


**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group****Vaccine Utilisation and Prioritisation Sub Group #1****Teleconference 9:30 – 10:30am****15 September 2020****Outcomes**


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**In attendance:****Members**

Katie Flanagan  
 Bette Lieu  
 Chris Blyth  
 Tom Snelling  
 Jodie McVernon  
 Angus Dawson  
 Kanta Subbarao

**NCIRS Technical staff**s11C  
**Department of Health representatives**s47E(c), s47F  


Sarah Sinclair

s47E(c), s47F  
**1. Meeting Opened**

Members:

- Acknowledgement of Country

**2. Welcome and Apologies/General committee business**

Members:

- NOTED attendees and apologies
- DECLARED conflicts of interest – Nil
- Members introduced themselves

**3. Terms of Reference and Role of Sub Group**

Members:

- NOTED the Working Group's Terms of Reference
- DISCUSSED role of the Vaccine Utilisation and Prioritisation Sub Group

**4. Brief Introductions**

Members:

- NOTED introductions

**5. Brief overview of support from NCIRS**

Members:

- NOTED NCIRS continued contribution to Sub Group

## 6. Prioritisation matrix and preliminary advice document

Action:

Action	Responsible officer/s	Progress
6.1 Update and finalise ATAGI COVID Vaccine Preliminary Advice document and Prioritisation Matrix in line with the Preliminary COVID-19 vaccination priority groups <ul style="list-style-type: none"> <li>• Review and edit preliminary advice document</li> <li>• List prioritisation principles with no reference to ranking</li> <li>• Remove colour coding.</li> <li>• Map cohorts to the prioritisation principles</li> <li>• Insert caveat for all principles where information is not available</li> </ul>	* Sub Group Members * NCIRS * Co-chairs	Complete

7. Meeting Closed: 10.45am

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Vaccine Utilisation and Prioritisation Sub Group Meeting #2**

**Teleconference 9:00 – 10:00am**

**22 September 2020**

**Outcomes**

**In attendance:**

**Members**

Katie Flanagan  
Bette Lieu  
Chris Blyth  
Tom Snelling  
Jodie McVernon  
Angus Dawson  
Kanta Subbarao

**NCIRS Technical staff**

s11C



**Department of Health representatives**

s47E(c), s47F



**1. Meeting Opened**

Members:

- Acknowledgement of Country

**2. Welcome and Apologies/General committee business**

Members:

- NOTED attendees and apologies
- DECLARED conflicts of interest – Nil
- NOTED Christine Selvey would join the Subgroup subject to confidentiality form

**3. Prioritisation matrix and preliminary advice document – summary and future planning**

Members:

- DISCUSSED the prioritisation and preliminary advice document
- DISCUSSED the Subgroup's overarching strategy and planning for different scenarios
- NOTED the need for further expertise such as data modelling

Action	Responsible officer/s	Progress
3.1 Gather data on numbers of aged care workers, health care workers and people in at-risk occupations in states/territories to guide decision making	NCIRS	In progress
3.2 Develop a request for consideration by the Taskforce	s47F in consultation with members	In progress

outlining key input and expertise required by this Subgroup		
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#### 4. Information needed from NCIRS

Members:

- NOTED NCIRS is gathering information on at-risk groups, including local data
- NOTED the National Incident Room (NIR) has useful state and territory data

Action	Responsible officer/s	Progress
4.1 Circulate data on at-risk groups to members	NCIRS	In progress
4.2 Gather data on specific populations to understand the landscape	NCIRS	In progress
4.3 Contact NIR and request presentation on latest data eg NSW data on health care workers and VIC data	Secretariat in consultation with s47F	In progress

#### 5. Astra Zeneca ChAdOx1/AZD1222 and UQ Molecular Clamp vaccines

Members:

- NOTED AstraZeneca will be meeting with the Working Group Executive shortly
- NOTED a list of questions for AstraZeneca has been developed by NCIRS

Action	Responsible officer/s	Progress
5.1 Circulate questions for AstraZeneca to members for comment	Secretariat	Completed

#### 6. Other Business

Action	Responsible officer/s	Progress
6.1 Prepare a summary list of documents under development by NCIRS for the sharepoint site to assist with tracking and identifying gaps	s11C	In progress

#### 7. Meeting frequency / times

Members:

- NOTED meetings to be held weekly on Tuesday at 3.30pm (no meeting next week)
- NOTED videoconferences would be arranged for future meetings

#### 8. Meeting Closed: 10.00am approx

**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Vaccine Utilisation and Prioritisation Sub Group Meeting #3**

**Teleconference 3.30-4.30pm**

**6 October 2020**

**Outcomes**

**In attendance:**

**Members**

Katie Flanagan (Lead)  
Chris Blyth  
Jodie McVernon  
Angus Dawson  
Kanta Subbarao  
s11C  
David Durrheim  
Christine Selvey (part meeting)

**NCIRS Technical staff**

s11C

**Department of Health representatives**

s47E(c), s47F

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED the Acknowledgement to Country

**2. Welcome and Apologies/General committee business**

Members:

- NOTED attendees and apologies (Bette Lieu, Tom Snelling, Penny Burns, Christopher Etherton-Beer, James Wood)
- DECLARED conflicts of interest – Nil

**3. Outcomes from previous meeting**

Members:

- ENDORSED outcomes from the previous meeting on 22 September 2020
- NOTED the meeting to be held with AstraZeneca on 20 October 2020 involving ATAGI members, NCIRS and Departmental staff

#### 4. Update from Executive Team meeting

Members:

- NOTED the Executive Team would consider and endorse Subgroup papers
- DISCUSSED a proposal to publish names of Subgroup members for transparency and to demonstrate diversity and expertise in informing decisions, with any objections to be raised through the Secretariat or Subgroup Lead

#### 5. National data on COVID-19 infections

Members:

- NOTED a presentation on the *Epidemiology of COVID-19 in Australia* by Dr Martyn Kirk, Senior Epidemiologist, National Incident Room (NIR) including question and answer session
- DISCUSSED key issues and need for further data from the NIR going forward

Action	Responsible officer/s	Progress
5 Provide further questions and answers following meeting	Members/Martyn Kirk	Completed

#### 6. Prioritisation framework and ATAGI preliminary advice-revisions

Members:

- DISCUSSED further work undertaken by NCIRS using the US National Academy of Sciences approach to revise the prioritisation matrix (adaptation of tables):
  - Table1 Allocating priority phases using risk-based criteria
  - Table 2 Application to potential scenarios
- AGREED this provides an improved framework, noting further work is needed
- AGREED that the overarching aims/objectives/goals of the COVID-19 vaccination program need to be defined to assist with scenario-based planning and modelling
- AGREED to continue Subgroup discussions by email
- NOTED this work needs to be finalised for the Taskforce by the end of October 2020

Action	Responsible officer/s	Progress
6.1 Further discussion to define aims of program	Secretariat	Completed – on Executive meeting agenda for 9/10
6.2 Summarise issues and continue discussion by email	s47F and members	In progress
6.3 Complete prioritisation framework by 30 October	Members and NCIRS	In progress

#### 7. Other Business

Action	Responsible officer/s	Progress
7 Place all Subgroup agenda papers on Sharepoint	Secretariat	In progress

#### 8. Meeting Closed: 4.55pm

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 4**  
**Tuesday 13 October 2020, 3.30pm- 4.30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan - Lead Bette Lieu Chris Blyth Tom Snelling Jodie McVernon David Durrheim Angus Dawson Kanta Subbarao James Wood Christine Selvey James Ward s11C	s11C	s47E(c), s47F  Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (Penny Burns, Christopher Etherton-Beer)
- Introductions (new members – James Wood, James Ward)
- Declared no conflicts of interest

**2. Outcomes and actions from previous meeting**

- ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team meeting**

Members:

- NOTED the Executive Group agreed to publish member names on the website subject to written consent
- NOTED a half day information sharing meeting for ATAGI subgroups will be held in early November 2020

Action	Responsible officer/s	Progress
3 Seek confirmation from members to publish names on website	Secretariat	Completed

**4. Program Aims and Objectives**

Members:

- ENDORSED the following program goal: *The Australian COVID-19 vaccination program has the overarching goal of protecting all people in Australia from the harm caused by the novel coronavirus SARS-CoV-2*

**5. Decision Framework**

Members:

- DISCUSSED s47F presentation on a quantitative approach to decision making to underpin transparency and equity and noted the role of values in decision making

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 4**  
**Tuesday 13 October 2020, 3.30pm- 4.30pm**

**6. Prioritisation framework and ATAGI preliminary advice - revisions**

Members:

- NOTED the initial preliminary advice on priority populations prepared shortly after establishment of Subgroup 1 requires further work and needs to be finalised to the satisfaction of members (noting a version of this may be published at a later date)
- DISCUSSED the revised prioritisation framework, in particular the aims/objectives and the priority population tables
- AGREED to focus on refining aims and provide comments on both documents for endorsement as a package at the next meeting

Action	Responsible officer/s	Progress
6.1 Provide comments via email or Sharepoint on preliminary advice document by Friday 16/9 and prioritisation framework by Monday 19/10	Members	In progress
6.2 Collate comments and provide revised documents for next meeting	s47F and s47F	In progress

**No other business**

Meeting closed at 4.40pm

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**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 5**  
**Tuesday 20 October 2020, 2-3pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan - Lead Bette Lieu Chris Blyth Tom Snelling Jodie McVernon David Durrheim Angus Dawson James Wood James Ward s11C Penny Burns	s11C	Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (Kanta Subbarao, Christopher Etherton-Beer, Christine Selvey)
- Introductions (new members – Penny Burns)
- Declared no conflicts of interest

**2. Outcomes and actions from previous meeting**

- ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team meeting**

Members:

- NOTED a half day information sharing meeting for ATAGI subgroups will be held on 10 November 2020 from 1-5pm
- NOTED the Executive Team agreed to invite a health economist to join this group (Professor Kirsten Howard)
- NOTED the Executive Team will meet with AstraZeneca on 20 October and Seqirus on 22 October

**4. Preliminary advice on vaccine priority groups - revisions**

Members:

- DISCUSSED proposed revisions to the ATAGI Preliminary advice - COVID vaccine priority groups including:
  - Amend language around prioritisation of health care workers
  - Remove 'phases' and 'mitigating factors' from the table at this stage
  - Split age groups with further refinement possible in future
  - Insert caveat around low, medium and high risk definitions
  - Add Aboriginal and Torres Strait Islander peoples in remote areas to the text
  - Add Aboriginal and Torres Strait Islander children to the table
  - Include low socioeconomic status and culturally and linguistically diverse communities given association with increased risk of adverse outcomes
  - Remove appendix and provide link instead

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 5**  
**Tuesday 20 October 2020, 2-3pm**

- AGREED that NCIRS and s47F would make changes to the document as discussed and finalise within 24 hours
- ENDORSED the document with agreed changes

Action	Responsible officer/s	Progress
4.1 Amend and finalise preliminary advice document	NCIRS and s47F	Completed 21/10/20
4.2 Submit to Taskforce following Co-Chair Executive endorsement	Secretariat	Completed 21/10/20

**5. Revised preliminary advice on suitability of the AstraZeneca vaccine for possible priority populations**

Members:

- ENDORSED the document with no changes

Action	Responsible officer/s	Progress
5 Submit to Taskforce following endorsement by Executive	Secretariat	In progress

**6. Next steps**

Members:

- DISCUSSED the need for further information to inform decision making and development of epidemiological scenarios
- AGREED to invite a representative from the Department's data modelling team to present at the next meeting
- AGREED to use the next meeting as a brainstorming session to identify data and information needed and scenarios

Action	Responsible officer/s	Progress
Invite Department's data modellers to provide a half hour presentation on data modelling relevant to this group	Secretariat	In progress

**7. Other business**

Members:

- AGREED to invite a representative from the TGA to present at a high level on the provisional registration approval pathway
- NOTED that a presentation by s47F on ethical considerations would be useful at a future meeting
- DISCUSSED confidentiality arrangements associated with membership of this Subgroup and interactions with other committees

Action	Responsible officer/s	Progress
Invite TGA representative to present on TGA approval process	Secretariat	In progress
Liaise with s47F regarding sharing of information with the COVID-19 Aboriginal Taskforce	Secretariat	Completed

Meeting closed at approx. 3pm

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 6**  
**Tuesday, 27 October 2020, 3:30 – 4:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Chris Blyth Jodie McVernon Angus Dawson Kanta Subbarao s11C Tom Snelling Bette Lieu James Wood Penny Burns Kirsten Howard	s11C	s47E(c), s47F Sarah Sinclair s47E(c), s47F  Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (Christopher Etherton-Beer and David Durrheim)
- Introductions (new member – Kirsten Howard)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team meeting**

Members:

- NOTED that the Executive Team endorsed two papers developed by Subgroup 1:
  - Preliminary advice on vaccine priority groups;
  - Revised preliminary advice on suitability of AZ vaccine for possible priority populations.

