immunization Practices (ACIP) voted to recommend the Janssen vaccine on February 28<sup>th</sup>.</li> <li>• It is an adenovirus viral vector vaccine, which is different from the other two authorized COVID-19 vaccines (Pfizer and Moderna), which are mRNA vaccines.</li> <li>• The Janssen vaccine does not contain live virus and it cannot replicate.</li> </ul>

	<ul style="list-style-type: none"> <li>• No study compared the efficacy of the currently authorized COVID-19 vaccines in the same study at the same time, making it difficult to compare the Janssen vaccine with either of the other two directly.</li> <li>• Janssen vaccine is 66% effective against symptomatic COVID-19, 93% effective against COVID-19 associated hospitalizations, and 75% effective against death.</li> <li>• The Janssen vaccine is a single dose vaccine that can be stored at normal refrigerator temperatures, making it easier logistically.</li> <li>• Janssen vaccine cannot be used interchangeably with the other two authorized vaccines.</li> <li>• Common side effects include pain at the injection site, fatigue, headache, and myalgia. Most side effects resolve in about 1-2 days.</li> <li>• Clinical considerations regarding the Janssen vaccine is forthcoming.</li> </ul>
<b>VAC Discussion</b>	<p><u>Fetal cell lines used in development of Janssen Vaccine:</u>  VAC members wanted more information regarding the fetal cell lines used in the development of the Janssen vaccine. Staff clarified that fetal tissue was not used to make the Janssen vaccine. However, in developing its vaccine, Janssen used a fetal cell line, which no longer contains the original donor cells, to grow a harmless virus, which causes some of the body's cells to make a protein that causes the immune response. VAC members encouraged DOH staff to consider developing talking points for providers around this issue.</p> <p><u>Children in COVID-19 Vaccine Clinical Trials:</u>  VAC members asked if vaccine manufacturers were hosting clinical trials for their COVID-19 vaccines in children. Staff clarified that Pfizer has a study going that includes children ages 8 and older. Moderna has a study going that includes children 12 and older.</p> <p><u>Using Janssen Vaccine for Hard to Reach Populations:</u>  The Janssen vaccine is easier logistically. VAC members wondered if it could be prioritized to be used in populations that are hard to reach, have barriers to vaccination or who have been disproportionately impacted by COVID-19. It was cautioned that the data provided by Janssen in its slides did not include information regarding safety and efficacy in American Indian/Alaska Native communities. Some providers for tribal communities may not be comfortable recommending a vaccine for this population that does not have corresponding trial data, especially as these communities already have a distrust of the public health system. Other potential groups this vaccine may work well for agricultural workers, the fishing industry, and jails or behavioral health hospitals.</p> <p><u>New Residents and Staff at Long Term Care Facilities:</u>  The state and the federal long term care pharmacy partnership are both working hard to fully vaccinate those in Washington's long term care facilities. The new question around this is what is the plan, once the initial round has been completed, to get new residents and staff vaccinated. Staff clarified that they are currently working on this guidance and will make it available soon.</p>

**Public Comments:**

Public comments were received during the meeting. The comments expressed concerns around the fetal cell lines used in the development of the Janssen vaccine, the safety of the Janssen vaccine, and the timeline for authorization of the Janssen vaccine. Some concerns were also raised about the potential for any COVID-19 vaccine mandate and another concern regarding the prioritization of those with different types of diabetes was also raised. As a reminder, the

Committee does not respond directly to comments. Members receive comments and take them into consideration during discussions.