

Vaccine Advisory Committee (VAC) Meeting

April 15, 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. Mark Larson
Mary Alison Koehnke
Dr. Mary Anderson
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 Officials
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
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
Washington Academy of Family Physicians
Northwest Tribal Epidemiology Center
National Association of Pediatric Nurse Practitioners
Washington State Association of Local Public Health Officials
Washington Academy of Family Physicians
American Indian Health Commission

Washington State Department of Health Staff:

Mary Huynh	Kathy Bay	Michele Roberts
Hannah Febach	SheAnne Allen	Greg Endler
Krisandra Allen		

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 Dr. Scott Lindquist	Hannah read the VAC Conflict of Interest Policy. No conflicts were declared by any member of the VAC. The minutes from the March 4th, 2021 meeting were approved.
COVID-19 Vaccine Response and Data Update SheAnne Allen	<p>SheAnne provided a brief update on few key pieces of the vaccine response:</p> <ul style="list-style-type: none"> • An overview of the week of April 12, 2021 was given. The state of WA has completed 17 weeks of vaccine distribution. • The amount of total doses ordered is 240 million and 234 million doses have been delivered nationwide. • 175 million total doses were administered and reported to CDC. <p>The vaccine data dashboard was viewed to show where and when vaccinations being given. This can be separated by county and shows the current 7 day average.</p> <ul style="list-style-type: none"> • The dashboard describes the vaccine given by date, showing an increasing trend toward the end of April. • The percent of people initiating vaccination (receiving at least 1 dose) was 34.97% and people who were fully vaccinated was 23.06%. • The coverage in the 65+ population for individuals having at least one dose is 73.0%. <p>CDC three week allocation projections ending in May 02, 2021 will allocate 381,660 doses (includes all three vaccines).</p> <p>COVID-19 Vaccine Rollout in Washington uses the concept of the three-legged stool: supply, logistics, and demand. All three legs are necessary to be effective in balancing goals of getting as many Washingtonians vaccinated quickly and equitably.</p> <ul style="list-style-type: none"> • Supply is the number of vaccine doses coming into the state and then out to local communities. • Demand is the willingness of Washingtonians to seek and/or receive vaccine when eligible and available. • Logistics is the ability to administer vaccine doses when available in a timely and effective manner. <p>Any imbalance in the “legs” of the stool will lead to challenges in the ultimate goal of achieving our vaccine coverage goal for the state.</p> <p>VAX Day was established by Gov. Jay Inslee to expand eligibility to all adults on April 15th.</p> <p>Ongoing Focused Vaccine Distribution Plans:</p> <ul style="list-style-type: none"> • The Department of Health working towards updating and completing Phase 1B Tier 2-4 by scheduling links for vaccines, employer clinics, mobile teams, mass vax, and pulling pharmacies.

	<ul style="list-style-type: none"> • We are continuing to work with LHJs and community partners on collaboration. <p>Vaccine equity strategies are being established via:</p> <ul style="list-style-type: none"> • Engage communities to inform vaccine prioritization and planning. • Integrate a pro-equity approach into vaccine allocation and distribution. • Prioritize allocation and support to providers who effectively serve disproportionately impacted communities. • Invest in trusted community leaders, messengers and organizations. • Ensure all communications, education and outreach efforts are culturally and linguistically appropriate and accessible • Strengthen the public health system’s ability to center communities in vaccine outreach and access • Foster opportunities for collaboration between different community partners and stake holders • Support a trauma-informed approach to vaccine conversations <p>Mobile clinics:</p> <ul style="list-style-type: none"> • The National Guard, Nurse, and other contracted mobile teams have been established to provide access to vaccination for communities with proven difficulty reaching other modalities. The capabilities for such teams range from as low as 10-20 doses administered per day to mass vaccination efforts. • This service is intentionally aligned with underserved communities and the CDC’s social vulnerability index to increase vaccination equity. <p>Emergency ACIP Meeting Regarding the J&J Vaccine</p> <ul style="list-style-type: none"> • ACIP did not yet make a recommendation to CDC, so pause initiated by CDC & FDA will continue.
<p>COVID Variants & Vaccine Efficacy</p> <p>Krisandra Allen</p>	<p>Background of variants:</p> <ul style="list-style-type: none"> • Viruses constantly adapt through mutations. Due to these mutations, new variants of the virus will emerge, persist, or disappear over time. • Multiple COVID-19 variants have been documented in the United States and globally during the pandemic. <p>SARS-CoV-2 Variant Classifications and Definitions</p> <ul style="list-style-type: none"> • There are three major classifications: variants of interest, variants of concern, and variants of high consequence. <p>Variants of Interest</p> <ul style="list-style-type: none"> • B.1.526 • B.1.525 • P.2 <p>Variants of Concern</p> <ul style="list-style-type: none"> • The definition of variants of concern contain some of the following: evidence of impact on diagnostics, treatments, and vaccines, evidence of increased transmissibility, and evidence of increased disease severity. • The variants of concern identified are: B.1.1.7, P.1, B.1.427/B.1429, and B.1.351.

	<p>Variants of High Consequence</p> <ul style="list-style-type: none"> • These variants demonstrate failure using diagnostics, significant reduction in vaccine effectiveness, significantly reduced susceptibility to multiple approved therapeutics, and more severe clinical disease and increased hospitalizations. <p>Sequencing Plan in Washington</p> <ul style="list-style-type: none"> • Sentinel Surveillance: It is used for representative sample from across the state, selected clinical labs will submit specimens to sequencing, will allow statewide estimates of proportions of variants, and goal at least 5% of confirmed cases sequenced. • Targeted Sequencing: Vaccine breakthrough cases in which individual is fully vaccinated (>14 days have elapsed between final vaccine dose and specimen collection). Any suspected reinfection cases are defined and reported. Unusual clinical presentations of COVID-19 are identified and reported. Any individual reporting international travel in 14 days prior to symptom onset, along with suspected cases of zoonotic transmissions and outbreaks with suspected variant of concern. • Washington State Variants of Concern: DOH publishes sequencing and variant reports weekly. See the links below to find the reporting dashboards. <ul style="list-style-type: none"> ○ Found on the dashboard: https://www.doh.wa.gov/Emergencies/COVID19/DataDashboard ○ Direct link: https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/data-tables/420-316-SequencingAndVariantsReport.pdf • Report Future Plans: DOH continues to add new variants of concern and interest as CDC updates the variant list. Any additional information about sequencing results from vaccine breakthrough cases are also of interest.
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Public Comments:

Public comments were received during the meeting. The comments expressed concerns around vaccine safety and efficacy, especially around the J&J vaccine. Some concerns were also raised about the federal government’s monitoring of vaccine side effects and adverse reactions including the Vaccine Adverse Events Reporting System (VAERS). As a reminder, the Committee does not respond directly to comments. Members receive comments and take them into consideration during discussions.