**4. Data modelling**

- Allyson Essex (Health Economics & Modelling Branch) presented on economic modelling work undertaken by the Department's Health Economics and Research Division (HERD).

Members:

- NOTED key points including:
  - Two models: economic cost model and vaccine distribution model;
  - The models are designed to “talk to each other” and inform each other's inputs and outputs;
  - The models allow selection of various efficacy scenarios as data becomes available;
  - An epidemiological model has not yet been developed, however could be built; and
  - Additional materials may be provided including specifications and metadata.
- NOTED it would be useful for Allyson to review this Subgroup's advice on priority populations.

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 6**  
**Tuesday, 27 October 2020, 3:30 – 4:30pm**

Action	Responsible officer/s	Progress
4.1 Allyson Essex to consider further information to be provided to Subgroup 1 and liaise with members on data modelling work, including feasibility of sandpit approach	Allyson Essex	In progress

## 5. Data modelling and scenarios

### Members

- DISCUSSED:
  - Gaps and concerns about the current models, particularly the lack of health outcomes data and transmission data incorporated in the current models, epidemiological parameters and equity issues;
  - Models developed early in the pandemic by other Government departments that may be worth considering;
  - Overarching program objectives and how these are defined; and
  - The importance of shared objectives and working with Departmental modellers to achieve the best outcome for the program.
- AGREED to:
  - Offer to review the models (s47F [REDACTED]) and provide feedback to Subgroup 1
  - Discuss again at the next Subgroup 1 meeting;
  - Prepare a brief paper on gaps and recommendations for further modelling work.

Action	Responsible officer/s	Progress
5.1 Email Allyson Essex outlining Subgroup's thinking and offering to collaborate and provide input	s47F [REDACTED]	Completed
5.2 Continue discussions at Executive meeting and Subgroup 1 meetings	Secretariat	In progress
5.3 Prepare brief paper on data modelling requirements	Subgroup 1/ NCIRS	To progress

## 6. Other business

### Members:

- NOTED meetings held with AstraZeneca and Seqirus.

Meeting closed at 4:33pm.

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 7**  
**Tuesday, 3 November 2020, 3:30 – 4:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Chris Blyth Angus Dawson Kanta Subbarao s11C Tom Snelling Bette Liu James Wood Penny Burns Kirsten Howard Christopher Etherton-Beer	s11C	s47E(c), s47F  Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (James Ward, Jodie McVernon and Christine Selvey)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team meeting**

Members

- NOTED:
  - Two papers (Multidose vials and AIR issues) developed by Subgroup 2 endorsed by the Executive Team;
  - Discussion about the addition of a chapter on COVID-19 vaccination in the Australian Immunisation Handbook;
  - Commonwealth's preference for centralised approach on the vaccine rollout.

**4. NCIRS update**

- s47F and s47F provided update on the progress of documents NCIRS are working on:
  - Comparison table: Key findings of reactogenicity and safety results;
  - Comparison table: Key findings of immunogenicity results;
  - Table (spreadsheet) of major inclusion and exclusion criteria of clinical trials;
  - Template for summarising key characteristics and clinical trials of an individual COVID-19 vaccine candidate; and
  - Analysis and technical summaries of at-risk groups.
- NCIRS are in the process of securing four key COVID-19 data sets to inform their work.

**5. Review of data modelling and scenarios**

Members

- NOTED:
  - Ongoing liaison with Allyson Essex on data modelling;

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 7**  
**Tuesday, 3 November 2020, 3:30 – 4:30pm**

- Meeting on 5 November 2020 with representatives of Subgroup 1 to discuss COVID-19 data modelling with Allyson Essex and team.
- DISCUSSED SAGE modelling and its relevance to the group's work and strategy
- DISCUSSED the need for a transmission data model with health outcomes developed by experienced infectious diseases health outcomes modellers
- AGREED to:
  - Send modellers' "wish list" to s47F by 9 November 2020, for discussion at the next meeting;
  - Organise a modelling sandpit session with Allyson Essex;
  - Provide modelling requirements and advice to SG Lead, to help inform the brief paper on data modelling.

Action	Responsible officer/s	Progress
5.1 Provide Allyson Essex with the group's prioritisation document as pre-meeting reading	Secretariat	Completed
5.2 Organise modelling sandpit session with Allyson Essex	Secretariat	To progress

**6. Other business**

Nil.

Meeting closed at 4:37pm.

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**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 8**  
**Tuesday, 17 November 2020, 3:30 – 4:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Angus Dawson Kanta Subbarao Tom Snelling Bette Liu James Wood James Ward Penny Burns Kirsten Howard Jodie McVernon David Durrheim Chris Blyth Chris Etherton-Beer	s11C	Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies s11C
- NOTED that Christine Selvey is not able to attend meetings and a replacement CDNA representative has been arranged
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team meeting**

Members:

- NOTED two documents recently published
  - ATAGI advice on COVID-19 vaccination prioritisation  
<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/vaccines-and-treatments/covid-19-vaccination-prioritisation>
  - Australia's COVID-19 Vaccination Policy  
<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/vaccines-and-treatments/australias-covid-19-vaccination-policy>

Katie Flanagan thanked members for their contribution to the prioritisation work which will need to be refined as more information becomes available

Members:

- NOTED TGA had provided an update to the Executive Team and would be invited to attend the next Subgroup 1 meeting

Action	Responsible officer/s	Progress
Invite TGA to update at next SG1 meeting	Secretariat	Complete

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 8**  
**Tuesday, 17 November 2020, 3:30 – 4:30pm**

**4. NCIRS update**

**s47F** provided an update from NCIRS including work in progress to summarise vaccine data and to identify data modelling requirements.

**5. Issues from information session 10 November**

Members:

- AGREED the session was critical for information sharing to identify gaps and avoid duplication
- NOTED the next information sharing session is scheduled for 15 December

**6. Review of data modelling and scenarios**

Members NOTED:

- relevant Subgroup 1 members met with the Department's data modelling branch this week and are working collaboratively on data modelling issues and recommendations
- the Department's existing data models do not address transmission or various epidemiological scenarios to assist with determining priorities and are too simplistic in terms of risk groups and vaccine coverage
- input from Subgroups 2 (implementation) and 3 (vaccine acceptance) would be valuable
- a paper with Advice to the Department of Health on recommended additional modelling relating to the COVID-19 vaccination program strategy has been prepared for consideration at this week's Executive Team meeting

Action	Responsible officer/s	Progress
All interested SG1 members to review modelling advice and provide edits and comments by Wednesday morning	SG1	Complete
Submit data modelling recommendations to Executive Group for consideration	NCIRS/Secretariat	In progress

**7. Other business**

Nil

Meeting closed approx. 4pm



**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 9**  
**Tuesday, 24 November 2020, 3:30 – 4:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Chris Blyth Angus Dawson s11C Tom Snelling Bette Liu James Wood James Ward Penny Burns Kirsten Howard Jodie McVernon David Durrheim	s11C	s47E(c), s47F  Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

## Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (Kanta Subbarao and Christopher Etherton-Beer)
- New member (s11C)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. TGA update**

- s47E(c), s47F (TGA) provided an update including:
  - provisional registration approval process
  - provisional determination approvals to Janssen, AstraZeneca and Pfizer
  - close liaison with international regulatory authorities such as Access Consortium, including considerations around using an international harmonised label
  - evaluation process for applications including risk/benefit analysis

## Members NOTED:

- challenges in determining timelines for granting full registration
- complexities in evaluation processes
- fortnightly TGA update at Executive Team meeting

**4. Update from Executive Team meeting**

## Members:

- NOTED that the advice on data modelling has been provided to the Taskforce for consideration
- AGREED to continue to advocate for data modelling requirements

**5. Key Vaccine Scoping Progress and WG1 Future Directions**

## Members:

- NOTED three documents that NCIRS are currently working on:
  - Immunogenicity comparison table for AZD1222, BNT162b2 & NVX-CoV2373

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 9**  
**Tuesday, 24 November 2020, 3:30 – 4:30pm**

- Reactogenicity & safety comparison table for AZD1222, BNT162b2 & NVX-CoV2373
- Summary of major inclusion and exclusion criteria of clinical trials for COVID-19 vaccine candidates
- AGREED to review the documents and discuss again at the next meeting
- DISCUSSED what the subgroup's priorities should be and considered:
  - prioritisation matrix
  - decision tree influenced by practical aspects (equitable, acceptable, ethical and robust)
  - scenario planning
  - importance of understanding what end products the subgroup is producing
  - identifying outward-facing documents
  - a package/strategy or playbook approach

## 6. NCIRS Update

**s47F** provided an update on current work including comparing the three key vaccine candidates.

Members AGREED that NCIRS could prepare a 'deep dive' into the Oxford vaccine for discussion at the next meeting.

Action	Responsible officer/s	Progress
Prepare a detailed presentation on the Oxford Vaccine for discussion at the next meeting	NCIRS	To progress

## 7. Other business

Members:

- DISCUSSED whether ATAGI needs to make formal advice on vaccination requirements when travelling
- NOTED the Vaccination Policy statement that there may be circumstances where the Australian Government and other governments may introduce border entry or re-entry requirements that are conditional on proof of vaccination

Meeting closed approx. 4:40pm

**ATAGI COVID Working Group  
Subgroup 1, Meeting No. 10  
Tuesday, 1 December 2020, 4-5pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Angus Dawson s11C Tom Snelling Bette Liu James Wood Penny Burns Jodie McVernon David Durrheim s11C Kanta Subbarao	s11C	Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees, apologies (Kirsten Howard, Christopher Etherton-Beer, Chris Blyth) and welcomed new member (s11C)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team meeting**

Members NOTED:

- Subgroup 1's advice on data modelling is being considered by the Department
- useful documents available on Sharepoint
- recent meeting with Jurisdictional Immunisation Coordinators and ATAGI Subgroup leads
- Dr Richard Kidd to join Subgroup 1 due to his expertise (not as a representative of the Australian Medical Association)

**4. Prioritisation**

Members DISCUSSED:

- correspondence from the Australian and New Zealand Transplantation Society
- laboratory staff working with COVID-19
- essential workers – identifying who they are and numbers, noting that NCIRS has done some preliminary work on this
- the level of granularity required for priority population groups, which is dependent on the level of evidence available

Members AGREED to consider further prioritisation subject to advice from the Executive Team.

Action	Responsible	Status
Upload NCIRS draft document re critical workers on Sharepoint	NCIRS	In progress

**ATAGI COVID Working Group  
Subgroup 1, Meeting No. 10  
Tuesday, 1 December 2020, 4-5pm**

**5. Ring fencing**

Members DISCUSSED ring fencing, noting that:

- information is needed to establish whether or not the vaccine blocks infection
- community expectations will need to be managed regarding vaccine availability

**6. Meeting with Seqirus**

Members were advised that the Executive Team had met with representatives from Seqirus today to receive feedback on phase 1 data and noted confidentiality requirements of these meetings.

**7. Vaccine deep dive - Oxford/AstraZeneca**

NCIRS provided an overview of the Oxford vaccine deep dive, noting:

- it provides a summary of the study protocols
- this is a living document and will be revised when more data becomes available
- published data is expected shortly
- the Subgroup will consider the Oxford vaccine again at the next meeting, along with the Pfizer vaccine

**8. Other business**

Members discussed meeting arrangements over the December/January holiday period, noting that meetings would not be held between Christmas and New Year. Further advice will be provided.

