

National Vaccine Advisory Committee (NVAC) February 6, 2009 Meeting on the draft strategic National Vaccine Plan: Goal 4 - Ensure a stable supply of recommended vaccines, and achieve better use of existing vaccines to prevent disease, disability, and death in the United States

Participants:

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| Christine Nevin-Woods | NVAC member and Moderator |
| Jon Almquist | NVAC member |
| Wayne Rawlins | NVAC liaison member, America's Health Insurance Plans |
| Raymond Strikas | National Vaccine Program Office (NVPO) |
| Kent Forde | NVPO |
| Claire Hannan | Association of Immunization Managers (AIM) |
| Jeanne Ringel | RAND |
| James Lutz | CDC assignee in Philadelphia, representing NACCHO |
| Magdalena Castro-Lewis | National Alliance for Hispanic Health, and member, Advisory Committee on Childhood Vaccines |
| Raina Sharma | Institute of Medicine |
| Joseph Bocchini | American Academy of Pediatrics |
| John Hunsaker | America's Health Insurance Plans |
| Ciro V. Sumaya | Advisory Committee on Immunization Practices |
| Philip Hosbach | sanofi Pasteur |
| Sara Markle-Elder | United American Nurses |
| Dean Mason | Wyeth |
| Geoffrey Evans | Health Resources and Services Administration |
| Greg Reed | CDC assignee in Maryland, and with AIM |

Telephone Participants:

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| Kathleen Gensheimer | Council of State and Territorial Epidemiologists |
| Carmen Denis | |
| Yelenis Jimenez | |

Summary of Comments:

1. Indicator 1 and Strategy 4.1.5 Assuring equality of vaccine supply for each sector—to include BOTH public and private.
2. Healthcare provider vaccination- a priority. But group was divided on role of mandates.
3. Underserved Populations:
 - a. Gap of underinsured children.
 - b. Adolescents
 - c. Some adults
 - i. How to reach underserved groups:

1. Community organizations, employers, churches. Ensure providers have systems to reach these underserved populations.
 2. Provide culturally sensitive education and outreach materials.
4. Ensure adequate payment of providers for vaccinations services including
 - a. Counseling
 - b. Vaccine storage and handling
 - c. Vaccine administration
 5. Emphasize role for employers in Objective 4.2. (Reduce financial and non-financial barriers to vaccination)
 6. Improve immunization information systems (IIS), including:
 - a. Record keeping, accountability, recall, tracking.
 - b. The current indicator for these systems is too limited; eg. All states should have a functioning registry.
 - c. Emphasize the need to include an accurate transfer of vaccine information from the provider to the IIS and support the committee that is looking at this.
 7. One comment concerning FDA having adequate resources to ensure adequate vaccine supply.
 8. Indicator 2 seemed to be too weak an indicator, i.e., measures perception, not reality:
 - a. Qualitative, not quantitative
 - b. Doesn't include providers' barriers

“Indicator 2 – Reduce financial and non-financial barriers to access immunization services, such as cost, availability, and language, by Y (year) so that:

- _X_% of parents of infants and children report no barriers to immunization;
- _X_% of parents of adolescents report no barriers to immunization; and
- _X_% of adults report no barriers to immunization.”