

27 October 2021

Sebastian

By email: [fyi-request-16691-fd5eef19@requests.fyi.org.nz](mailto:fyi-request-16691-fd5eef19@requests.fyi.org.nz)

Ref: H202114216

Tēnā koe Sebastian

### **Response to your request for official information**

Thank you for your follow up request under the Official Information Act 1982 (the Act) to the Ministry of Health (the Ministry) on 13 October 2021. You asked for:

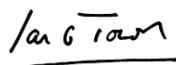
*“...Copies of all COVID-19 Vaccine Technical Advisory Group meeting minutes, dated since the beginning of September.”*

Four documents have been found to be within the scope of your request. These documents are the COVID-19 Vaccine Technical Advisory Group Minutes from 7 September to 5 October 2021. The table in Appendix 1 outlines the grounds under which I have decided to withhold information. Where information is withheld, this is noted in the document itself.

I trust this information fulfils your request. Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: [info@ombudsman.parliament.nz](mailto:info@ombudsman.parliament.nz) or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Ministry of Health website at: [www.health.govt.nz/about-ministry/information-releases](http://www.health.govt.nz/about-ministry/information-releases).

Nāku noa, nā



Professor Ian Town  
**Chief Science Advisor**  
**Chair, COVID-19 Vaccine-Technical Advisory Group**

## Appendix 1: List of documents for release

#	Date	Document details	Decision on release
1	7 September 2021	COVID-19 Vaccine TAG Minutes – 7 September 2021	Information released with some information deemed out of scope of the request.
2	14 September 2021	COVID-19 Vaccine TAG Minutes – 14 September 2021	
3	21 September 2021	COVID-19 Vaccine TAG Minutes – 21 September 2021	
4	5 October 2021	COVID-19 Vaccine TAG Minutes – 5 October 2021	

# MINUTES: COVID-19 Vaccine Technical Advisory Group

**Date:** Tuesday 07 September 2021

**Time:** 11:00am to 12:00pm

**Location:** Out of scope

**Chair:** Ian Town

**Members:** David Murdoch, Elizabeth Wilson, Helen Petousis-Harris, Ian Frazer, James Ussher, Nikki Moreland, Nikki Turner, Peter McIntyre, Sue Crengle, Tony Walls

**Ministry of Health Attendees:** Andi Shirtcliffe, Brooke Hollingshead, Daniel Bernal, Edwin Reynolds, Fiona Callaghan, Shayma Faircloth

**Guests:** Jared Solloway, Jono Hoogerbrug, Kath Blair, Kris Golding, Maria Cotter, Muhammad Mulla, Sarah Jefferies

**Apologies:** Caroline McElnay, Juliet Rumball-Smith, John Tait, Niki Stefanogiannis, Pippa Scott, Sean Hanna,

1.0	<p><b>Welcome and previous minutes</b></p> <p>Ian Town welcomed all Members and Attendees in his capacity as Chair of the COVID-19 Vaccine Technical Advisory Group (CV TAG).</p> <p>Minutes of the last meeting (31 August 2021) were accepted subject to the correction of attendance, with David Murdoch listed as Member and not listed as a Ministry of Health Attendee.</p>
2.0	<p><b>Influenza Programme 2022</b></p> <p>CV TAG advice was asked to comment on aspects of 2022 Influenza Programme planning:</p> <ul style="list-style-type: none"> <li>• There is potentially a high public health risk once borders begin to open with increased vulnerability.</li> <li>• A public/private joint model was seen as incompatible with public health principles and therefore universal access would be more effective, with prioritisation of vulnerable populations.</li> <li>• CV TAG recommended 'ring-fencing' vulnerable people by vaccinating their families and households around them for greater protection.</li> <li>• Māori and Pacific Peoples were also needing to be prioritised based on increased vulnerability to infection, being more likely to work in the essential workforce, and live in intergenerational households. Whānau-based approaches could be considered to encourage uptake, as is working well with the COVID-19 vaccine. Data on hospitalisation and mortality by ethnicity should be included in the recommendations.</li> <li>• Prioritising children and adolescents from aged 6 months to 18 years was also suggested, noting this would also reduce the burden in older people.</li> </ul>