Meeting closed 5pm

**Next meeting 8/12 at 3.30**

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**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 11**  
**Tuesday, 8 December 2020, 3:30-4:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Chris Blyth Kirsten Howard Angus Dawson s11C Tom Snelling Bette Liu James Wood Penny Burns Jodie McVernon David Durrheim Kanta Subbarao	s11C	s47E(c), s47F  Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (s11C and Christopher Etherton-Beer)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team meeting**

Members NOTED:

- Further discussions on data modelling underway within the Department

**4. Priority populations**

- More granularity

Members DISCUSSED:

- Strategies to reduce risk and protect the vulnerable in the absence of community transmission, including border protection (ports of entry and border workers) alongside hospitals and health workers
- Vaccination as part of a package of risk mitigation strategies and interventions, including testing
- An holistic approach covering people with multiple jobs or interactions eg aged care and border protection
- High mortality rate in aged care settings
- Advice from the Taskforce about further granularity required for priority populations
- The need to define principals to assist with categorising essential workers and provide examples for each category

Action	Responsible	Status
Provide a more detailed breakdown of priority populations and staged rollout by month or quarter according to predicted vaccine doses available	NCIRS/Subgroup 1	In progress

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 11**  
**Tuesday, 8 December 2020, 3:30-4:30pm**

**5. COVID-19 and flu vaccines**

Members DISCUSSED:

- Preference for COVID-19 and flu vaccines to be administered separately and logistical difficulties of implementing two programs
- The need for clear advice and directives for Government on what is safe and effective
  - Documenting different scenarios and core recommendations
  - Intersection between the three ATAGI subgroups, including communications
- Theoretical risk of vaccine co-administration including:
  - Reduced immunogenicity
  - Potential higher rate of adverse events
- Suggested two week gap between Pfizer and flu vaccines and the need to validate this administration interval
- Systems already in place for flu vaccination and changes underway to introduce mandatory reporting to the AIR
- Maximising the AIR to check vaccination history and send reminders for the second dose

Members AGREED:

- To document different scenarios that could arise from vaccine co-administration and recommendations

Action	Responsible	Status
Recommend how next year's flu vaccine program will interface with COVID vaccine rollout	NCIRS	To progress

**6. Vaccine deep dive**

- Oxford/AstraZeneca
- Pfizer

Members NOTED overview of the Pfizer vaccine including:

- Storage requirements, adverse reactions and contraindications

Action	Responsible	Status
Add questions for meeting with Pfizer on: <ul style="list-style-type: none"> <li>- One dose efficacy, confidence levels and correlates of protection</li> <li>- Any emerging data on people who have had COVID-19</li> </ul>	NCIRS/ Secretariat	To progress

**7. Other business**

- Next meeting 14 December at 4pm
- Half day information session 15 December, with James Wood to lead for Subgroup 1

Meeting closed 4:40pm

**ATAGI COVID Working Group  
Subgroup 1, Meeting No. 12  
Monday, 14 December 2020, 4:00-5:00pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Chris Blyth Jodie McVernon Angus Dawson Kanta Subbarao s11C James Ward Bette Liu James Wood Kirsten Howard Christopher Etherton-Beer s11C Richard Kidd	s11C	s47E(c), s47F  Darius Everett s47E(c), s47F  <b>Secretariat</b> <b>s22</b>
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members NOTED:

- Acknowledgement to country
- Apologies (Tom Snelling)
- New member (Dr Richard Kidd)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from ATAGI 78<sup>th</sup> meeting**

Members NOTED:

- That the subgroup leads provided an update at the ATAGI 78<sup>th</sup> meeting on 11 December 2020

**4. Priority populations – further granularity**

- More granularity

Members DISCUSSED the draft supplementary advice on the phased allocation of vaccine doses to priority groups. Key points NOTED:

- The quarterly phases of the vaccination rollout may be too long and a shorter time frame such as a month by month phase then working through different age groups may be more suitable
- The need to define who is first among the first with overlay of practicality
- Who will get lower efficacy vaccines?
- The need to further nuance the age groups specifically the 18 to 64 year old individuals with certain underlying conditions
- As a whole, adult Aboriginal and Torres Strait Islander people will be considered a priority population
- Concerns for cleaners and maritime and flight crews and whether they should be considered as priority populations

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 12**  
**Monday, 14 December 2020, 4:00-5:00pm**

- The need to consider data (from Melbourne) to rationalise addition of general practitioners to the priority population groups
- South Australia has data on number of quarantined people and can serve as a case study
- Addition of children in phase three of rollout and the need for more data to support this
- Explore evidence behind clinical risk group, *severe mental illness*
- The need to discuss logistics and delivery issues with subgroup 2
- Department to provide jurisdictional data on priority population numbers to subgroup 1

Action	Responsible	Status
Provide a more nuanced prioritisation and month by month phase by number of available doses	Subgroup 1/NCIRS	In progress
Discuss logistics and delivery issues with subgroup 2	Subgroup 1	In progress
Finalise documents that detail/map at risk groups	NCIRS	In progress
Provide jurisdictional data on priority population numbers to subgroup 1	s47E(c), s47F /Secretariat	In progress

**5. Flu and COVID-19 vaccine co-administration**

Members AGREED:

- That advice will be provided at a later date while group is focused on prioritisation

**6. NCIRS update**

Nil.

Meeting closed 5pm

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**ATAGI COVID Working Group  
Subgroup 1, Meeting No. 13  
Monday, 22 December 2020, 3.30-4:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Allen Cheng Jodie McVernon Kanta Subbarao s11C David Durrheim Bette Liu Penny Burns Kirsten Howard Tom Snelling Richard Kidd	s11C	s47E(c), s47F Darius Everett s47E(c), s47F  <b>Secretariat</b> s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members NOTED:

- Acknowledgement to country
- Apologies (Chris Blyth, James Ward, James Wood, s11C)
- Christopher Etherton-Beer is unable to attend meetings in 2021
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting (14 December)**

- Members ENDORSED outcomes from the previous meeting with no amendments
- Members NOTED:
  - Actions arising relate to prioritisation advice (to be finalised this week) and other pieces of work will be undertaken in early 2021
  - A smaller group has met to progress the prioritisation work

**3. Priority populations – further granularity**

Members DISCUSSED the draft documents on SharePoint:

- ATAGI priority vaccine allocation supplementary advice v5.2 21Dec2020
- COVID-19 vaccine allocation prioritisation worksheet v2.2 21Dec2020

Members NOTED key points including:

- Principles and aims are important to re-state
- The epidemiological scenario can change and impact on the strategy
- Groups should be shown in priority order
- Advice to be categorical but not too prescriptive, allowing some flexibility for jurisdictions
- Discussion of risk levels for GPs, nurses and other staff
- Focus needs to be on settings rather than roles/professions
- Exposure at borders/ports (maritime and air) and who has responsibility
- Stratify elderly adults, starting at over 80 years and working down by decade
- Risk factors for co-morbidities can be further explored in the new year
- Very limited doses will be available initially and need to be targeted, with priority advice to be further refined over time

**ATAGI COVID Working Group  
Subgroup 1, Meeting No. 13  
Monday, 22 December 2020, 3.30-4:30pm**

- No need for a percentage of vaccine doses to be reserved initially
- Delivery of vaccines to all adults in Aboriginal and Torres Strait Islander communities is pragmatic due to logistical and other issues
- Advice needs to be implementable at a program level
- Remove table on recommended allocation and retain excel spreadsheet which better outlines priorities

Action	Responsible	Status
Provide further feedback on draft prioritisation advice in next 24 hours	Members	Completed
Provide input in relation to GPs and prioritisation	s47F	Completed
Incorporate member comments to enable revised version to be circulated to Subgroup 1	NCIRS/s47F	Completed 23/12
Provide prioritisation advice to Executive Group for endorsement by 24 December	Secretariat	In progress

Katie Flanagan thanked participants for their contribution to this important work.

#### 4. NCIRS update

Nil due to time constraints.

Meeting closed 5.20pm

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**ATAGI COVID Working Group  
Subgroup 1, Meeting No. 14  
Monday, 5 January 2020, 3.30-4:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Chris Blyth Jodie McVernon Kanta Subbarao David Durrheim Bette Liu Penny Burns Kirsten Howard James Wood	s11C	s47E(c), s47F  <b>Secretariat</b> <b>s22</b>
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members NOTED:

- Acknowledgement to country
- Apologies (s11C), Tom Snelling, James Ward, s11C
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting (22 December)**

- Members ENDORSED outcomes from the previous meeting with no amendments
- Members NOTED that actions from the last meeting have been completed

**3. Priority populations – further granularity**

- Members NOTED that updated prioritisation advice from Subgroup 1 was forwarded to the Taskforce on 24 December 2020 on the basis that further refinement is required as more information becomes available

**4. Single versus two dose regimen**

- Members DISCUSSED single versus two doses of the COVID-19 vaccine, noting that:
  - There are conflicting international opinions (UK is advocating a single dose to vaccinate more people while US FDA is advocating a double dose regimen)
  - Where there is low/no transmission (currently in Australia), the focus is protection and a second dose is likely to reinforce this
  - Data to date shows good results when the vaccines are tested in a two dose regimen
  - Some countries (eg Germany) are experiencing slower than expected rollout due to complexities of administering vaccines
- Members AGREED that a two dose regimen is the correct approach at this time, noting that epidemiological and other information will continue to be monitored and advice may change accordingly

**5. Clinical Advice Statement on COVID-19 Vaccines**

- Members DISCUSSED the draft Clinical Advice Statement, intended as a public facing document, and raised the following points for consideration in the next draft:
  - Messaging needs to be succinct and unambiguous
  - Ensure efficacy is separated from logistical issues when discussing vaccine preferences

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 14**  
**Monday, 5 January 2020, 3.30-4:30pm**

- Comparison of vaccines or recommendation of one vaccine over another not supported (with exception of those with allergy) due to differences in clinical trials & situations
  - Interchangeability of different vaccines generally not supported due to lack of clinical evidence
  - Further consideration required in relation to pregnant and breastfeeding women but statement needs to be made
  - Apply general rules / normal contraindications in relation to not proceeding with vaccination if unwell, with individuals and providers to make decisions around this
  - Published data indicate that past infection is not a contraindication
  - Refer adverse event reporting content to Subgroup 3
  - Insert concise information on nature of disease and clinical features at beginning
  - Align this advice with ATAGI priority population advice eg age recommendations
  - Align with product information regarding dosing schedule and make further recommendations as evidence emerges
  - Unable to comment on factors related to effects on disease transmission due to lack of data
  - Provide clear advice about facilities required to administer vaccine eg anaphylaxis kit
  - Align with Immunisation Handbook advice regarding acute care
  - Add information relating to efficacy and effects on severe disease, as well as co-administration with flu vaccine
- Members NOTED gaps in the Clinical Advice Statement and that further information may be provided by AstraZeneca at a meeting next week

Action	Responsible	Status
Incorporate Subgroup 1 comments and put revised draft Clinical Advice Statement on sharepoint	NCIRS	In progress
Refer revised version of Clinical Advice Statement to Subgroups 2 and 3 for input/comment	s47F	In progress
Finalise revised Clinical Advice Statement next week for consideration by Exec on 15 January	All	In progress
Seek Product Information for Pfizer vaccine	Secretariat	In progress

#### 6. Flu and COVID-19 vaccine co-administration

- Members NOTED a draft document on influenza and COVID-19 vaccine administration on sharepoint for comment to be discussed at the next meeting

Action	Responsible	Status
Provide comment on draft flu document for discussion at next SG1 meeting on 12 January and finalise for consideration by Exec on 15 January	All	In progress

#### 7. Other business - Data modelling

- Members NOTED a meeting will be held next week with the Executive Team to discuss data modelling work being undertaken within the Department

#### 8. Next meeting

- Tuesday 12 January and Tuesday 19 January, 3:30-4:30pm
- 26 January – no meeting (public holiday)

Meeting closed approx. 4.35pm

**ATAGI COVID Working Group**  
**Subgroup 1, Meeting No. 15**  
**Tuesday, 12 January 2020, 3.30-4:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Katie Flanagan – Lead Chris Blyth Jodie McVernon Kanta Subbarao David Durrheim Penny Burns Tom Snelling Bette Liu Kirsten Howard James Wood Richard Kidd James Ward s11C	s11C	s47E(c), s47F  <b>Secretariat</b> <b>s22</b>
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members NOTED:

- Acknowledgement to country
- Apologies (s11C)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting 5 Jan**

- Members ENDORSED outcomes from the previous meeting with no amendments
- Members NOTED action items in progress

**3. Update from Executive Team meeting**

Members NOTED:

- Government announcement (7 January 2021) of COVID-19 Vaccination Program commencing in February 2021
- Ongoing work on logistics, training packages and IT systems
- Recent Executive Team meeting with Novavax

**4. TGA update**s47E(c),  
s47F

provided TGA update. Members NOTED:

- Pfizer vaccine to be considered by the Advisory Committee on Vaccines (ACV) on 15 January
- AstraZeneca vaccine expected to go to AVC in early February, depending on progress of evaluation
- Rolling data from Janssen
- Provisional Determination Application from Novavax
- Upcoming meeting with Moderna

Members DISCUSSED:

- Desire for ATAGI to meet with sponsors where there is currently no Advance Purchase Agreement in place

Action	Responsible	Status
Include agenda item for Exec meeting re ATAGI meetings with Janssen and Moderna	Secretariat	Completed

**ATAGI COVID Working Group  
Subgroup 1, Meeting No. 15  
Tuesday, 12 January 2020, 3.30-4:30pm**

**5. Clinical Advice Statement on COVID-19 Vaccines**

Members DISCUSSED the draft Clinical Advice Statement. Key points include:

- Dosing intervals to be confirmed and will be adjusted when Product Information becomes available
- Importance of registries for pregnant women, severe reactions and heterogeneous schedule recipients
- Need for the wording of the advice to accommodate some flexibility

Members AGREED:

- To provide minimal dosing intervals, and reassure that immune response is not lost if second dose is given after minimal interval period
- That in the event of adverse reaction to first dose of a vaccine, a second dose of an alternative vaccine would be sufficient (in absence of data)
- To maintain standard observation intervals of 15 minutes, and 30 minutes for individuals with history of anaphylaxis and severe drug allergies
- To re-word *Pregnant women & women who are breastfeeding* section to reflect that pregnant women can consult with their health care providers should they choose to be vaccinated
- To name the advice 'preliminary' on the understanding that it is likely to change as further information becomes available

**6. Flu and COVID-19 vaccine co-administration**

Members DISCUSSED:

- Logistical challenges and the need for advice to be nimble as circumstances may change
- Whether a separate flu and COVID-19 vaccine administration document is needed
- Minimal intervals for live (28 days) and non-live (14 days) vaccines and the pressure to administer flu and COVID-19 vaccines at the same time
- Flu vaccine can be administered in between COVID-19 vaccine dose, if the interval period permits
- In the absence of data, the subgroup's advice is to avoid administering flu and COVID-19 vaccines together due to the possibility of increased reactogenicity
- Understanding that the flu vaccination program will not be delayed

**7. NCIRS update**

Members NOTED that ATAGI advice will stand in relation to Aboriginal and Torres Strait Islander priority populations

**8. Other business**

Members NOTED Exec team meeting with Quantum and that s47F and s47F will attend subsequent meetings.

