

Covid-19 Vaccine Strategy  
Science and Technical Advisory Group

Minutes – Wednesday 4 November 2020  
(Confidential)

Date & time	10:00 to 11:00AM, Wednesday 4 November	
Attendees	Ian Town (Chair) David Murdoch (Deputy Chair) Ian Frazer Peter McIntyre Nikki Moreland Helen Petousis-Harris John Taylor Nikki Turner James Ussher	Justine Daw Allison Bennett Sahar Fanian Karl Ferguson Stephanie Symynuk Emily Robinson Chriselle Braganza
Apologies	Matire Harwood Sue Crengle Graeme Jarvis	

Item for discussion	Led by
<b>Administration</b>	
<b>1. Apologies</b> Matire Harwood, Sue Crengle, Graeme Jarvis	Ian Town
<b>2. STAG Conflicts of Interest</b> The current COI register was noted, with no new conflicts declared.	Ian Town
<b>3. Review of minutes from last STAG meeting</b> The minutes from the STAG meeting on 21 October 2020 were approved.	Ian Town
<b>4. Matters arising</b> Justine Daw and Ian Town provided updates on matters arising: <ul style="list-style-type: none"> <li>• There are likely to be three candidates offered through COVAX, two of which were already known through the Advance Purchase Agreement (APA) process, and a third which looks interesting. We will likely have two weeks to make a first decision on the option to purchase (to remain 'opted in' for potential purchase). Project Lead Glenys Karran from MFAT will provide an update on COVAX at the next STAG meeting (18 November).</li> <li>• The agenda for today covers a number of matters arising:                             <ul style="list-style-type: none"> <li>- an update on the Taskforce Communications and Engagement Strategy</li> <li>- an updated table summarising bilateral APA candidate progress</li> <li>- an update on clinical trials / long-term surveillance</li> </ul> </li> </ul>	Justine Daw / Ian Town

<ul style="list-style-type: none"> <li>• Ian Town discussed the CARM proposal with Chris James at Medsafe, who confirmed that they have approval in principle to proceed. Medsafe is currently working through the acceptance and funding processes. The urgency around this was noted by the STAG.</li> </ul>	
<p><b>5. Review of rolling monthly planner</b></p> <p>Justine Daw noted that the next two weeks will be critical in terms of APA purchasing, with a number of Science and Clinical Review Panel assessment documents being finalised to inform purchase decision briefings to Ministers. COVAX timelines remain unclear at this stage, but expect more information shortly.</p> <p>The Government will not be purchasing all the vaccines that have been reviewed. While the Taskforce has yet to make a decision on final numbers, it will likely seek to finalise four APAs before Christmas, with COVAX candidates enabling us to manage portfolio risk through additional purchasing, as needed.</p> <p>A meeting has been scheduled with the Science and Clinical Review Panel on 10 November to discuss the portfolio as a whole.</p> <p>There may be periodic requests for advice into early 2021, as we monitor the portfolio of purchased vaccine candidates over time, in respect to delivery schedules, logistics and performance.</p>	Justine Daw

Updates	
<p><b>6. COVID-19 Vaccine Portfolio: Anticipated population coverage</b></p> <p>Allison Bennett (Project Lead, Immunisation Roll-out) presented the initial assessment of population coverage for potential vaccine candidates based on information available to date.</p> <p>STAG comment was sought on the draft analysis, including the assumptions made and any other factors, limitations or assumptions that need to be considered. The analysis will be updated as more information becomes available.</p> <p>Discussion included:</p> <ul style="list-style-type: none"> <li>• This work supports decisions on what vaccines to purchase (and in what volume), and will help plan and schedule the immunisation roll-out. A high degree of uncertainty in the assumptions was noted, with the analysis aiming to test whether risk has been spread sufficiently across the portfolio and identify gaps in coverage.</li> <li>• The STAG agreed that the analysis appeared sound based on the information currently available, but recommended monitoring whether purchased vaccine candidates would provide personal protection or a reduction in transmission (or both). It was recommended that some 'carriage' studies might be considered early on, with New Zealand in a unique position to undertake these. Conversely, some global clinical trials were starting to include higher-risk participants, which would provide additional insights for New Zealand.</li> <li>• The next STAG meeting (18 November) will focus on this issue of priority surveillance, post-marketing and associated research needs for New Zealand and Polynesia.</li> </ul>	Allison Bennett / Sahar Fanian

## 7. Engagement and Communications Programme update

Karl Ferguson (Project Lead, Communications and Engagement) provided an update on the Taskforce's Communications and Engagement strategy. Everyone in New Zealand has a stake, or at least an interest, in the Vaccine Taskforce's work. The strategy acknowledges the challenges and responsibilities that come with this.