	<ul style="list-style-type: none"> <li>A strategic approach to the whole programme including measles, HPV and other campaigns was called for. The National Immunisation Solution will be in place in time for the influenza programme in 2022 and will be accessible for all providers.</li> </ul>
3.0	<p><b>Guidance for Cancer Patients</b></p> <p>Guidance from the Cancer Control Agency on the increased vulnerability of immunocompromised patients due to their lower vaccine response was presented to CV TAG for noting.</p>
4.0	<p><b>Third Dose for Immunocompromised</b></p> <p>Draft recommendations of administering additional doses to the immunocompromised were presented to CV TAG for discussion:</p> <ul style="list-style-type: none"> <li>CV TAG noted that the recommendations need to be a clearly defined, evidence-based, list of conditions, including medications that may need to be listed e.g. corticosteroids.</li> <li>The IMAC list of immunocompromised groups could form the basis of the list of conditions, and recommendations for COVID-19 vaccines should be aligned with IMAC information.</li> <li>The recommendations must also outline the consent process and note that any authorised prescriber or medical practitioner will be able to administer doses.</li> <li>This is an opportunity to reiterate that immunocompromised people are not ineligible for COVID-19 vaccination.</li> <li>A subgroup of CV TAG will meet to revise the recommendations, and this will be brought back to CV TAG next week.</li> </ul>
5.0	<p><b>Vaccines Recognised for Border Workers</b></p> <p>The recommendations for vaccines recognised for Border Work has been finalised and shared with the Public Health Policy team.</p>
6.0	<p><b>Vaccines Recognised for Returnees</b></p> <p>CV TAG advice was sought from the Public Health Policy team on the list of vaccines that could be recognised for returnees.</p> <ul style="list-style-type: none"> <li>The recommendations for vaccines recognised for Border Work has been finalised and shared with the Public Health Policy team.</li> <li>In the context of New Zealand pursuing an elimination strategy with a population not yet fully protected by vaccination, CV TAG noted that a high level of protection was still needed. Within this context, no vaccine currently provides enough protection to remove public health measures or MIQ requirements completely. The list of vaccines recognised by Health Canada was noted as an example of an approach New Zealand could follow.</li> <li>Equity issues were noted as of importance for people arriving to New Zealand, particularly with our Pacific neighbours and RSE workers.</li> <li>A memo containing a list of recognised vaccines will be drafted, circulated to CV TAG for approval, and then shared with the Public Health Policy team.</li> <li>CV TAG will continue to monitor all relevant information (including vaccine efficacy, variants, booster and/or third doses) and will update their recommendations.</li> </ul>
7.0	<p><b>Next Steps/Decisions Pending</b></p> <p>None.</p>

8.0	<p><b>Any Other Business</b></p> <p><b>Vaccine rollout</b></p> <p>The Chair provided an update on the vaccine rollout. Work on procuring additional doses is underway, and announcements are expected soon.</p> <p>It was requested that the Secretariat collate information on the rollout plan final stages and data on equity coverage from CVIP to share at the next meeting.</p> <p><b>Decision to Use Janssen</b></p> <p>CV TAG were advised that New Zealand is likely to receive some doses this year (around 100,000). CV TAG's previous advice had been to make the vaccine available to a small group of people who are unable to take Pfizer, with the remaining doses being donated. Policy asked if the advice from CV TAG was the same or needed updating.</p> <p>In general, the prior advice was considered to still be applicable.</p> <p>Updated efficacy and effectiveness data was requested from the Science and Technical Advisory team and will be included in next week's regular Science Updates.</p> <p><b>Extension dose protocol for missed vaccination events</b></p> <p>This memo was finalised yesterday and shared with CVIP. It is intended to be a general framework applicable across the system but will also inform actions at Highbrook.</p> <p>It was requested that a final version be shared with the Immunisation Advisory Centre.</p>																				
9.0	<p><b>Agenda items for next meeting</b></p> <p>Science Updates</p> <p>Third dose for immunocompromised</p> <p>Vaccines recognised for returnees</p>																				
10.0	<p><b>New Action Items Raised During Meeting</b></p> <table border="1" data-bbox="225 1350 1474 2033"> <thead> <tr> <th data-bbox="225 1350 309 1424">#</th> <th data-bbox="309 1350 612 1424">Agenda item</th> <th data-bbox="612 1350 1107 1424">Actions</th> <th data-bbox="1107 1350 1474 1424">Action Owner</th> </tr> </thead> <tbody> <tr> <td data-bbox="225 1424 309 1574">51</td> <td data-bbox="309 1424 612 1574">Third Dose for Immunocompromised</td> <td data-bbox="612 1424 1107 1574">Convene subgroup to redraft recommendations</td> <td data-bbox="1107 1424 1474 1574">Science and Technical Advisory</td> </tr> <tr> <td data-bbox="225 1574 309 1724">52</td> <td data-bbox="309 1574 612 1724">Vaccines Recognised for Returnees</td> <td data-bbox="612 1574 1107 1724">Draft CV TAG recommendations and bring back to group</td> <td data-bbox="1107 1574 1474 1724">Science and Technical Advisory</td> </tr> <tr> <td data-bbox="225 1724 309 1874">53</td> <td data-bbox="309 1724 612 1874">Vaccine rollout</td> <td data-bbox="612 1724 1107 1874">Request CVIP update on final stages of rollout plan</td> <td data-bbox="1107 1724 1474 1874">Secretariat</td> </tr> <tr> <td data-bbox="225 1874 309 2033">54</td> <td data-bbox="309 1874 612 2033">Vaccine rollout</td> <td data-bbox="612 1874 1107 2033">Request CVIP data on coverage by ethnicity</td> <td data-bbox="1107 1874 1474 2033">Secretariat</td> </tr> </tbody> </table>	#	Agenda item	Actions	Action Owner	51	Third Dose for Immunocompromised	Convene subgroup to redraft recommendations	Science and Technical Advisory	52	Vaccines Recognised for Returnees	Draft CV TAG recommendations and bring back to group	Science and Technical Advisory	53	Vaccine rollout	Request CVIP update on final stages of rollout plan	Secretariat	54	Vaccine rollout	Request CVIP data on coverage by ethnicity	Secretariat
#	Agenda item	Actions	Action Owner																		
51	Third Dose for Immunocompromised	Convene subgroup to redraft recommendations	Science and Technical Advisory																		
52	Vaccines Recognised for Returnees	Draft CV TAG recommendations and bring back to group	Science and Technical Advisory																		
53	Vaccine rollout	Request CVIP update on final stages of rollout plan	Secretariat																		
54	Vaccine rollout	Request CVIP data on coverage by ethnicity	Secretariat																		