Meeting closed approx. 4:55pm

# Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group Subgroup 2 Meeting #1

16 September 2020

## Outcomes

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### In attendance:

#### Members

Robyn Gibbs - Lead  
Madeline Hall  
Karen Bellamy  
Katherine Gibney  
Michelle Giles  
Nick Silberstein  
Chris Blyth (ATAGI Co-Chair)  
s11C

#### NCIRS Technical staff

s11C - NCIRS  
s11C - NCIRS

#### Department of Health representatives

Sarah Sinclair

s47E(c), s47F

#### Secretariat

s22

### 1. Meeting Opened

Members:

- NOTED acknowledgement of country
- NOTED attendees and apologies
- DECLARED no conflicts of interest

### 2. Role of the Subgroup

Members:

- NOTED the role of the subgroup is to provide technical advice on the immunisation program for COVID vaccines as they become available in Australia and identify and prioritise gaps in the immunisation landscape to improve impact and equity with the use of COVID vaccines.

### 3. Introductions

Members:

- NOTED introductions from members.

### 4. Work plan

Members:

- NOTED the key deliverables requested by the Department of Health for each sub group and the need for preliminary advice from the ATAGI COVID-19 working group by the end of September.

Action:

Action	Responsible officer/s	Progress
4.1 Prepare discussion paper on logistics and issues of distributing frozen COVID-19 Vaccines	NCIRS technical support	In progress
4.2 Review learnings from 2009 PanVax Program	NCIRS and ATAGI COVID-19 Secretariat	In progress
4.3 Prepare discussion paper on immunisation workforce-capacity, competencies and training needs.	NCIRS technical support	In progress
4.4 Prepare discussion paper on information systems to track distribution and coverage of COVID-19 vaccines	NCIRS technical support	In progress

### 5. Integration with Jurisdictional Immunisation Committees

Members:

- NOTED that the work of COVID-19 Jurisdictional Immunisation Committee will link with the work being undertaken by this subgroup.

### 6. Next Steps

Members:

- AGREED to meet weekly on Wednesday 11:00am – 12:00pm.

### 7. Meeting Closed: 11:05 am



**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Subgroup 2 Meeting #2  
23 September 2020  
Outcomes**

**In attendance:****Members**

Robyn Gibbs - Lead  
 Madeline Hall  
 Karen Bellamy  
 Nick Silberstein  
 Chris Blyth (ATAGI Co-Chair)  
 s11C  
 Annaliese Van Diemen

**NCIRS Technical staff**

s11C

**Department of Health representatives**

Sarah Sinclair  
 s47E(c), s47F

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED acknowledgement of country
- NOTED attendees and apologies
- DECLARED no conflicts of interest

**2. Introductions**

Members:

- NOTED and welcomed Annaliese Van Diemen as the CDNA representative.

Action	Responsible officer/s	Progress
2.1 Update membership list and circulate	Secretariat	In progress

### 3. Work plan

#### 3.1 Program logistics

Members:

- DISCUSSED the NCIRS paper on distributing frozen vaccines
- NOTED concerns regarding ability to deliver a vaccine program at -80 degrees
- AGREED to focus on -20 degrees and consider transport issues
- NOTED challenges of delivering a program in remote areas

Action	Responsible officer/s	Progress
3.1.1 Finalise paper on frozen vaccines following further input from members and consideration at next Subgroup meeting - include high level summary at beginning; clear recommendations and conclusions; and reference to Commonwealth Request for Tender (RFT) to review system readiness	s47F	In progress, to be completed by 30 September for advice to Taskforce
3.1.2 Develop another piece of work incorporating different scenarios	NCIRS	In progress
3.1.3 Consider availability and cost of freezers and transporting of vaccines	Sarah Sinclair	In progress
3.1.4 Circulate public information on RFT to members	Secretariat	In progress

#### 3.2 Program workforce

Members:

- DISCUSSED the NCIRS paper on workforce competencies
- NOTED Jurisdictional Immunisation Coordinators (JIC) are meeting to discuss
- NOTED Advisory Committee on Vaccines is meeting and TGA input is needed

Action	Responsible officer/s	Progress
3.2.1 Finalise paper on workforce competencies following further input from members and consideration at next Subgroup meeting	s47F	In progress, to be completed by 30 September for advice to Taskforce

#### 3.3 Information systems for vaccine distribution and coverage

Members:

- AGREED to place this item on hold pending discussion by JIC

Action	Responsible officer/s	Progress
3.3.1 Report back to members at next meeting regarding JIC discussions, intersect with this Subgroup and respective roles	s47F	In progress

#### 4. Other priority issues for program implementation

Members:

- NOTED suggestions for further pieces of work to be undertaken by this group:
  - set of principles to embed in program rollout eg data
  - clinical administration advice eg co-administration and contra-indication
  - multidose vials – program implementation and workforce training
  - innovative mechanisms for vaccine delivery

Action	Responsible officer/s	Progress
4.1 Develop list of other pieces of work to be undertaken	NCIRS	In progress
4.2 Update workplan in Sharepoint as required	Secretariat	In progress

#### 5. Next Meeting

Members:

- AGREED to meet by videoconference with a test to be held prior to next meeting

Action	Responsible officer/s	Progress
5.1 Organise a test of videoconferencing with members	Secretariat	In progress

#### 6. Meeting Closed: 12:00 noon

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Subgroup 2 Meeting #3  
30 September 2020  
Outcomes**

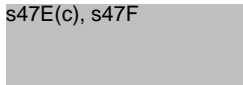
**In attendance:****Members**

Robyn Gibbs - Lead  
 Madeline Hall  
 Karen Bellamy  
 Nick Silberstein  
 s11C  
 Annaliese Van Diemen  
 Lena Sanci

**NCIRS Technical staff**

s11C  


**Department of Health representatives**

Sarah Sinclair  
 s47E(c), s47F  


**Secretariat**

s22  


**1. Meeting Opened**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (Chris Blyth, Michelle Giles, Katherine Gibney)
- NOTED and welcomed Lena Sanci as the new primary care representative
- DECLARED no conflicts of interest

**2. Outcomes and Actions from previous meeting**

Members:

- NOTED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team meeting**

Members:

- NOTED the Executive Team will need to consider and endorse papers developed by Subgroups
- NOTED information on the COVID-19 Working Group establishment and structure will be published on the website shortly
- DISCUSSED issues associated with possible publication of Subgroup member names on the website, noting that consent forms would need to be completed

Action	Responsible officer/s	Progress
3 Members to send comments to Secretariat in relation to possible publication of names	Members	In progress

#### 4. Feedback from Jurisdictional Immunisation Coordinators (JIC) COVID-19 Roundtable meeting

Members:

- NOTED feedback from the Chair on the JIC meeting and concerns in relation to program implementation issues
- NOTED that JIC COVID-19 meetings will be held weekly
- NOTED the Advisory Committee on Vaccines meeting today and the need for feedback from TGA

Action	Responsible officer/s	Progress
4 Place item on Exec agenda re possible TGA rep on Subgroup 2	Secretariat	To progress

#### 5. Work plan update

##### 5.1 Discussion paper on distributing frozen vaccines

Members:

- DISCUSSED the NCIRS paper on distributing frozen vaccines, noting its high quality
- NOTED comments in relation to freezer availability, maintaining transportation cold chain, preservatives, expiry dates and remote settings
- AGREED to provide further comments to NCIRS

Action	Responsible officer/s	Progress
5.1 Finalise paper on frozen vaccines following further input from members for consideration at Exec meeting 9/10	s47F	In progress, to be completed by early October

##### 5.2 Discussion paper on workforce competencies

Members:

- DISCUSSED the NCIRS paper on workforce competencies, noting its high quality
- NOTED comments in relation to insufficient providers for previous vaccination programs, truncated/COVID-specific training (eg Ambulance Victoria rapid online training program) and record keeping as a core workforce competency
- AGREED to provide further comments to NCIRS

Action	Responsible officer/s	Progress
5.2 Finalise paper on workforce competencies following further input from members for consideration at Exec meeting 9/10	s47F	In progress, to be completed by early October

##### 5.3 Information systems for vaccine distribution and coverage

Members:

- NOTED this paper is on hold pending discussions between Commonwealth and JICs

## 6. Other proposed workplan topics for program implementation

Members:

- NOTED proposed topics for further work, subject to consideration by the Executive Team to ensure prioritisation and no duplication
- NOTED NCIRS has commenced background work on multidose vials

Action	Responsible officer/s	Progress
6. Place item on Exec agenda re Subgroup 2 proposed work including: <ul style="list-style-type: none"> <li>• Multidose vials</li> <li>• Lessons learned from H1N1 pandemic vaccination program</li> <li>• Principles for program implementation</li> <li>• Targets for coverage</li> <li>• Serology post vaccination</li> <li>• Issues related to clinical guidance</li> <li>• Innovative approaches</li> </ul>	Secretariat	To progress

## 7. Other business

Members:

- DISCUSSED issues for providers associated with using the Australian Immunisation Register (AIR) including passwords, authentication files, access and delegations
- NOTED the Taskforce is considering AIR ease of access issues for providers and welcomes advice from members on known barriers
- NOTED an intersection with the communications strategy in relation to messaging around vaccine preservatives and good clinical practice, relevant to Subgroup 3's work on quality control measures and monitoring workforce compliance

## 8. Next Meeting

Members:

- AGREED to move meeting time due to clash with CDNA meetings
- NOTED NCIRS to present draft work on AIR data quality and multidose vials

Action	Responsible officer/s	Progress
8.1 Move meeting times to Wednesdays from 12-1pm	Secretariat	Completed
8.2 Consolidate information already gathered on AIR data quality and present at next meeting	NCIRS	In progress
8.3 Provide draft points on multidose vials at next meeting	NCIRS	In progress

## 9. Meeting Closed: approximately 12 noon

**In attendance:****Members**

Robyn Gibbs – Lead  
 Madeline Hall  
 Karen Bellamy  
 Katherine Gibney  
 Michelle Giles  
 Nick Silberstein  
 Annaliese Van Diemen  
 s11C  
 Lena Sancu

**NCIRS Technical Staff**

s11C

**Department of Health**

s47E(c), s47F

Sarah Sinclair  
 s47E(c), s47F

**Secretariat**

s22

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country.
- NOTED attendees and apologies (Chris Blyth).
- DECLARED no conflicts of interest.

**2. Outcomes from previous meeting**

- NOTED outcomes and actions from previous meeting with no amendments.

**3. Actions from previous meeting**

Members:

- NOTED items to be raised at Executive Working Group Meeting Friday 9 October:
  - For endorsement: Workforce and frozen vaccine discussion papers.
  - For discussion: TGA representative; publication of member names online.
- NOTED a log of all action items has been uploaded to SharePoint.

Action	Responsible officer/s	Progress
3.1 Executive Group to discuss TGA representative	Executive Group	In progress
3.2 Executive Group to discuss publication of member names online	Executive Group	Completed – discussed on 9/10
3.3 Executive Group to endorse workforce and frozen vaccine discussion papers	Executive Group	Completed

**4. Feedback from Jurisdictional Immunisation Coordinators (JIC) COVID-19 Roundtable meeting**

Members:

- NOTED update on JIC discussions, including: communications; safety (including TGA setting up a pharmacovigilance discussion); workforce; logistics, including warehousing of frozen vaccine, multidose vials (MDV) and consumables, noting some of these topics were being addressed by the Taskforce.
- DISCUSSED consumables, including update from Taskforce s47E(c), s47F on preliminary purchasing arrangements.
- NOTED that the next JIC COVID-19 meeting is Thursday 8 October.