Key points from the strategy are:

- Phase 1 is ongoing, and aims to highlight and tell the story of the Taskforce and its key milestones. This phase includes active planning of announcements and media management of critical communications through a range of channels.
- Phase 2 is focused on public engagement and recognises the significant interest in Covid-19 vaccines from a range of groups. It will be looking at how we can engage directly with these communities, including vulnerable groups.
- In Phase 3, the Taskforce will work closely with MoH on communications to support the immunisation roll-out.

Discussion included:

- The upcoming informational video (with Helen Petousis-Harris) is well-done and accessible. It is expected to be released on the COVID-19 website [complete as at 7 November].
- It will be important to provide ongoing reassurance to the public about the significant, science-based activities underway as part of the Taskforce programme, which will underpin confidence in the decisions made, despite the pace at which things are moving.
- The STAG noted that it will be important to ensure that a range of voices and channels (including Māori and Pacific), are incorporated into the programme to speak directly to the communities they're engaged with. Drs Siouxsie Wiles and Jess Berentson-Shaw were both noted as effective communicators.
- It was agreed that different communication channels, actors and styles are important. The Taskforce is already proactively engaging with a small group of key science commentators, and will discuss with this group what type of questions they are receiving, and how the Taskforce can best support them in their independent commentary.
- Preparations are in progress, led by Nikki Turner's UoA group, for an online database on relevant communications material and generic Q&A's to front-foot enquiries. There is an opportunity for the STAG to work collectively on this to identify and share relevant high-level material that can serve as the primary point of reference for incoming enquiries.
- The Taskforce should be aware to the possibility that, given New Zealand's status of having negligible community transmission, New Zealanders may begin to view COVID-19 as an external threat, and be prepared to address any communications and engagement needs that may rise from that.

Karl Ferguson  
/ Stephanie  
Symynuk

Discussion	
<p><b>8. Horizon Research COVID-19 Acceptance and potential uptake report</b></p> <p>Karl Ferguson also presented on a Horizon report commissioned to provide a baseline for attitudes and sentiments towards vaccines and issues that are likely to influence vaccine acceptance. The report noted that some population groups are more likely to decline a vaccine if offered, and that the success of trials and immunisation programmes overseas will impact vaccine hesitancy in New Zealand.</p> <p>STAG members were welcome to share the report in confidence, but noted Horizon's request that, before referencing this research, Horizon should be contacted to discuss the use and interpretation of the data presented.</p> <p>Discussion included:</p> <ul style="list-style-type: none"> <li>• The report's findings were not a surprise. The report was considered to broadly reflect current vaccine-related perceptions in New Zealand.</li> <li>• In general, Māori were less likely to accept a vaccine if offered, and parents/ care-givers noted hesitancy in giving new vaccines to children.</li> <li>• It will be important to match communications and engagement from the Taskforce (and more broadly) with evolving sentiment/feeling in the community.</li> <li>• Further targeted surveys could potentially be useful to understand the views of particular groups, for example, border and MIQ staff, and emergency workers. It will be important to understand vaccine-related attitudes in these groups, particularly as the issue of compulsory vaccination for workers in high-risk employment may potentially be raised for consideration in the future.</li> <li>• The issue of compulsory vaccination should also be considered in terms of border restrictions as well – for example, will it be compulsory to demonstrate vaccination before travelling to New Zealand [c.f. Yellow Fever certificates], and how do people who have to travel frequently for work feel about this?</li> </ul>	<p>Karl Ferguson / Stephanie Symynuk</p>
<p><b>9. Responding to direct approaches on candidates</b></p> <p>If STAG members receive a direct approach to either purchase or review the science of vaccine candidates, they can forward these on to the Taskforce team for response. STAG members do not need to respond directly, but they may elect to confirm that the enquiry has been referred to the Taskforce.</p>	<p>Ian Town</p>
<p><b>10. Clinical trials and long-term surveillance monitoring</b></p> <p>Ian Town noted that it will be important to be clear what we mean by surveillance and clinical trials, and that an issues paper on the topic will be presented at the next STAG meeting (18 November) by Drs Helen Petousis-Harris and Fran Priddy (Clinical Director of VAANZ, the New Zealand vaccine research platform), with support from Prof. David Murdoch.</p>	<p>Ian Town</p>

<p><b>11. Other matters</b></p> <p>Justine Daw noted the following points</p> <ul style="list-style-type: none"> <li>• The STAG Terms of Reference have been updated to include a 'Fees and Services' section, the current STAG membership, and the role and the membership of the Science and Clinical Review Panel.</li> <li>• Information on how STAG members may submit invoices for payment will be sent out in the next few days.</li> <li>• The Taskforce hopes that those STAG members who are able will join an in-person meeting of the STAG on 2 December 2020. STAG members should arrange for their own transport, with expenses to be invoiced to MBIE. Should this cause any difficulties, please get in touch with Emily Robinson at MBIE to discuss.</li> </ul>	<p>Ian Town</p>
<p><b>12. Meeting close</b></p>	

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