	55	Extension dose protocol for missed vaccination events	Share finalised memo with Immunisation Advisory Centre	Secretariat
Meeting closed at <b>12:01pm</b>				
Next meeting: <b>Tuesday 14 September – 11:00am to 12:00pm</b>				

### Open Actions:

#	Agenda item	Actions	Action Owner	Updates
49	Pfizer dosing error	Compile further evidence on the link between dosing intervals and reactogenicity.	Science and Technical Advisory	31/08 – Action raised
51	Third Dose for Immunocompromised	Convene subgroup to redraft recommendations	Science and Technical Advisory	07/09 – Action raised
52	Vaccines Recognised for Returnees	Draft CV TAG recommendations and bring back to group	Science and Technical Advisory	07/09 – Action raised
53	Vaccine rollout	Request CVIP update on final stages of rollout plan	Secretariat	07/09 – Action raised
54	Vaccine rollout	Request CVIP data on coverage by ethnicity	Secretariat	07/09 – Action raised
55	Extension dose protocol for missed vaccination events	Share finalised memo with Immunisation Advisory Centre	Secretariat	07/09 – Action raised

### Closed Actions Since Last Meeting:

#	Agenda item	Actions	Action Owner	Updates
34	Myocarditis after Pfizer Vaccination	Compile information on cardiac-related events associated with other vaccines in New Zealand's portfolio.	Secretariat	13/07 - Action raised 27/07 - Drafted. Awaiting peer review 07/09 – Closed

50	Other COVID-19 Vaccines that New Zealand Could Recognise for Border Workers	Update memo and share with Public Health.	ST	31/08 – Action raised 06/09 – Action closed
48	MMR/Influenza Coadministration	Follow-up on announcement.	Chair	31/08 – Action raised 08/09 – Action closed

RELEASED UNDER THE OFFICIAL INFORMATION Act 1982

# MINUTES: COVID-19 Vaccine Technical Advisory Group

**Date:** Tuesday 14 September 2021

**Time:** 11:00am to 12:00pm

**Location:** Out of scope

**Chair:** Ian Town

**Members:** David Murdoch, Elizabeth Wilson, Helen Petousis-Harris, Ian Frazer, James Ussher, Nikki Turner, Peter McIntyre, Sean Hanna, Tony Walls

**Ministry of Health Attendees:** Andi Shirtcliffe, Brooke Hollingshead, Chriselle Braganza, Daniel Bernal, Edwin Reynolds, Fiona Callaghan, Juliet Rumball-Smith, Pippa Scott, Shayma Faircloth

**Guests:** John Tait, Maria Cotter

**Apologies:** Caroline McElnay, Kris Golding, Niki Stefanogiannis, Nikki Moreland, Sue Crengle

1.0	<p><b>Welcome and previous minutes</b></p> <p>Ian Town welcomed all Members and Attendees in his capacity as Chair of the COVID-19 Vaccine Technical Advisory Group (CV TAG).</p> <p>Minutes of the last meeting (07 September 2021) were accepted.</p>
2.0	<p><b>Science Updates</b></p> <p>The Science and Technical Advisory provided an update on New Zealand's vaccine candidates:</p> <ul style="list-style-type: none"> <li>• There are no new data on Novavax, including on its use as a potential booster dose or in a heterologous schedule. Medsafe continues to wait for further evidence as part of its application.</li> <li>• Data has emerged for Pfizer that longer intervals between doses produce higher antibody titres but lower T Cell responses. There is also some evidence that immunity may wane markedly in the elderly, and some further evidence on vaccine efficacy against Delta.</li> <li>• Pfizer is now fully approved in Switzerland, the US, Brazil and Japan.</li> <li>• One article reported a higher risk of myocarditis for 12-15-year-olds in data from the US, however CV TAG noted there were significant issues with the data, and they await further information.</li> </ul>
3.0	<p><b>Research in Children</b></p> <p>This item was covered under agenda item 2.0 Science Updates.</p>
4.0	<p><b>Vaccine Rollout</b></p> <p>The Chair provided an update on the vaccine rollout to CV TAG:</p> <ul style="list-style-type: none"> <li>• The outbreak continues to dominate much of the work at the Ministry, however, the vaccine rollout continues at pace. The programme has adopted CV TAG's advice on using vaccines as a</li> </ul>