Action	Responsible officer/s	Progress
4.1 WG 2 to develop list of consumables, both a 'minimum requirements' list and more detailed version.	NCIRS	In progress, drafts uploaded to SharePoint prior to WG2 meeting 14/10

## 5. Work plan update

Members:

- DISCUSSED the NCIRS paper on MDV. Topics discussed included:
  - Limited literature on use of MDV and anecdotal evidence of provider discomfort with the use of MDV. Issues to consider in the use of MDV include:
    - Need for very clear guidelines / protocols and communications to providers about risks and how to manage, including for example a service offering for immunisation providers to contact once a known issue arises.
    - Recommendation for a separate area for vaccine preparation and administration to help minimise some of the risks, and NCIRS will update the paper to include a section on implications for different clinical settings.
    - Consideration of informed consent: verbal acknowledgement vs. a signed form.
    - Wastage issues and instructions for how to discard unused vaccine, (particularly if GMO).
- DISCUSSED update on consumables from the Taskforce <sup>s47E(c), s47F</sup> including:
  - 1ml syringes (not as user friendly for providers) vs 2ml syringes (better, as they are shorter and offer providers better control);
  - issues with coring of MDV (i.e. from repeated injections to draw up vaccine) ; and
  - the potential for increased numbers of localised / injection site reactions, due to antigen present on outside of needle (use of drawing up needles preferable).
- DISCUSSED the NCIRS paper on Australian Immunisation Register – data quality, noting this paper is focused on: the limitations of AIR in coverage, underreporting, software issues, reporting levels by provider types, known issues that need to be addressed.
- NOTED an update from <sup>s47E(c), s47F</sup> on current AIR work and that if needed, reports and/or demonstration from ClinSense could be provided to this group.

Action	Responsible officer/s	Progress
5.1 Members to send through any further comments or questions on MDV in writing.	Members	In progress
5.2 NCIRS to update MDV paper following discussion, including addition of section on implications for different clinical settings	NCIRS	In progress, revised version uploaded to SharePoint prior to WG2 meeting 14/10
5.3 Discuss at Executive meeting this group developing a checklist for site requirements necessary to deliver COVID vaccines	Secretariat	Completed – discussed at Exec meeting 9/10
5.4 NCIRS to discuss AIR paper with <sup>s47E(c), s47F</sup>	NCIRS	In progress, due for discussion by WG2 on 21/10

## 6. Other proposed workplan topics for program implementation

Members:

- NOTED the item on Consent in use of MDV would be held over until the next teleconference.

## 7. Other business

Members:

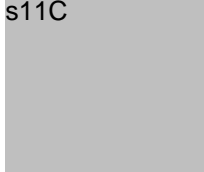

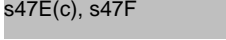

- NOTED confidential update from the Taskforce regarding expected numbers for rollout.

## 8. Next meeting

- Weekly meetings - Wednesdays at 12 noon



**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Robyn Gibbs – Lead Madeline Hall Karen Bellamy Katherine Gibney Michelle Giles Nick Silberstein Lena Sanci Annaliese van Diemen	s11C 	s47E(c), s47F  Sarah Sinclair s47E(c), s47F  <b>Secretariat</b> s22 
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country.
- NOTED attendees and apologies.
- DECLARED no conflicts of interest.

**2. Outcomes & Actions from previous meeting**

Members:

- NOTED outcomes and actions from previous meeting with no amendments.
- NOTED a TGA representative would be invited to attend meetings on an as needed basis.

**3. Update from Executive Team meeting**

- NOTED at the Executive Working Group Meeting on Friday 9 October the publication of ATAGI member names online was agreed, following receipt of written consent.
- NOTED a half day information sharing for ATAGI subgroups members will be scheduled, likely for November and an invitation will follow once dates have been considered.

**4. Work plan update**

Members:

- NOTED and DISCUSSED a summary on the updated Multidose vials (MDV) paper presented by NCIRS.
- DISCUSSED the issue of consent, including:
  - What is currently done for the National Immunisation Program and other immunisation programs, e.g. workplace programs, and consent issues around MDV specifically;
  - It was agreed that this SubGroup should develop a discussion paper on consent; and
  - It was noted that no fault compensation / indemnity issues were being discussed at the upcoming ATAGI meeting on Thursday 15 October 2020 and at SubGroup #3 on Friday 16 October 2020.
- NOTED an update from NCIRS on a discussion regarding freezer capacity for -80deg and that NCIRS is working with AIR team to understand current projects and timelines.

Action	Responsible officer/s	Progress
4.1 Invite s47E(c), s47F from the Gene Technology Policy Section to the next meeting to discuss: <ul style="list-style-type: none"> <li>whether the proposed vaccines are considered GMO, and</li> <li>if so, what are the disposal requirements?</li> </ul>	Secretariat	In progress: s47E(c), s47F unavailable 21 October; seeking availability for 28 October.
5.3 Will the vaccines have serial numbers?	Taskforce	In progress
5.4 Raise issue of implementation / track and trace software at the Executive Working Group and report back.	Secretariat	In progress
5.5 Develop a Discussion Paper on consent.	NCIRS	In progress
5.6 Members to review both checklists and updated MDV paper on SharePoint prior to seeking endorsement at the next meeting.	Members	In progress, email reminder sent from Secretariat on 19 October

## 5. Other business

Nil

## 6. Next meeting

- Wednesday 21 October 2020.

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**In attendance:**

Members	NCIRS Technical Staff	Department of Health
Robyn Gibbs – Lead Madeline Hall Karen Bellamy Katherine Gibney Michelle Giles Nick Silberstein Annaliese van Diemen s11C Chris Blyth	s11C	s47E(c), s47F Sarah Tyquin s47E(c), s47F Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country.
- NOTED attendees and apologies (s11C, Taskforce, s47E(c), s47F).
- DECLARED no conflicts of interest.

**2. Outcomes & Actions from previous meeting**

Members:

- NOTED outcomes and actions from previous meeting with no amendments.
- NOTED update from the Secretariat on the AstraZeneca meeting held on Tuesday 20 October 2020 and that a meeting with Seqirus would be held on Thursday 22 October 2020.

**3. Update from AZ meeting Tuesday 20 October 2020**

- NOTED and DISCUSSED the update from the Secretariat regarding the meeting with AstraZeneca.

Action	Responsible officer/s	Progress
<ul style="list-style-type: none"> <li>• Seek an update from the Taskforce at the next meeting about the AstraZeneca &amp; Seqirus information and implementation.</li> </ul>	Taskforce	In progress
<ul style="list-style-type: none"> <li>• Executive WG meeting Friday 23/10: add item for discussion (following meetings with Sponsors this week) regarding the regulatory pathway timing for both AstraZeneca &amp; Seqirus and how this impacts implementation timelines.</li> </ul>	Secretariat	In progress

**4. Items for Endorsement**

Members:

- DISCUSSED the MDV paper, including need for training for providers around use of multidose vials (MDVs);
- AGREED to add a recommendation to the paper around the need for provider training in the use of MDVs, nationally consistent if possible, and that the training should be appropriate forms for:
  - regular immunisation providers as an update specific for MDVs; and
  - a more comprehensive training item for providers who do not regularly administer vaccines.
- NOTED that the issue of training for providers has already been raised at Jurisdictional Immunisation Coordinators (JIC) as an item for further discussion / action.
- DISCUSSED the need for further coordination of efforts between the JIC and this group, and agreed that this would be discussed offline between s47F and s47F, to consider how best to

ensure that both expertise of the JICs is being utilised and duplication of efforts between this group and JIC is minimised.

Action	Responsible officer/s	Progress
<ul style="list-style-type: none"> <li>Secretariat to raise issue of training at JIC either Thursday 22/10 or the following week.</li> </ul>	Secretariat	In progress
<ul style="list-style-type: none"> <li>Update MDV paper to include a recommendation that nationally consistent training on use of MDVs is required (both for routine providers and new immunisation providers).</li> <li>Review updated MDV paper out of session, ahead of endorsement at the next meeting.</li> </ul>	NCIRS, Members	In progress
<ul style="list-style-type: none"> <li>Taskforce to provide an update on PPE being purchased at the next meeting.</li> </ul>	Taskforce	In progress

## 5. Work plan update

Members:

- NOTED a short summary on the Checklists provided by NCIRS.
- AGREED that Members would review and comment on the following documents via SharePoint by Monday 26 October, with a view to seeking endorsement of the documents and the next meeting on Wednesday 28 October 2020:
  - Checklists;
  - Consent discussion paper;
  - AIR discussion paper; and
  - Clinical guidance.

Action	Responsible officer/s	Progress
<ul style="list-style-type: none"> <li>Review and comment on the following documents on SharePoint by <u>Monday 26 October</u>, for endorsement at next meeting               <ul style="list-style-type: none"> <li>Checklists;</li> <li>Consent discussion paper;</li> <li>AIR discussion paper; and</li> <li>Clinical guidance.</li> </ul> </li> </ul>	Members	In progress

## 6. Other business

Action	Responsible officer/s	Progress
<ul style="list-style-type: none"> <li>NCIRS to produce a list of 'outward facing' ATAGI advice / actions for program implementation, for consideration by the Executive WG &amp; Taskforce.</li> </ul>	NCIRS	In progress

## 7. Next meeting

- Wednesday 28 October 2020.

SharePoint Link

**1. Welcome and apologies / general committee business**

Members:

- Acknowledgement to Country;
- Introductions for new members;
- Apologies; and
- Declarations of interest.

**2. Update from the Taskforce**

Members:

- NOTED thanks from the Taskforce for the work of SG2 in developing policy for COVID19 vaccination program.
- NOTED the personal protective equipment (PPE) requirements needed for a COVID-safe way are currently under consideration. The Taskforce is working with the National Medical Stockpile on availability. The Taskforce will report back to the Department of Health and Aged Care as required.
- NOTED that Secretary Brendan Murphy briefed Health CEOs on the Taskforce's findings and recommendations.

- Acknowledgements

- Acknowledgement to Country;
- Introductions for new members;
- Apologies; and
- Declarations of interest.

## 2. Update from the Taskforce

Members:

- NOTED thanks from the Taskforce for the work of SG2 in developing documents to help inform the policy for COVID19 vaccination program.
- NOTED the personal protective equipment (PPE) requirements necessary to deliver the COVID-19 vaccination program in a COVID-safe way are currently under consideration and the Taskforce is working with the National Medical Stockpile on availability. The Taskforce will seek advice from this group as required.
- NOTED that Secretary Brendan Murphy briefed Health CEOs on the proposed approach for a COVID-19 vaccination program and that more information will be provided shortly, following Government review and consideration, as soon as possible (hopefully a matter of weeks).
- NOTED that JICs have been advised that the Commonwealth will potentially be involved in warehousing of the vaccine (more than currently happens with NIP), including considering IT system developments to ensure line of site to the vaccine doses, particularly in context of initially having a limited supply, to minimise wastage.
- DISCUSSED that this approach was a change from current systems, potentially increasing the complexity, and questioned at what level this approach had been discussed (e.g. AHPPC).
  - The Taskforce noted that Secretary Murphy discussed with Health CEOs and it was likely further conversations would occur at that level and also at AHPPC, however the Taskforce would follow up at the Executive Group meeting. s47F noted that he would also follow up on this.

Action	Responsible officer/s	Progress
Taskforce to follow up what level discussions have been held on the proposed implementation approach.	Taskforce	Completed – discussed at Executive Meeting 30/10
s47F to follow up discussion regarding the rationale for these decisions	s47F	Completed – discussed at Executive Meeting 30/10

### 3. Items for Endorsement

Members:

- ENDORSED the MDV paper and agreed it would be presented to the Executive Group on 30 October 2020.
- NOTED the Taskforce had minor feedback on the Consent paper for NCIRS to incorporate. Following this update, the Consent paper would be presented at next week's meeting on 4 November for endorsement.
- ENDORSED the AIR paper with minor edits, and agreed it would be presented to the Executive Group on 30 October 2020, following discussion of member comments provided in the AIR paper. Discussion included incorporating issues with PRODA (difficulty linking to a provider in a hospital setting) and the need for specific COVID vaccine drop downs in the AIR (not a generic option).
- NOTED that the Mandatory Reporting public consultation would be published by 2 November 2020 and would be open for two weeks, and a link would be sent to key stakeholders.

### 4. Items for Discussion

Members:

- AGREED to review the Checklists and Clinical Guidance out of session and discuss at the next meeting.

### 5. Other business

Members:

- NOTED the GMO advice/update from s47E(c), s47F :
  - The AstraZeneca and Johnson and Johnson vaccine candidates are both GMO; and
  - While specific details of timing and consideration by the Office of the Gene Technology Regulator are currently unavailable, updates can be provided to SG#2 at future meetings as appropriate.
- DISCUSSED the issue of wastage presented in the H1N1 review paper:
  - The Taskforce noted the figure of 40% is quite high in the context of a limited stock scenario and sought members' feedback on whether this figure was reasonable to expect or if there were other examples to draw on, as they are currently looking into training programs and how to minimise wastage (noting leakage is less of a concern given the prioritisation of doses).
  - NCIRS noted the 40% figure was an average of GPs and that the literature suggested rates of wastage were higher when vials contained more doses.
  - Members noted BCG (which is also a MDV) could be a comparator, however this is used in an appointment-based setting to minimise wastage, however the key issue in COVID setting would be the volume / demand (i.e. as demand increases, wastage increases) and an initial phased approach to COVID vaccination program would likely help with wastage. Adequate time for system preparation (in addition to training) would also be critical for implementation.
- NOTED the Outcomes & Actions from previous meetings are mostly complete.

