

**Vaccine Advisory Workgroup Meeting
Minutes
Monday, January 11, 2021**

Location: Virtual, via WebEx

12:30-12:35	Welcome - Kelly Goode, Co-Chair
12:35	<p>Public Comment</p> <p>No members of the public requested to make public comment during this meeting. For future Vaccine Advisory Workgroups, we will continue to allow for up to twenty minutes of public comment at the top of the meetings and record the meeting to be posted to the public webpage. For subgroup meetings, information about the meeting and the agenda will be posted to Town Hall and the meeting will be recorded; however, there will not be a public comment period.</p> <p>The process for public comment during the full workgroup meeting is listed below:</p> <ul style="list-style-type: none"> • There is a two-minute time limit for each person to speak • We will be calling from the list generated through registration • After the two-minute public comment limit is reached we will let you complete the sentence and will mute you and move on to the next attendee • We will call the name of the person on list as well as the name of the person next on the list
12:35-12:50	<p>Federal and State Updates - Christy Gray, MSH, CHES, CHTS-CP</p> <p>Federal Updates:</p> <ul style="list-style-type: none"> • VDH has finalized Phase 1B and Phase 1C recommendations by incorporating VAW, VDMAC and state officials' feedback <ul style="list-style-type: none"> ○ Phase 1B includes all persons 75 and older, incarcerated communities, homeless shelters, frontline workers at increased risk due to their positions (these positions are identified through CISA) ○ Phase 1C will include 65-74 years, and persons with high-risk medical conditions, and other essential workers ○ A guidance deep-dive document for both phases is provided in the website • Second doses for vaccines is starting to be received and distributed to providers • CDC updated materials: <ul style="list-style-type: none"> ○ The CDC has launched a vaccination dashboard where it takes the doses of vaccine distributed and administered and shows state-to-state comparisons <ul style="list-style-type: none"> ▪ The CDC has cautioned against extensive ranking against states since each state is going about their rollout slightly differently ▪ Our doses administered data in VA was delayed due to providers being behind on data entry, human error, and systems issues. We have been working through this and our doses administered and ratios are improving ○ VSAFE materials have been translated in five languages

	<ul style="list-style-type: none"> ○ The CDC has provided guidance for clinical considerations for use of mRNA COVID-19 vaccines currently authorized in the US <p>State Updates:</p> <ul style="list-style-type: none"> ● Planning: <ul style="list-style-type: none"> ○ SNFs and ALFs and other facilities will now be vaccinated as part of the federal pharmacy partnership for long-term care facilities (VDH has activated Part B of the partnership) ○ Several districts of Virginia are moving into Phase 1B so we are looking into other upcoming opportunities such as the federal retail pharmacy program ○ Coordination with the Indian Health Services continues to ensure tribal communities are received required allocations ● Communications: <ul style="list-style-type: none"> ○ Completed Community Conversations ○ VDH is completing updates, improvement and additional content to the vaccine website in order to make information more accessible for the public ○ The eligibility tool on the website was also rolled out (a user could submit information that can estimate which phase they would be in with regards to the vaccine rollout) ○ The governor announced new steps to accelerate COVID-19 vaccination efforts on Wednesday. Richmond and Henrico health district director Dr. Danny Avula has joined the team to improve cohesion and partnership between local health districts, health systems, pharmacies, and VDH ○ Held a successful event with the Governor’s Office of Diversity, Equity, and Inclusion, the VDH Office of Health Equity, VCU Massey Cancer Center and faith leaders from Massey’s Fact and Faith Fridays event with Dr. Fauci on 1/8 ○ We are looking forward to more communications avenues to ensure everybody knows when it is their turn and how they can access vaccines ○ Twitter had 25,000+ impressions, VDH website had over 500 views within the first few minutes of going live, has had 12,000+ unique impressions as of today ● Operational Readiness: <ul style="list-style-type: none"> ○ Continued collaboration with the Virginia National Guard in the logistics and provider enrollment areas ○ 900+ providers are approved COVID-19 vaccine providers, as of 1/4/2021 ○ Allocations have not been increased for Virginia as of yet ○ VDH will be launching a new vaccine management scheduling and registering tool, PrepMod, at the end of January to improve efficiency ○ VDH is continuing to invest and improve technology to help with access to vaccine ○ VDH is currently working on a weekly newsletter, welcome packet, best practices, and FAQ documents for pharmacies and providers that are enrolled ● Funding: <ul style="list-style-type: none"> ○ FMAS has published guidance regarding provider billing and reimbursement ○ State and local coronavirus relief fund extension act has been approved for use through 12/31/2021
12:50-12:55	<p>Communications and Messaging Succinct Report Out – Wendy Klein and Gaylene Kanoyton</p> <ul style="list-style-type: none"> ● Meeting conducted December 30,2020