	<p>control measure in an outbreak through strong advice to Aucklanders to get vaccinated and greater efforts to roll the vaccine out in Auckland focussing on Pacific and Maori communities.</p> <ul style="list-style-type: none"> <li>• Further supply has now been secured from Spain and Denmark.</li> <li>• Data on vaccination rates for Māori and Pacific Peoples were shared showing some improvement in uptake.</li> </ul>
5.0	<p><b>Third Dose for Immunocompromised</b></p> <ul style="list-style-type: none"> <li>• A subgroup of CV TAG met to revise the recommendations on administering additional doses to the immunocompromised.</li> <li>• The UK's Joint Committee on Vaccination and Immunisation (JCVI) criteria for immunocompromise was noted as a clear and prescriptive set of criteria that New Zealand could follow capturing individuals with severe immunocompromise</li> <li>• Other important measures for the protection of the immunocompromised include: 'ring-fencing' vulnerable people by vaccinating household members; continuing other public health measures (such as masking).</li> <li>• The additional dose is a 'top-up' or third primary dose, as opposed to a booster dose.</li> <li>• Serology is not considered a useful tool, as a correlate of protection has not been established, among other reasons.</li> <li>• Discussion with Medsafe will be required in order to implement the additional dose.</li> <li>• In general, the additional dose is to be given 8 weeks or more after the second dose.</li> <li>• The JCVI recommendations will be further checked to ensure they align with the IMAC handbook for special groups, finalised, and shared with CVIP. It could be added to the Immunisation Handbook.</li> <li>• The extension dose protocol will also be updated to refer to this definition of immunocompromise, rather than the CDC list that was used prior.</li> </ul>
6.0	<p><b>Vaccines Recognised for Arrivals</b></p> <ul style="list-style-type: none"> <li>• Advice was sought on which vaccines would be required for travellers during the phased easing of border restrictions and whether the standard for Border Workers could apply, or whether the broader WHO list could be recognised (with Sinopharm and Sinovac).</li> <li>• In general, the broader WHO list was considered to provide an acceptable level of protection for people arriving to the country. All these vaccines offer some protection against severe disease. However, people fully or partially vaccinated with Sinovac and Sinopharm may need an additional dose of the Pfizer vaccine to gain sufficient protection.</li> <li>• Other considerations include: the requirements for children and adolescents (aged 12-15); the requirements for an additional dose for individuals already in the country who have received Sinopharm or Sinovac</li> <li>• Vaccine recognition policies for Border Workers should also be considered for healthcare workers as they also work in high-exposure settings.</li> <li>• A further and separate discussion is needed on Janssen as any decisions on additional dose requirements for arrivals may impact on the decision to use more broadly.</li> <li>• CV TAG will continue to monitor emerging evidence. The recommendations on vaccines to be recognised will be brought back to CV TAG prior to the pathways being finalised.</li> <li>• Preliminary advice that all inbound travellers going into MIQ from 1 November should have been vaccinated (with any vaccine) was noted and supported.</li> </ul>

7.0	<b>Next Steps/Decisions Pending</b> None.		
8.0	<b>Any Other Business</b> <ul style="list-style-type: none"> <li><b>Extension dose protocol</b> The Chair updated CV TAG that the extension dose protocol for missed vaccination events has been implemented with letters out to those affected through the Highbrook incident.</li> <li><b>Decision to Use Janssen</b> The Chair also shared that New Zealand will be receiving about 100,000 doses of the Janssen vaccine initially. There is a small group of people who would prefer not to get an mRNA vaccine, and the Janssen vaccine will be made available to them in key centres, alongside those with a history of anaphylaxis.</li> </ul>		
9.0	<b>Agenda items for next meeting</b> Vaccines recognised for arrivals.		
10.0	<b>New Action Items Raised During Meeting</b>		
	<b>#</b>	<b>Agenda item</b>	<b>Actions</b>
	56	Third dose for immunocompromised	Finalise recommendations and share with CVIP
			<b>Action Owner</b> Science and Technical Advisory
Meeting closed at <b>12:04pm</b>			
Next meeting: <b>Tuesday 21 September – 11:00am to 12:00pm</b>			

**Open Actions:**

#	Agenda item	Actions	Action Owner	Updates
49	Pfizer dosing error	Compile further evidence on the link between dosing intervals and reactogenicity.	Science and Technical Advisory	31/08 – Action raised
52	Vaccines Recognised for Returnees	Draft CV TAG recommendations and bring back to group	Science and Technical Advisory	07/09 – Action raised
56	Third dose for immunocompromised	Finalise recommendations and share with CVIP	Science and Technical Advisory	14/09 – Action raised

**Closed Actions Since Last Meeting:**

#	Agenda item	Actions	Action Owner	Updates
51	Third Dose for Immunocompromised	Convene subgroup to redraft recommendations	Science and Technical Advisory	07/09 – Action raised 09/09 – Action closed.
53	Vaccine rollout	Request CVIP update on final stages of rollout plan	Secretariat	07/09 – Action raised 14/09 – Action closed
54	Vaccine rollout	Request CVIP data on coverage by ethnicity	Secretariat	07/09 – Action raised 14/09 – Action closed
55	Extension dose protocol for missed vaccination events	Share finalised memo with Immunisation Advisory Centre	Secretariat	07/09 – Action raised 09/09 – Action closed