**ATAGI COVID Working Group**  
**Subgroup 2, Meeting No. 8**  
**Wednesday 4 November 2020, 12.00–1.00pm**  
**Meeting Outcomes**

Members	NCIRS Technical Staff	Department of Health
Robyn Gibbs – Lead Chris Blyth Karen Bellamy Katherine Gibney Michelle Giles Nick Silberstein Lena Sancu Annaliese van Diemen Scott Brown	s11C	s47E(c), s47F     <b>Secretariat</b> <b>s22</b>
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country.
- NOTED attendees and apologies.
- DECLARED no conflicts of interest.

**2. Papers for Endorsement**

Members:

- DISCUSSED and ENDORSED:
  - Consent paper, with minor edits;
  - Checklist for equipment (noting that the tables estimating the numbers of consumables were being finalised); and
  - Checklist for site requirements, with minor edits.

**3. Drafts for discussion**

Members:

- DISCUSSED the multidose vial (MDV) clinical guidance paper, including:
  - issues around the size of recommended syringes;
  - drawing up of one dose or multiple doses in succession, including the Australian Society for Infectious Disease recommendations; and
  - noted that it was appropriate to include some cautionary statements for providers about what not to do, with short rationale.
- NOTED during the H1N1 pandemic some documents contained RACGP branding and that the potential for consultation with key groups should be considered.
- AGREED to hold over discussion of the H1N1 paper to the next meeting.

Action	Responsible officer/s	Progress
3.1 Seek list of consumables to be shared with SG#2	Secretariat	Complete, uploaded to SharePoint.
3.2 Chris Blyth to follow up the pathway for key documents (e.g. NHMRC and other groups e.g. RACGP).	s47F	Complete.
3.3 Discuss H1N1 paper at next meeting	Secretariat	In progress, added to agenda.

**ATAGI COVID Working Group  
Subgroup 2, Meeting No. 8  
Wednesday 4 November 2020, 12.00–1.00pm  
Meeting Outcomes**

**4. Public facing documents**

Members:

- DISCUSSED the list of outward facing advice/ documents developed by NCIRS and agreed to add information on aged care, outreach sites.

**5. Outcomes & Actions from previous meeting**

- NOTED outcomes and actions from previous meeting with no amendments.

**6. Other business**

Nil.

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**ATAGI COVID Working Group**  
**Subgroup 2, Meeting No. 9**  
**Wednesday 11 November 2020, 12.00–1.00pm**

Members	NCIRS Technical Staff	Department of Health
Robyn Gibbs – Lead Chris Blyth s11C Madeline Hall Karen Bellamy Michelle Giles Nick Silberstein Lena Sanci Annaliese van Diemen Scott Brown	s11C	s47E(c), s47F Sarah Sinclair s47E(c), s47F  <b>Secretariat</b> s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies/general committee business**

Members:

- NOTED acknowledgment to country
- NOTED attendees and apologies (nil)
- Declared no conflicts of interest

**2. Documents for discussion**

• **Multi Dose Vials (MDV) Clinical Guidance**

Members DISCUSSED:

- concerns about contamination when drawing up a vaccine
- aspects of the clinical procedures for administering a vaccine, specifically whether two staff members are required when drawing up a MDV to maintain sterile technique

Members NOTED:

- that in practice, Aseptic Non-Touch Technique can be achieved by one staff member (s47F offered to share materials on this subject with the group)
- early engagement with the Infection Control Expert Group (ICEG) is important
- consultation procedures for outward facing documents will need to be determined with the Executive

• **Checklist for Equipment**

Members NOTED:

- that the Executive endorsed the Checklist for Equipment at the last meeting, subject to any further comments
- that a list of consumables procured by the Taskforce had been provided to the subgroup

Members AGREED:

- to revise the Checklist for Equipment and provide recommendations based on expert advice
- to take the checklist to the next Executive meeting and raise discrepancies between recommendations and purchased consumables

• **H1N1 Lessons Learned**

- Members AGREED to discuss this paper at the next meeting

**ATAGI COVID Working Group  
Subgroup 2, Meeting No. 9  
Wednesday 11 November 2020, 12.00–1.00pm**

Action	Responsible officer/s	Progress
2.1 Revise the MDV Clinical Guidance to incorporate group comments	Subgroup 2/NCIRS	In progress
2.2 Early engagement with the Infection Control Expert Group	Subgroup 2/s47F	Completed - raised by s47F at ICEG meeting on 11/11 and to be discussed at Exec meeting on 13/11
2.3 Consult with the Executive on consultation procedures for outward facing documents	Subgroup 2 /Secretariat	To progress
2.4 Recall the Checklist for Equipment, make revisions, and resubmit to Executive for endorsement	NCIRS/Secretariat	Completed – for Exec meeting 13/11

### 3. Update from Services Australia

s47E(c), s47F from Services Australia presented on the progress of the PRODA transition.

Members NOTED:

- there is no firm cut-off date for PRODA authentication files being ceased (expected 2021)
- State and Territory Health Departments have registered their organisations
- Services Australia is working with multisite companies and the next target group is councils
- barriers and challenges faced when setting up and using PRODA in the public hospital setting
- Services Australia is open to discussing PRODA registration with private hospitals

Members AGREED:

- to track progress of PRODA transition and continue discussions at Executive meetings
- to encourage the Commonwealth and Services Australia to provide resources to ensure PRODA access issues are resolved

Action	Responsible officer/s	Progress
3.1 Track progress of PRODA transition and continue discussions at Executive meetings	Subgroup 2/Secretariat	To progress

### 4. Issues from information session 10 November

Members were invited to email topics/issues from the information session to the subgroup lead for discussion next week.

### 5. Outcomes & Actions from previous meeting

Members NOTED that actions are up to date and outcomes from last week's meeting are being finalised.

Meeting closed at 1:10pm.

**ATAGI COVID Working Group**  
**Subgroup 2, Meeting No. 10**  
**Wednesday 18 November 2020, 12.00–1.00pm**

**Meeting Outcomes**

Members	NCIRS Technical Staff	Department of Health
Robyn Gibbs – Lead Madeline Hall Karen Bellamy Katherine Gibney Nick Silberstein Lena Sancu Annaliese van Diemen Scott Brown	s11C	s47E(c), s47F  <b>Secretariat</b> s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country.
- NOTED attendees and apologies.
- DECLARED no conflicts of interest.

**2. H1N1 paper**

Members NOTED:

- that the H1N1 paper has been updated following discussion last week and is now on SharePoint;
- the summary of the paper and recommendations provided by NCIRS, noting that it was a well written paper; and
- that the paper should be shared with WG#3.

Members ENDORSED the H1N1 paper, with minor edits, including addition of:

- a reference to vaccine safety concerns; and
- a recommendation about tracking uptake.

Members DISCUSSED:

- the audience for this paper, noting that the request to share the papers prepared by this group has previously been raised at the Executive Group meetings and with the taskforce;
- that most of the papers developed are summaries of publicly available information, with the addition of recommendations for the Commonwealth/ Taskforce and if there are concerns about recommendations or other confidential information included in these papers, an option may be to prepare a public facing version with this information removed, that could be disseminated to the jurisdictions/ more broadly.

Action	Responsible officer/s	Progress
2.1 NCIRS to update paper to include: <ul style="list-style-type: none"> <li>• a statement noting need to consider safety; and</li> <li>• add recommendation on uptake.</li> </ul>	NCIRS	In progress.
2.2. Provide H1N1 paper to Executive Group for endorsement Friday 20/11	Secretariat	Complete, on agenda for Executive Group Friday 20/11.

**ATAGI COVID Working Group  
Subgroup 2, Meeting No. 10  
Wednesday 18 November 2020, 12.00–1.00pm**

**Meeting Outcomes**

2.3 Provide a copy of the H1N1 paper to WG#3 once endorsed by the Executive Group	Secretariat	In progress
2.4 Follow up sharing of papers with JIC and more broadly in jurisdictions	Secretariat	In progress, on agenda for Executive Group Friday 20/11.

### 3. Work plan update

- MDV Clinical Guidance

Members NOTED:

- that the MDV Clinical Guidance has been updated to:
  - remove some of the specific information (e.g. sizes of needles);
  - incorporate details regarding the no touch technique;
  - include characteristics of all four vaccines the Commonwealth has advance purchase arrangements with and;
  - the paper will continue to be updated as more information becomes available.
- that the pathway for these COVID clinical advice documents is not yet finalised, however at the Executive Group meeting on Friday 13 November 2020, Co-Chairs s47F and s47F noted the topic of MDVs had been raised at the Infection Control Expert Group (ICEG) and they agreed to provide a copy of the MDV Clinical Guidance once finalised.

Members ENDORSED the MDV Clinical Guidance with these changes noting paper will be added to as more information becomes available.

- Overview of mandatory vaccination policies

Members NOTED during a recent Executive Group meeting discussion on consent it was agreed that NCIRS would draft a paper on the current mandatory vaccine policies in each jurisdiction, e.g. influenza vaccination in aged care workers.

Members AGREED to review the paper out of session and provide any comments by Monday 23 November 2020.

Action	Responsible officer/s	Progress
3.1. Provide updated MDV Clinical Guidance to Executive Group for endorsement Friday 20/11	Secretariat	Complete, on agenda for Executive Group Friday 20/11.
3.2 Members agreed to review the <i>Overview of mandatory vaccination policies</i> the paper on SharePoint and provide any comments by Monday 23 November 2020	Members	In progress.

### 4. Workforce & Training

Members AGREED the discussion on workforce would be held over to next meeting on 25 November 2020.

**ATAGI COVID Working Group  
Subgroup 2, Meeting No. 10  
Wednesday 18 November 2020, 12.00–1.00pm**

**Meeting Outcomes**

**5. Other business**

- Issues from information Sharing Session, 10 November 2020

Members DISCUSSED feedback / concerns arising from the ATAGI COVID-19 Working Group information sharing session on 10 November 2020 including:

- the role of ATAGI COVID-19 working groups in data and reporting requirements, including:
- consistency of data gathered and/or the development of a minimum data set, noting that it is anticipated that the all levels of government are likely to want regular, clear reporting of all COVID-19 related data to occur;
- co-ordination of these efforts, noting that it may be occurring by the Taskforce (including via the data / logistics RFPs) however it is not clear at this stage;
  - the Secretariat NOTED that based on advice from the Taskforce, it is likely much of the detail regarding the data would be covered by the data and logistics RFPs and that a RFP was also in progress for a Project Manager to oversee the implementation.
- the need for an understanding of the overall plan for the rollout, particularly now that the COVI19 Vaccination Policy has been published. For example, it was noted that in Queensland it takes two weeks to roll out a new vaccine across the state, so for a 1 March implementation date, distribution would need to commence in mid-February, and it is this level of detail regarding the overall project planning that would be useful.
  - The Secretariat NOTED that bi-lateral discussions with the States and Territories were commencing over the next two weeks with jurisdictional representatives nominated by Health CEOs.
- Publications

Members NOTED that following the announcements made by the Prime Minister and Minister for Health last Friday, the following publications are available on SharePoint:

- Australia's COVID-19 vaccination policy; and
- COVID-19 vaccination prioritisation.

**6. Outcomes & Actions from previous meeting**

Secretariat NOTED that actions are up to date.

**ATAGI COVID Working Group**  
**Subgroup 2, Meeting No. 11**  
**Wednesday 25 November 2020, 12.00–1.00pm**

Members	NCIRS Technical Staff	Department of Health
Robyn Gibbs – Lead Chris Blyth s11C Madeline Hall Karen Bellamy Lena Sancı Annaliese van Diemen Scott Brown	s11C     s47F	s47E(c), s47F     Secretariat s22
<a href="#">SharePoint Link</a>		

**1. Welcome and apologies/general committee business**

Members:

- NOTED acknowledgment to country
- NOTED attendees and apologies
- Declared no conflicts of interest

**2. Workplan update**

• **Mandatory Vaccination Policies paper**

Members DISCUSSED:

- Landscape of mandatory vaccination in Australia
- Consent to mandatory vaccination and who may be responsible for vaccination injuries
- Whether the Commonwealth has considered mandatory COVID-19 vaccination for the healthcare workforce
- Implications of return travellers to the subgroup's work
- The importance of considering risks and benefits of implementing mandatory vaccination

Members NOTED:

- Victoria is yet to implement legislative changes on mandatory vaccination for healthcare workers. Although flu vaccination is not mandated for aged care facility workers, it was noted that emergency provisions may be considered, if necessary.

