National Vaccine Advisory Committee (NVAC) February 6, 2009 Meeting on the draft strategic National Vaccine Plan: Public Health Organizations

Participants:	
Christine Nevin-Woods	NVAC member and Moderator
S. Guthrie Birkhead	NVAC member
Marie McCormick	NVAC member
Trish Parnell	NVAC member
Robert Bednarczyk	NVAC staff, at University of Rochester
Raymond Strikas	National Vaccine Program Office (NVPO)
Kent Forde	NVPO
Alison Mawle	Centers for Disease Control and Prevention (CDC)
Nancy Levine	CDC
Kristine Sheedy	CDC
Claire Hannan	Association of Immunization Managers (AIM)
James Lutz	CDC assignee in Philadelphia, representing
	The National Association of County and City
	Health Officials (NACCHO)
Julie Morita	NACCHO
Magdalena Castro-Lewis	National Alliance for Hispanic Health, and member,
-	Advisory Committee on Childhood Vaccines
Greg Reed	CDC assignee in Maryland, and with AIM
Rebecca Fields	Academy for Educational Development
Robert Steinglass	John Snow, Inc.
Jennifer Zavolinsky	Every Child by Two
Amy Pisani	Every Child by Two
Richard Greenaway	Every Child by Two
Alina Baciu	Institute of Medicine
Richard Hughes	Association of State and Territorial Health Officials
	(ASTHO)
Anna Buchanan	ASTHO
Richard Tardif	Oak Ridge Institute for Science and Education
Jessica Bernstein	National Institutes of Health
Thomas M. Vernon	Consultant, Novartis Vaccines
Emily Gillen	RAND
James Moody	Safe Minds
Telephone Participants:	

<u>Telephone Participants:</u> Carmen Denis Yelenis Jimenez

Summary of Comments:

1. Potentially the most important issue relayed in the session is that we should include a mission statement for the NVP. It would reflect the critical importance of preventing

infectious diseases through immunizations and optimally preventing adverse reactions to vaccines.

- 2. The global aspects need to be cross-referenced in many of the Goals and Objectives.
- A number of additional stakeholders (e.g., parents, the public, non-governmental organizations [NGOs]) were recommended to be included in several goals and objectives. Non-federal stakeholders and their roles should be included in Appendix 3.
- 4. In a national emergency, using fast track approval for other Nation's approved-foruse vaccines.
- 5. Acute interest in the Implementation portion of the NVP. Identify the roles and responsibilities that go accompany the Implementation.
- 6. Education of healthcare providers (HCP) should include vaccine safety issues including reporting adverse events. HCP should include non-traditional providers like pharmacists, chiropractors, dentists, allied clinics.