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

# MINUTES: COVID-19 Vaccine Technical Advisory Group

**Date:** Tuesday 21 September 2021

**Time:** 11:00am to 12:00pm

**Location:** Out of scope

**Chair:** Ian Town

**Members:** David Murdoch, Elizabeth Wilson, Helen Petousis-Harris, Ian Frazer, James Ussher, Nikki Moreland, Nikki Turner, Peter McIntyre, Sue Crengle, Tony Walls

**Ministry of Health Attendees:** Brooke Hollingshead, Chriselle Braganza, Daniel Bernal, Edwin Reynolds, Fiona Callaghan, Juliet Rumball-Smith, Niki Stefanogiannis, Pippa Scott, Shayma Faircloth

**Guests:** Kris Golding, Maria Cotter

**Apologies:** Andi Shirtcliffe, Caroline McElnay, John Tait, Sean Hanna

<p><b>1.0</b></p>	<p><b>Welcome and previous minutes</b></p> <p>Ian Town welcomed all Members and Attendees in his capacity as Chair of the COVID-19 Vaccine Technical Advisory Group (CV TAG).</p> <p>Minutes of the last meeting (14 September 2021) were accepted.</p>
<p><b>2.0</b></p>	<p><b>Vaccine Rollout</b></p> <p>The Chair provided an update on the vaccine rollout:</p> <ul style="list-style-type: none"> <li>• Increasing access to vaccination in suburbs affected by the current outbreak is a focus currently.</li> <li>• A range of initiatives are underway (e.g., mobile vaccine buses), with discussions about incentives and ways to reduce barriers.</li> <li>• Discussions are occurring with the Ministry of Education about administering vaccines to 12–15-year-olds and their families in education settings</li> <li>• Progress with vaccination is increasing steadily with the number of first doses administered expected to reach 80% in the next few days.</li> </ul>
<p><b>3.0</b></p>	<p><b>Third Dose for Immunocompromised</b></p> <p>The draft memo with recommendations for severely immunocompromised people to receive an additional dose of the Pfizer vaccine was shared with CV TAG.</p> <ul style="list-style-type: none"> <li>• CV TAG's recommendations align with advice given in the IMAC handbook for the severely immunocompromised. STA will keep a watching brief on the other conditions included in the IMAC handbook associated with non-severe immunocompromise, namely asplenic, diabetes and dialysis. These will be updated as further evidence emerges.</li> <li>• Medsafe and the Ministry of Health's legal team have reviewed the definition of who can administer the additional dose.</li> </ul>

	<ul style="list-style-type: none"> <li>• The Cancer Control Agency have been consulted and agreed that the CV TAG advice aligns with their advice regarding severe immunocompromise.</li> <li>• The dose will be framed as an 'additional dose' for clarity.</li> <li>• The advice will be signed out and shared with CVIP and IMAC.</li> </ul>
<p><b>4.0</b></p>	<p><b>Vaccines Recognised for Arrivals</b></p> <ul style="list-style-type: none"> <li>• A draft memo was presented to CV TAG with recommendations that from 1 November, everyone entering 14 days MIQ in New Zealand will need to be vaccinated. The memo specifies that: <ul style="list-style-type: none"> <li>○ Arrivals should have had a full course with one of the 22 vaccines approved by regulatory authorities or governments around the world, at least 14 days prior to arrival.</li> <li>○ Those vaccinated with a non-WHO vaccine will require an additional dose of the Pfizer vaccine on leaving MIQ.</li> <li>○ An exemption process will be available for countries without access to vaccines for 12-15-year-olds, who will be offered Pfizer vaccination.</li> <li>○ Vaccine status will be self-reported with any form of proof accepted by the airline at check-in, and on arrival at customs.</li> <li>○ The purpose of introducing vaccine requirements for MIQ is not to stop transmission into the community, but rather about allowing equitable entry, and protection to the same extent as others in New Zealand.</li> </ul> </li> <li>• Between 24 August and 17 September 2021, of the 2,438 MIQ guests during this period, 2,218 (91%) were fully vaccinated, and only 14 people (0.6%) were unvaccinated, and therefore it is expected to affect a small proportion of people.</li> <li>• Some concern was raised about the efficacy of Sinopharm and Sinovac.</li> <li>• Data was also requested on the positivity rate of tests at Day 3 and 10 in MIQ, and Day 6 when available. Shortened MIQs for vaccinated travellers will be discussed at a later date.</li> <li>• Additional doses should be administered as soon as possible once people arrive to New Zealand, with the advantage of time in MIQ being utilised. At the latest, they could be administered on leaving MIQ. Additional doses after leaving MIQ would result in inequities in uptake and access. It was noted that there were workload and operational concerns with administering doses while in MIQ.</li> <li>• The requirement of having to have been vaccinated at least 14 days prior to arriving to MIQ was considered to be unnecessarily restrictive.</li> <li>• The issue of whether healthcare workers vaccinated with Janssen should receive an extra dose of Pfizer was raised, due to the enhanced need for protection of a high-risk occupation. This will feed into broader work on vaccines, including vaccines to recognise for seasonal workers and those for new arrivals as part of the traveller-risk pathways. The evidence in this area is evolving and therefore STA and CV TAG will continue to monitor new information as it emerges and make updates as required.</li> </ul>
<p><b>5.0</b></p>	<p><b>Third Booster Doses</b></p> <ul style="list-style-type: none"> <li>• The recommendations made by the UK's Joint Committee on Vaccination and Immunisation to administer booster doses to all aged over 50 were brought to CV TAG for discussion.</li> <li>• It was flagged that evidence is accumulating on waning in the elderly. Those aged over 65 and/or vulnerable subgroups are likely to need a booster dose. However, it is still unclear when this should occur and in which subpopulations, and further evidence is required.</li> <li>• The STA team will begin a work programme to start building the evidence base for potential booster doses in the elderly, and this will be brought back to CV TAG.</li> </ul>