Members AGREED:

- That the issue of return travellers and its implications are not currently imposing on the subgroup's work
- To endorse Mandatory Vaccination Policies paper and take to the next Executive Team meeting for endorsement, following inclusion of yellow fever vaccination for travellers as a recommendation

• **Gap Analysis Workforce & Training paper**

Members NOTED:

- That formal training is recommended for MDV administration and clinical aspects of COVID-19 vaccines
- The need for national consistency of training programs and modules
- The importance of vaccination reporting
- Importance of having the Commonwealth's implementation plan shared with the subgroup and jurisdiction
- That there will be discussion about the implementation plan between the Department and jurisdictions

**ATAGI COVID Working Group**  
**Subgroup 2, Meeting No. 11**  
**Wednesday 25 November 2020, 12.00–1.00pm**

Members AGREED:

- to endorse the Gap Analysis Workforce & Training paper and take to the next Executive Team meeting for endorsement

### 3. Workforce / Training discussion

Members DISCUSSED:

- Surge workforce and explored the possibility of deploying other resources such as medical and nursing students as vaccinators and that these could also be extended to paramedics, indigenous health workers, pharmacists, and retired ambulance officers
- How to segregate roles in providing vaccines within existing vaccine provider structures
- Whether a surge plan should be developed
- Training requirements and how modules like *train the trainer* courses may be effective when training up a surge workforce

Members NOTED:

- QLD has been approached by dental associations with their interest in being vaccine providers
- That travel clinics have expressed their interest in supporting the vaccine roll out as vaccine providers. **S47F** has agreed to put the travel clinics in contact with the Department.

Action	Responsible officer/s	Progress
3.1 Draft a surge workforce plan	NCIRS	To progress

### 4. Other business

Nil.

### 5. Outcomes & Actions from previous meeting

Members NOTED outcomes and actions from previous meeting with no amendments.

Meeting closed at 1.10pm.





**ATAGI COVID Working Group**  
**Subgroup 2, Meeting No. 12**  
**Wednesday 13 January 2021, 12.00–1.00pm**

- To include clinical experience of other countries, beyond what is in the PI
- That information on solo shot mini would be helpful

Action	Responsible officer/s	Progress
2.1 Finalise MDV Paper, incorporating ICEG edits as agreed by members, for Executive endorsement on 15 January	SG2/NCIRS	In progress

- **Consent documents (Patient information sheet, provider information sheet and consent form)**

s47E(c), s47F noted that ATAGI Executive WG would be discussing the issue of consent at their meeting on 15 January, and the purpose of today's item is to seek input on the content of the draft consent documents.

Members DISCUSSED the suite of consent documents. Key points include:

- That the draft documents have been developed to be consistent with the endorsed advice developed by this group: *Advice on obtaining and recording informed consent for COVID-19 vaccines* (Found in the 'Endorsed Documents' folder on SharePoint).
  - I.e. that clear, unambiguous supporting information should be provided for patients and providers to manage perceptions, but that a consent form is not a requirement for the COVID-19 vaccination program (consistent with current practice for NIP vaccines)
- Some practitioners have concerns about consent and liability (e.g. are Medical Defence Organisations being consulted?)
- Importance of practitioners leading the way to manage perceptions, but not elevating possible concerns by providing too much information / changing the consent process from existing practice (these supporting documents would assist)
- Importance of the messaging that social distancing and other COVID-19 precautions are to continue after vaccination
- Encourage adverse event reporting both by health care providers and patients

Members NOTED:

- That in general practice, verbal consent is normal process for NIP
- General practices are poised for the COVID-19 vaccination program rollout however, uncertainties about logistics, requirements etc remain
- That further advice will be provided by the Executive Working Group prior to these documents being finalised

Members AGREED:

- It will be important that any materials are produced appropriately from a communications perspective (i.e. in appropriate language for general public and variety of languages)
- That verbal consent is acceptable and some jurisdictions/providers record verbal consent
- To review the content of the draft consent documents, noting further discussion to be had at Executive meeting Friday 15 January

**ATAGI COVID Working Group  
Subgroup 2, Meeting No. 12  
Wednesday 13 January 2021, 12.00–1.00pm**

Action	Responsible officer/s	Progress
2.2 Finalise suite of consent documents for SG2 endorsement 20 January, review by SG3 chair, and Executive endorsement on 22 January	SG2/NCIRS	In progress

**3. Other business**

Dr Robyn Gibbs noted that the subgroup is back to weekly meetings and thanked everyone for their contribution.

**4. Outcomes & Actions from previous meeting**

Nil.

Meeting closed at approximately 1:10pm.

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group**  
**Vaccine Safety, Evaluation, Monitoring and Confidence Sub Group #3**

**Teleconference 1:30 – 2:30pm**

**18 September 2020**

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**Outcomes**

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**In attendance:**

**Members**

Nigel Crawford (chair)  
Allen Cheng  
Chris Blyth  
Tony Korman  
Margie Danchin  
s47E(c), s47F  
Deb Petrys  
Diane Walsh  
Cheryl Jones

**NCIRS Technical staff**

s11C  
[Redacted]

**Department of Health representatives**

s47E(c), s47F  
[Redacted]

Sarah Sinclair

s47E(c), s47F  
[Redacted]

**1. Welcome and Apologies/General committee business**

Members:

- NOTED attendees and apologies
- NOTED Acknowledgement of Country
- DECLARED conflicts of interest – Nil (noting s47F [Redacted] has been invited as a temporary expert on a WHO Committee with no remuneration – not considered a conflict)
- NOTED introductions from members

**2. Role of Sub Group**

Members:

- DISCUSSED role of the Vaccine Safety, Evaluation, Monitoring and Confidence Sub Group to provide advice on safety and surveillance, monitoring system for the COVID-19 vaccine and test the communication strategy and messaging around the vaccine
- NOTED role of NCIRS in supporting Sub Group

### 3. Workplan

Members:

- NOTED the four elements of the Sub Group workplan, with this meeting to focus on 1 & 4:
  - Vaccine safety
  - Surveillance for vaccine effectiveness and impact of the Australian program
  - Evaluation of the Australian COVID-19 vaccination program
  - Vaccine confidence
- NOTED the NITAG Summary: COVID-19 & CDC ACIP vaccine safety presentation

### 4. Vaccine Safety

Members:

- NOTED an update on international regulation activities including work with the Medicines and Healthcare products Regulatory Agency (MHRA) and the International Coalition of Medicines Regulatory Authorities (ICMRA)
- NOTED the Therapeutic Goods Administration (TGA) is developing a Pharmacovigilance Plan covering:
  - Existing adverse event reporting systems
  - Rapid early detection and validation
  - Communications within the Department of Health
  - External communications
  - International collaboration
- NOTED the importance of communications being developed early with a coordinated message across TGA and the broader Department of Health

Action	Responsible officer/s	Progress
4.1 Sub Group 3 to review the Communications Strategy being developed by the Department of Health	COVID-19 Vaccine Taskforce	In progress (agenda item for next meeting on 2/10)

### 5. Vaccine Confidence

Members:

- DISCUSSED using transparent communication and community engagement to build public confidence and trust in the vaccine and the need to develop a framework around this
- NOTED a change in terminology from vaccine 'hesitancy' to vaccine 'confidence'

Action	Responsible officer/s	Progress
5.1 Small working group to be established to develop a framework regarding 'vaccine confidence' as part of the COVID-19 readiness planning	s47F	Interested members to contact Secretariat

### 6. Other Business

Members:

- NOTED the confidentiality of information discussed at meetings and the requirement to seek approval prior to speaking to the media
- AGREED to contact the Chair of Sub Group 3 or Co-Chairs of the ATAGI COVID-19 Working Group or the Department for any clarification
- AGREED to meet fortnightly on Friday from 1:30 – 2:30pm
- NOTED the format of agenda to remain, including an update on specific topics from members as needed
- NOTED another platform for meetings to be considered (eg videoconference)

Action	Responsible officer/s	Progress
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6.1 Schedule fortnightly meetings for Subgroup 3 - Friday 1.30-2.30pm using videoconference platform.	COVID19 Vaccine Support Section	Completed
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**7. Meeting Closed: 2.30pm**

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group**  
**Vaccine Safety, Evaluation, Monitoring and Confidence Sub Group**

**Videoconference 1:30 – 2:30pm**

**2 October 2020**

**Outcomes**

**In attendance:**

**Members**

Nigel Crawford (lead)

Allen Cheng

Tony Korman

Margie Danchin

s47E(c), s47F

Deb Petrys

Diane Walsh

Cheryl Jones

Alan Leeb

John Kaldor

s11C

**NCIRS Technical staff**

s11C

**Department of Health representatives**

Jodie Grieve

s47E(c), s47F

**Secretariat**

s22

**1. Welcome and Apologies/General committee business**

Members:

- NOTED attendees and apologies (Chris Blyth)
- NOTED Acknowledgement to Country
- DECLARED conflicts of interest – Nil
- NOTED introductions from members
- NOTED the role of the Sub Group

**2. Outcomes**

Members:

- NOTED outcomes from the previous meeting on 18 September 2020
- NOTED the Subgroup's workplan

Action	Responsible officer/s	Progress
2. Send Secretariat suggested revised wording for workplan from 'Covid	s47F	In progress

vaccine' to 'effective and safe Covid vaccine...'		
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### 3. Update from Executive Team meeting

Members:

- NOTED the Executive Team will consider and endorse papers developed by Subgroups
- DISCUSSED issues associated with possible publication of member names on the website

Action	Responsible officer/s	Progress
3 Subgroup members to send comments to Secretariat in relation to possible publication of names	Members	In progress

### 4. Confidence and Communications

#### 4.1 COVID-19 Communication Strategy

Members:

- NOTED a presentation by Jodie Grieve on the Commonwealth's draft COVID-19 Communication Strategy
- DISCUSSED key groups where engagement is important eg RACGP as well as providers
- AGREED Sharepoint could be used to house relevant COVID-19 information and resources
- NOTED the role of this Subgroup to develop an evidence-based framework flagging issues and gaps, rather than delivering a strategy
- NOTED the consumer perspective requiring clear key messages that are consistent, as well as addressing false statements
- NOTED the primary care perspective requiring transparency and honesty

#### 4.2 Collaboration on Social Science and Immunisation (COSSI)

- NOTED a presentation by s47F on a framework for supporting vaccine uptake comprising:
  - engagement with key groups, understanding needs and targeting campaigns to reach everyone in communities, including those that are culturally and linguistically diverse (CALD)
  - central repository of resources that can be accessed quickly
  - strategies to address misinformation

Action	Responsible officer/s	Progress
4.1.1 Fortnightly agenda item key themes/updates on Commonwealth communication strategy	Jodie Grieve, s47E(c), s47F Secretariat	In progress
4.1.2 Use Sharepoint page as a central repository for resources and communication pieces	Secretariat	To progress
4.1.3 Agenda for next meeting to include item on community resources that can be shared, including regional components	Secretariat	In progress
4.2.1 Share COSSI strategy with members	s47F	In progress

### 5. Development of a Communication Framework (Vaccine Confidence)

Members:

- NOTED a small working party had been established to commence developing a confidence & communication framework

Action	Responsible officer/s	Progress
5. More information on the ATAGI subgroup#3 Confidence &	s47F NCIRS	In progress

Communication framework to be provided for next meeting		
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## 6. Other Business

Members:

- NOTED the importance of open communication between ATAGI and CDNA committees

## 7. Next Meeting

Members:

- NOTED the next meeting on 16 October will focus on safety and pharmacovigilance

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group**  
**Vaccine Safety, Evaluation, Monitoring and Confidence Sub Group**

**Videoconference 1:30 – 2:30pm**

**16 October 2020**

**Outcomes**

**In attendance:**

**Members**

Nigel Crawford (lead)

Chris Blyth

Tony Korman

Margie Danchin

s47E(c), s47F

Diane Walsh

Cheryl Jones

Alan Leeb

John Kaldor

s11C

**NCIRS Technical staff**

s11C



**Department of Health representatives**

s47E(c), s47F

**Secretariat**

s22

**1. Welcome and Apologies/General committee business**

Members:

- NOTED Acknowledgement to Country
- NOTED attendees and apologies (Deb Petrys, s11C and s47E(c), s47F )
- DECLARED conflicts of interest – Nil

**2. Outcomes from previous meeting on 2 October**

Members:

- NOTED outcomes from the previous meeting on 2 October 2020.

**3. Update from Executive Team meeting**

Members:

- NOTED the Executive Team will consider and endorse papers developed by subgroups.
- NOTED member names will be published on the website subject to written consent.
- NOTED half day meeting for information sharing with ATAGI subgroups will be on Tuesday 10 November 2020 from 1-5pm AEDT.