	<ul style="list-style-type: none"> • Subgroup conducted a brainstorming session on needs for updating the website and we are working on additional listening sessions • Subgroup is planning to continue outreach to additional communities such as the Native American and indigenous populations • Next meeting for the subgroup is Friday 1/15 at 9 a.m. and will be meeting biweekly after
12:55-1:00	<p>Partnerships Succinct Report Out – Julie Dime</p> <ul style="list-style-type: none"> • Subgroup has sent out the revised stakeholder list that includes the media • Last meeting was conducted early December 2020
1:00-1:05	<p>Safety & Efficacy Succinct Report Out – Dr. Costi Sifri</p> <ul style="list-style-type: none"> • Subgroup has submitted in update in a report • In a future report, subgroup will be discussing the rates of allergies specifically with the Pfizer-BioNTech vaccine and provide additional context • At this time, the Safety and Efficacy subgroup specifically recommends that VDH continue to follow ACIP and CDC guidelines with respect to schedules and changes to doses
1:05-1:10	<p>Barriers to Vaccination Succinct Report Out – Stuart Henochowitz</p> <ul style="list-style-type: none"> • Subgroup met last week • Subgroup plans to look at data for vaccine hesitancy in providers and will report that out • In the meeting, the subgroup discussed barriers to getting vaccines out to individuals, including independent practitioners • Governor’s advisory board was able to get a health departments and providers in the state and their contact information • Next meeting will be on January 20, 2020
1:10-1:20	<p>Moderated Q&A:</p> <ul style="list-style-type: none"> • Comment: Some Spanish translation of materials and FAQs is inaccurate – consider not • Comment: Phone lines listed on the VDH website and Fairfax County website are not accessible – long wait times are being seen. <ul style="list-style-type: none"> ○ VDH is looking to provide translation services upfront on the phone lines as well as ensuring additional materials are accurately translated • Who is tasked with reviewing language, access, translation, and interpretation issues? <ul style="list-style-type: none"> ○ VDH is working with vendors to ensure that the literacy levels are met and we have developed a review flow. The Phase 1A, B, C document that went up on the website last week were not developed with the comprehensive communications vendor ○ Translation is an obsolete term – transcreation is what should be used ○ Rebecca Vargas-Jackson and her team and students may be able to help with these tasks • Comment: All we need is some communication to lower the frustration levels of community providers – they just want to know what is coming and when <ul style="list-style-type: none"> ○ When we built the system we did not build it with a public-facing feature to see status. VDH is working to identify ways in which we can get communications out and ensure they have a channel open ○ Comment: Perhaps a communication is to have people in the health departments speak to one person or one group that can disseminate it out to the provider community • Is there planning for call centers? <ul style="list-style-type: none"> ○ VDH has not gone into a deep dive on VAMS and PrepMod in these calls. VAMS is an

	<p>end-to-end solution that VDH has been using but it does have some limitations (with regards to registration and eligibility portion), so PrepMod is being acquired to improve that part of the experience</p> <ul style="list-style-type: none"> ○ PrepMod has been used in Maryland for several years and has been procured in several other states as well – but it has the advantage of being more used and more situated around how we want to operate clinics ○ Lots of conversations are ongoing with local health districts around how else we can make vaccine registration more accessible. Local health districts are making their own plans but it will likely require a scale up of the current call center services <ul style="list-style-type: none"> ● How will long term care residents and staff who do not receive the vaccine during the CVS or Walgreens clinics receive it after they are finished? For example, residents who are discharged from the hospital or staff that are hired after the clinics have taken place. <ul style="list-style-type: none"> ○ VDH is still working through those details. When there is increased vaccine available, staff should be able to receive the vaccine at a retail pharmacy location and hospitals could provide on discharge ● Is there a recommended vaccine type (such as mRNA) for specific populations (such as elderly)? Some people are still having vaccination hesitation by not knowing which vaccine would be best for them. <ul style="list-style-type: none"> ○ Pfizer vaccination is recommended for all ages 16 years and up Moderna is recommended for all ages 18 years and up. There is no vaccine better for the elderly over another. ● Comment: Regular day and time for messaging for the population of Virginia. Pick a day and a time and have a 15-minute information session that appries all of where they sign up for vaccination, where they get more information, and where we are with numbers vaccinated and what groups are currently being vaccinated. A consistent format and day and time will help with the lack of messaging and the miscommunications. ● In the Summary of available safety/efficacy data, it showed information on vaccination of individuals 12-15 years old. Is there additional testing being done on that age range as to why they were not included in the EUA? <ul style="list-style-type: none"> ○ Yes, Pfizer is currently enrolling 12-15 year old participants into their trials. Some had already been vaccinated per clinical trials when the EUA was granted. However, per EUA standards set forth by the FDA, we need data for at least 2 months following the second dose for safety monitoring prior to the EUA being extended to that age range. We have not yet met that time point.
<p>1:25-1:30</p>	<p>Closing & Wrap-up</p> <ul style="list-style-type: none"> ● Sub-Workgroup Meeting Dates: <ul style="list-style-type: none"> ○ Communications and Messaging – 1/15/2021, 9-10 AM ○ Partnerships – TBD ○ Safety & Efficacy – TBD ○ Barriers to Vaccination – 1/20/2021, 12:30-1:30 PM ● Workgroup Meeting and Important Dates through January 11, 2020: <ul style="list-style-type: none"> ○ Monday, 1/25/2021: 12:30 – 1:30 PM Co-Chair and VDH Representative Meeting ○ Monday, 1/25/2021: Report Out for Vaccine Advisory Workgroup Meeting due to Stephanie Wheawill ○ Wednesday, 2/3/2021: Agenda and Meeting Materials Sent and Posted ○ Monday, 2/8/2021: 12:30 - 1:50 PM Vaccine Advisory Workgroup Meeting