6.0	<p><b>Decision to use for 12–15-year-olds</b></p> <ul style="list-style-type: none"> <li>Considering the UK's decision to not vaccinate this age group, it was queried whether this decision should be revisited, and/or for only single doses to be administered.</li> <li>Aotearoa New Zealand's population is immunologically naïve and therefore it is still important that this population is vaccinated with two doses.</li> <li>However, greater emphasis is needed on the benefits provided by longer dosing intervals, with CV TAG expressing concern that intervals of 3 weeks were becoming more common in Auckland's outbreak.</li> <li>The opportunity for CV TAG position statements to be shared publicly was noted as something that could be explored in order to reinforce the current recommendation of 6 weeks.</li> <li>The new Pfizer results released showing a robust immune response in 5–11-year-olds given a 2 lower doses of the Pfizer vaccine were discussed. CV TAG will continue to follow the evidence as it emerges and raise any questions when meeting with Pfizer this week.</li> <li>No change to the current guidance.</li> </ul>																			
7.0	<p><b>Next Steps/Decisions Pending</b></p> <p>None.</p>																			
8.0	<p><b>Any Other Business</b></p> <p>Concern was raised with Dr Shane Reti incorrectly commenting on RNZ (21 September) that an interval of 1 week was being considered, with the vaccine not being approved by Medsafe for this interval. Engagement with his office is required.</p>																			
9.0	<p><b>Agenda items for next meeting</b></p> <p>Vaccines recognised for MIQ entry</p> <p>Vaccines recognised for Recognised Seasonal Employer (RSE) workers</p>																			
10.0	<p><b>New Action Items Raised During Meeting</b></p> <table border="1" data-bbox="285 1435 1410 2027"> <tr> <td data-bbox="285 1435 376 1581">57</td> <td data-bbox="376 1435 660 1581">Third dose for immunocompromised</td> <td data-bbox="660 1435 1023 1581">Share finalised recommendations with IMAC</td> <td data-bbox="1023 1435 1410 1581">Secretariat</td> </tr> <tr> <td data-bbox="285 1581 376 1727">58</td> <td data-bbox="376 1581 660 1727">Vaccines recognised for arrivals</td> <td data-bbox="660 1581 1023 1727">Share lists of vaccines approved with their efficacies to inform discussion</td> <td data-bbox="1023 1581 1410 1727">Science and Technical Advisory</td> </tr> <tr> <td data-bbox="285 1727 376 1872">59</td> <td data-bbox="376 1727 660 1872">Vaccines recognised for arrivals</td> <td data-bbox="660 1727 1023 1872">Request data on positivity rates from MIQ testing requirements</td> <td data-bbox="1023 1727 1410 1872">Science and Technical Advisory</td> </tr> <tr> <td data-bbox="285 1872 376 2027">60</td> <td data-bbox="376 1872 660 2027">Third booster doses</td> <td data-bbox="660 1872 1023 2027">Compile evidence on need for booster doses</td> <td data-bbox="1023 1872 1410 2027">Science and Technical Advisory</td> </tr> </table>				57	Third dose for immunocompromised	Share finalised recommendations with IMAC	Secretariat	58	Vaccines recognised for arrivals	Share lists of vaccines approved with their efficacies to inform discussion	Science and Technical Advisory	59	Vaccines recognised for arrivals	Request data on positivity rates from MIQ testing requirements	Science and Technical Advisory	60	Third booster doses	Compile evidence on need for booster doses	Science and Technical Advisory
57	Third dose for immunocompromised	Share finalised recommendations with IMAC	Secretariat																	
58	Vaccines recognised for arrivals	Share lists of vaccines approved with their efficacies to inform discussion	Science and Technical Advisory																	
59	Vaccines recognised for arrivals	Request data on positivity rates from MIQ testing requirements	Science and Technical Advisory																	
60	Third booster doses	Compile evidence on need for booster doses	Science and Technical Advisory																	

	61	Decision to use 12-15-year-olds	Reshare statement on the benefit of longer dosing intervals	Secretariat
	62	Any other business	Discuss Pfizer dosing interval with Reti's office	Secretariat
Meeting closed at <b>11:51am</b>				
Next meeting: <b>Tuesday 28 September – 11:00am to 12:00pm</b>				

### Open Actions:

#	Agenda item	Actions	Action Owner	Updates
49	Pfizer dosing error	Compile further evidence on the link between dosing intervals and reactogenicity.	Science and Technical Advisory	31/08 – Action raised
56	Third dose for immunocompromised	Finalise recommendations and share with CVIP	Science and Technical Advisory	14/09 – Action raised
57	Third dose for immunocompromised	Share finalised recommendations with IMAC	Secretariat	21/09 – Action raised
58	Vaccines recognised for arrivals	Share lists of vaccines approved with their efficacies to inform discussion	Science and Technical Advisory	21/09 – Action raised
59	Vaccines recognised for arrivals	Request data on positivity rates from MIQ testing requirements	Science and Technical Advisory	21/09 – Action raised
60	Third booster doses	Compile evidence on need for booster doses	Science and Technical Advisory	21/09 – Action raised
61	Decision to use 12-15-year-olds	Reshare statement on the benefit of longer dosing intervals	Secretariat	21/09 – Action raised
62	Any other business	Discuss Pfizer dosing interval with Reti's office	Secretariat	21/09 – Action raised

### Closed Actions Since Last Meeting:

#	Agenda item	Actions	Action Owner	Updates
52	Vaccines Recognised for Returnees	Draft CV TAG recommendations and bring back to group	Science and Technical Advisory	07/09 – Action raised 21/09 - Action closed

RELEASED UNDER THE OFFICIAL INFORMATION Act 1982



## MINUTES: COVID-19 Vaccine Technical Advisory Group

<b>Date:</b>	Tuesday 05 October 2021
<b>Time:</b>	11:00am to 12:00pm
<b>Location:</b>	Out of scope
<b>Chair:</b>	Ian Town
<b>Members:</b>	David Murdoch, Elizabeth Wilson, Ian Frazer, James Ussher, Nikki Moreland, Peter McIntyre, Sean Hanna, Sue Crengle, Tony Walls
<b>Ministry of Health Attendees:</b>	Andi Shirtcliffe, Brooke Hollingshead, Chriselle Braganza, Daniel Bernal, Edwin Reynolds, Erin Smith, Fiona Callaghan, Juliet Rumball-Smith, Pippa Scott
<b>Guests:</b>	Kris Golding, Mariana Traslosheros Reyes
<b>Apologies:</b>	Caroline McElnay, Helen Petousis-Harris, John Tait, Niki Stefanogiannis, Nikki Turner

<b>1.0</b>	<p><b>Welcome and previous minutes</b></p> <p>Ian Town welcomed all Members and Attendees in his capacity as Chair of the COVID-19 Vaccine Technical Advisory Group (CV TAG).</p> <p>Minutes of the last meeting (21 September 2021) were accepted.</p>
<b>2.0</b>	<p><b>Vaccine Rollout</b></p> <p>The Chair provided an update on the vaccine rollout:</p> <ul style="list-style-type: none"> <li>• The vaccine rollout continues to gather momentum, and further work is underway to engage with at-risk communities through local providers and a focus on providing encouragement to those who are hesitant about getting the vaccine.</li> <li>• It has been agreed that the default booking rules change back to a three-week interval, due to the changing context of the Delta outbreak and the increased potential for circulating virus, there is an increased need to get second doses administered</li> <li>• The shift of resources to administering second doses was seen as anti-equity as it may divert focus from outreach to Māori and Pasifika who have not yet had first doses, however it was noted there is no shortage of vaccines or appointments to do both.</li> <li>• There was some discussion on whether a longer interval should be kept for adolescents and young people &lt;30 due to wanting more data on the connection between intervals and side effects.</li> <li>• A shift back to three-week intervals would likely see an increase in people receiving their second dose before the minimum of 21 days, and therefore continued communication on the minimum interval between doses was needed.</li> </ul>

<p><b>3.0</b></p>	<p><b>Vaccines recognised for MIQ entry and RSE workers</b></p> <ul style="list-style-type: none"> <li>• Recommendations on the vaccination requirements for entering MIQ have been sent to CVIP. A person can enter MIQ if they have been fully vaccinated with the COVID-19 vaccines approved by at least one government or authority around the world. Those who have been vaccinated with a vaccine that is not approved by Medsafe or a Medsafe-approved authority will be offered an additional dose of the Pfizer vaccine.</li> <li>• Recommendations on the vaccine requirements for RSE workers arriving to New Zealand have been shared with Global Health and the Realm countries. While RSE workers were encouraged to be fully vaccinated before arriving, some will arrive having only had one dose. RSE workers who have had a full course of AstraZeneca are considered fully vaccinated. Those who have only had one dose of AZ, or who have been vaccinated with Sinopharm (one or two doses) will be offered an additional dose of Pfizer.</li> </ul>
<p><b>4.0</b></p>	<p><b>Supporting evidence for Health Care Worker vaccination order</b></p> <p>Evidence in support of the mandatory vaccination of healthcare workers was reviewed by CV TAG:</p> <ul style="list-style-type: none"> <li>• The evidence was largely focussed on experience the Delta VOC and the benefits of the Pfizer, vaccine, however other vaccines were also included in case healthcare workers may have been vaccinated in other countries with other vaccines.</li> <li>• A high level of individual protection against infection and disease is offered by the Pfizer vaccine. This was seen as of importance to protect healthcare workers but also to ensure workforce capacity remains steady.</li> <li>• Preliminary evidence of the impact of vaccination on transmission is promising although protection against transmission may wane. Further evidence on this will be reviewed, with a particular focus on the impact of furloughing healthcare workers due to their being contacts.</li> </ul>
<p><b>5.0</b></p>	<p><b>VAANZ vaccine candidate development update and Research Project</b></p> <p>An update was provided on the VAANZ vaccine candidates and research:</p> <ul style="list-style-type: none"> <li>• VAANZ now have two second generation COVID-19 vaccine candidates in the process of advancing to manufacturing: An adjuvant sub-unit protein booster vaccine targeted to the Delta variant, and a pan-coronavirus vaccine in development with Trans-Tasman partners, as part of an mRNA platform to protect broadly across coronaviruses</li> <li>• Phase 1 clinical trials for each of these candidates are expected to be running by early 2023.</li> <li>• Research is underway to assess immunogenicity of the COVID-19 vaccine in recipients aged over 16, and to assess differences in the immune response by ethnicity, age, and presence of comorbidities. The study is fully-enrolled (302 recruited) including 29% Māori and 30% Pacific Peoples. Data is expected in December 2021.</li> </ul>
<p><b>6.0</b></p>	<p><b>BMI needle length study update</b></p> <p>An update was also provided by the Ministry's Post-Events team on the BMI needle length study:</p> <ul style="list-style-type: none"> <li>• Recruitment is underway with about 100 participants currently recruited from the Mt Wellington vaccination centre.</li> <li>• However, the current lockdown restrictions in Auckland have provided challenges and further funding has been requested from the Ministry of Health. A budget reforecasting is underway, and the project will have a longer run time.</li> </ul>

<b>7.0</b>	<b>Science Updates</b> This item was not discussed.								
<b>8.0</b>	<b>Next Steps/Decisions Pending</b> None.								
<b>9.0</b>	<b>Any Other Business</b> None.								
<b>10.0</b>	<b>Agenda items for next meeting</b> Items that will be brought to CV TAG in the near future include: <ul style="list-style-type: none"> <li>• Decision to Use for 5–11-year-olds and priority groups</li> <li>• Vaccine boosters for healthcare workers and the elderly</li> <li>• Decision to Use for AstraZeneca (due to potential delays of Janssen)</li> <li>• Further discussions of vaccine requirements at the border</li> </ul>								
<b>11.0</b>	<b>New Action Items Raised During Meeting</b> <table border="1" data-bbox="327 875 1369 1095"> <thead> <tr> <th>#</th> <th>Agenda item</th> <th>Actions</th> <th>Action Owner</th> </tr> </thead> <tbody> <tr> <td>63</td> <td>Vaccines recognised for MIQ entry and RSE workers</td> <td>Share finalised memos with CV TAG</td> <td>Secretariat</td> </tr> </tbody> </table>	#	Agenda item	Actions	Action Owner	63	Vaccines recognised for MIQ entry and RSE workers	Share finalised memos with CV TAG	Secretariat
#	Agenda item	Actions	Action Owner						
63	Vaccines recognised for MIQ entry and RSE workers	Share finalised memos with CV TAG	Secretariat						
Meeting closed at <b>12:03pm</b> Next meeting: <b>Tuesday 19 October – 11:00am to 12:00pm</b>									

**Open Actions:**

#	Agenda item	Actions	Action Owner	Updates
49	Pfizer dosing error	Compile further evidence on the link between dosing intervals and reactogenicity.	Science and Technical Advisory	31/08 – Action raised
59	Vaccines recognised for arrivals	Request data on positivity rates from MIQ testing requirements	Science and Technical Advisory	21/09 – Action raised
60	Third booster doses	Compile evidence on need for booster doses	Science and Technical Advisory	21/09 – Action raised
63	Vaccines recognised for MIQ entry and RSE workers	Share finalised memos with CV TAG	Secretariat	5/10 – Action raised

**Closed Actions Since Last Meeting:**

#	Agenda item	Actions	Action Owner	Updates
52	Vaccines Recognised for Returnees	Draft CV TAG recommendations and bring back to group	Science and Technical Advisory	07/09 – Action raised 21/09 - Action closed
56	Third dose for immunocompromised	Finalise recommendations and share with CVIP	Science and Technical Advisory	14/09 – Action raised 21/09 – Action closed
57	Third dose for immunocompromised	Share finalised recommendations with IMAC	Secretariat	21/09 – Action raised 21/09 – Action closed
58	Vaccines recognised for arrivals	Share lists of vaccines approved with their efficacies to inform discussion	Science and Technical Advisory	21/09 – Action raised 21/09 – Action closed
61	Decision to use 12-15-year-olds	Reshare statement on the benefit of longer dosing intervals	Secretariat	21/09 – Action raised 21/09 – Action closed
62	Any other business	Discuss Pfizer dosing interval with Reti's office	Secretariat	21/09 – Action raised 21/09 – Action closed

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982