Action	Responsible officer/s	Progress
3.1 Seek written consent to publish member names on website.	ATAGI COVID-19 Working Group Secretariat	Completed

3.2 Half day information sharing meeting for Subgroups: 1-5pm AEDT, Tuesday 10 November 2020.	ATAGI COVID-19 Working Group Secretariat	Invitations to be sent next week
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#### 4. Confidence and Communications

Members:

- NOTED the communication activities that have recently been undertaken
  - GP webinar
  - GP newsletter
  - Web content uploaded
  - Met with Culturally and Linguistically Diverse team in the Department
  - Discussion with Therapeutics Goods Administration (TGA) and Office of the Gene Technology Regulator regarding the vaccine announcements.
- NOTED the working paper developed by the Collaboration on Social Science and Immunisation (COSSI)

Action	Responsible officer/s	Progress
4.1 Draft high level list of communication activities to be placed on SharePoint	COVID-19 Taskforce	To progress

#### 5. TGA vaccine safety-pharmacovigilance plan

Members:

- NOTED the objectives of the COVID-19 Vaccine Pharmacovigilance Plan:
  - Timely collection and management of COVID-19 vaccine adverse event reports
  - Timely detection and investigation of COVID-19 vaccine safety signals
  - Timely regulatory and programmatic actions for addressing COVID-19 vaccine safety concerns
  - Timely communications for addressing emerging COVID-19 vaccine safety concerns to inform and ensure public confidence
  - Close collaboration and coordination of effort with government agencies and stakeholder organisations with an interest in vaccine safety

Action	Responsible officer/s	Progress
5.1 TGA to establish COVID Standing Committee and draft Terms of Reference	TGA	

#### 6. Adverse Events of Special Interest (AESI)

Members:

- NOTED the discussion paper on the Adverse Events of Special Interest (AESI): COVID-19 Vaccines
- NOTED the presentation and discussion paper on SARS/ MERS Vaccine Disease Enhancement

Action	Responsible officer/s	Progress
6.1 Members to provide feedback on AESI discussion paper	Subgroup 3 Members	Add feedback in track changes to document on SharePoint
6.2 Members to provide feedback on the SARS-CoV-1 / MERS-CoV Vaccine-associated Enhanced Disease discussion paper.	Subgroup 3 Members	Add feedback in track changes to document on SharePoint

## **7. No fault Compensation scheme**

Members:

- NOTED rather than a no fault compensation scheme, the advanced market agreements for COVID19 vaccines include an indemnity clause for the manufacturer.

## **8. Other Business**

- Nil

## **9. Next Meeting**

Members:

- NOTED the next meeting on 30 October 2020 will focus on Evaluation (AIR and other programs).

## **10. Meeting Close: 14:36**

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group**  
**Vaccine Safety, Evaluation, Monitoring and Confidence Sub Group**

**Videoconference 1:30 – 2:30pm**

**30 October 2020**

**Outcomes**

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**In attendance:**

**Members**

Nigel Crawford (lead)

Chris Blyth

Tony Korman

Margie Danchin

s47E(c), s47F

Diane Walsh

Cheryl Jones

Alan Leeb

s11C

Paul Effler

Bette Liu

Tom Snelling

**NCIRS Technical staff**

s11C

**Department of Health representatives**

s47E(c), s47F

Sarah Tyquin

s47E(c), s47F

**Secretariat**

s22

**1. Welcome and Apologies/General committee business**

Members:

- NOTED Acknowledgement to Country
- NOTED attendees and apologies (Allen Cheng, John Kaldor, Deb Petrys)
- DECLARED conflicts of interest – Nil

**2. Outcomes from previous meeting on 16 October**

Members:

- NOTED outcomes from the previous meeting on 16 October 2020
- NOTED the Adverse Events of Special Interest (AESI) discussion paper will form part of Subgroup 3's preliminary advice on safety, to be discussed/endorsed at the next meeting
- NOTED feedback on TGA's draft pharmacovigilance plan should be forwarded through the Secretariat

Action	Responsible officer/s	Progress
2.1 Finalise preliminary advice on safety including AESI	Subgroup 3	In progress

### 3. Program Evaluation

Members:

- DISCUSSED the Australian Immunisation Register (AIR) with Sarah Tyquin including:
  - new functionality available from 14 November, including a 'generic flag' that alerts the provider to look at their record in more detail
  - importance of linking the AIR to other data sets for safety monitoring and evaluation
  - gaps in reporting of vaccinations received in workplace settings
  - consumer consent in relation to uploading of vaccination status onto the AIR
  - separate recording of vaccine brand names
  - discussing AIR issues at the half day session for members on 10 November
- DISCUSSED elements of a COVID-19 vaccination program evaluation with s47F including:
  - program objective
  - process for implementation
  - vaccine uptake
  - disease impact

Action	Responsible officer/s	Progress
3.1 Invite Government agency working with linked data to Subgroup 3 meeting to discuss linking to the AIR	Secretariat	In progress
3.2 Prepare brief document outlining a range of evaluation options and timings	NCIRS s47F	In progress

### 4. Feedback from US FDA meeting 22 October re evaluation

Members:

- NOTED a brief update from s47F on the US FDA meeting

### 5. Commonwealth Communications Activities

Members:

- NOTED an update from s47E(c), s47F on communications activities including:
  - development of a COVID-19 public facing resource hub
  - roll out of a social media program
  - planning for a national campaign
- NOTED Subgroup 3 advice on communications/confidence will be considered at the next meeting including:
  - material in other languages
  - community champions
  - informing key messages

Action	Responsible officer/s	Progress
5.1 Bring ATAGI communications advice to next Subgroup 3 meeting for endorsement	NCIRS/Secretariat	In progress

### 6. Next Meeting

Members:

- DISCUSSED changing the fortnightly meeting day from Fridays to Thursdays at 11.30am (next meeting proposed as Thursday 12 November at 11.30am)

**Meeting Close:** approx. 2.30pm

**ATAGI COVID Working Group**  
**Subgroup 3, Meeting No. 5**  
**26 November 2020, 11:30 – 12:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health reps
Nigel Crawford- Lead	s11C	s47E(c), s47F
Cheryl Jones		
Tony Korman		
John Kaldor		
s47E(c), s47F		<b>Secretariat</b>
Alan Leeb		s22
Deb Petrys		
Paul Effler		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (Allen Cheng, Diane Walsh and Margie Danchin)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting on 30 October**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team Meeting**

Members NOTED that the priority populations and vaccine policy have been published

**4. Communications and confidence advice**

- ATAGI COVID19 WG3 Comms Strategy Preliminary advice DRAFT v2.1
- Attachment C – Australian Immunisation stakeholder draft v1.5 23Nov2020

Members DISCUSSED:

- The purpose of the communications and confidence advice
- The role of Subgroup 3 in providing advice to the Department and identifying gaps
- Minor refinement to the paragraph: *Develop additional messages for specific target groups*
- Suggestions for Attachment C (which is a living document) including category headings

Members ENDORSED both documents for consideration by the Working Group Executive.

Action	Responsible officer/s	Progress
Forward Comms advice to Executive for endorsement	Secretariat	Completed

**5. Safety advice**

- ATAGI COVID19 WG3 Vaccine Safety preliminary advice DRAFT v1.2
- AESI for COVID19 vaccines 12112020 v3
- SARS MERS Vaccine Enhanced Disease Summary V2

Members AGREED to continue to refine the documents and incorporate inputs including:

- Revision of no-fault compensation scheme wording to make the subgroup's recommendation clearer

**ATAGI COVID Working Group**  
**Subgroup 3, Meeting No. 5**  
**26 November 2020, 11:30 – 12:30pm**

- Clinical management of adverse reactions
- Review of patients prior to receiving a second dose
- Stronger communications on safety and the need to report adverse events
- Inclusion of an executive summary to capture clear recommendations

Action	Responsible officer/s	Progress
Incorporate changes to draft safety advice and circulate to members for comment by next week	NCIRS/Secretariat/Members	In progress

## 6. Evaluation framework & advice

- ATAGI COVID 19 WG3 Evaluation Preliminary advice DRAFT v2

### Members NOTED:

- The critical role of evaluation in relation to the National Immunisation Program
- Overview and purpose of the evaluation advice which is a work in progress
- Aspects of the advice including multi-phased evaluation, balancing real time monitoring with 6-12 months evaluation
- That Communicable Diseases Network Australia supports the modelling advice developed by Subgroup 1

### Members DISCUSSED:

- The need for greater clarity around ownership/implementing components of the evaluation framework
- Data sources that should be highlighted

## 7. Incident management strategy

Members AGREED to conduct scenario planning at the next meeting

Action	Responsible officer/s	Progress
Conduct scenario planning next week, 3 December 2020	Subgroup 3	To progress

## 8. Commonwealth communications activities update

s47E(c), s47F provided an update on communications activities.

### Members NOTED:

- Importance of advice from the subgroup to ensure the Department is briefing the public well
- The Minister and Prime Minister's Offices receive regular communications updates

s47E(c), s47F will provide an update on sentiment monitoring at the next meeting

## 9. Other business

Nil

Meeting closed approx. 12:40pm

**ATAGI COVID Working Group  
Subgroup 3, Meeting No. 6  
3 December 2020, 11:30 – 12:30pm**

**In attendance:**

Members	NCIRS Technical Staff	Department of Health reps
Nigel Crawford- Lead	s11C	s47E(c), s47F
Cheryl Jones		
Tony Korman		Leanne Ringwood
John Kaldor		s47E(c), s47F
s47E(c), s47F		
Alan Leeb		
Paul Effler		
Diane Walsh		<b>Secretariat</b>
Margie Danchin		s22
Katie Attwell		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees (welcoming Katie Attwell from the communications working group of Subgroup 3) and apologies (Allen Cheng and Debra Petrys)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting on 26 November**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team Meeting**

Members NOTED that the Executive Team endorsed the Subgroup 3 communications advice

**4. Safety advice**

- ATAGI COVID19 WG3 Vaccine Safety preliminary advice DRAFT v1.4
- Attachment A. AESI for COVID19 vaccines 12112020 v3
- Attachment D. SARS MERS VaccineEnhancedDiseaseSummary V2

Members DISCUSSED:

- Encouraging reporting of adverse events and the interplay between communications and safety
- Reporting to the Australian Immunisation Register and the importance of 'active surveillance'
- The structure of the document

TGA thanked Subgroup 3 members for this work which will be a helpful resource for pharmacovigilance activities.

Members ENDORSED the safety advice documents for consideration by the Working Group Executive, subject to incorporation of further input by NCIRS. It is anticipated that the safety advice will be provided to the Taskforce and TGA.

Action	Responsible officer/s	Progress
Forward safety advice to Executive for endorsement	Secretariat	Completed



**ATAGI COVID Working Group  
Subgroup 3, Meeting No. 6  
3 December 2020, 11:30 – 12:30pm**

**5. Communication issues/planning**

- List of likely scenarios

s47E(c), s47F from Corona Comms provided an update including:

- Request for feedback from members on the draft COVID-19 vaccine scenario register and any significant events warranting a comms response
- Article in The Conversation by Chris Blyth and Allen Cheng
- Media briefings being undertaken by the Department
- Development of a COVID-19 hub for publishing on the Department's website
- Spokespeople to be deployed depending on the scenario and domain

**Members NOTED**

- the National Aboriginal Community Controlled Health Organisation is an important stakeholder organisation
- developments in the United Kingdom in coming weeks will have implications for vaccine confidence
- the department is working towards identifying spokespeople at a local level
- some jurisdictions are setting up teams for COVID-19 rollout, including communications activities

Members AGREED to hold a scenario testing session at the next meeting on 10 December covering an adverse event in Australia, with a future scenario to have an international context.

**6. Other business**

Nil

Meeting closed at 12:10pm

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**ATAGI COVID Working Group**  
**Subgroup 3, Meeting No. 7**  
**10 December 2020, 11:30 – 12:30pm**

**In attendance:**

<b>Members</b>	<b>NCIRS Technical Staff</b>	<b>Department of Health reps</b>
Nigel Crawford - Lead	s11C	s47E(c), s47F
Chris Blyth		
Allen Cheng		
Cheryl Jones		
Tony Korman		
John Kaldor		Claire Larter
s47E(c), s47F		s47E(c), s47F
Alan Leeb		
Paul Effler		
Diane Walsh		
Margie Danchin		<b>Secretariat</b>
Debra Petrys		s22
Katie Attwell		
s11C		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (nil)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting on 26 November**

- Members ENDORSED outcomes and actions from previous meeting with no amendments

**3. Update from Executive Team Meeting**

Members NOTED:

- that the Executive Team endorsed the Subgroup 3 safety advice
- evaluation advice requires further direction from Executive/Taskforce

**4. Scenario walk through (Australian context)**

Members DISCUSSED how to respond to likely scenarios following vaccine roll out such as:

- Mild reactions (e.g. hives) to severe anaphylactic episodes requiring intensive care admission
- Deaths
- Increased media attention to Commonwealth and local health departments
- Poor vaccine sentiment and reduced uptake

Members AGREED to the following key points:

- Clear communication channels and early dissemination of talking points to spokespeople
- Accurate, transparent and consistent messaging
- Consider cultural sensitivities and the need for emphatic messaging
- Early public reassurance and clear advice on the process being undertaken
- Importance of alerting and involving the Commonwealth Health Department and TGA early
- Whether there is a need to document vaccine attribution and potential for causality
- Importance of sentiment and uptake monitoring and how they complement each other

**ATAGI COVID Working Group**  
**Subgroup 3, Meeting No. 7**  
**10 December 2020, 11:30 – 12:30pm**

Members NOTED:

- Daily media briefing by the Department's CMO
- Department's central news team and how it operates
- Preparation work with journalists is underway
- TGA's signal and safety processes in response to vaccine adverse events
- The need to explore vaccine indemnity further

Action	Responsible officer/s	Progress
Circulate information on how and when to contact the news team	Secretariat/ s47E(c), s47F	To progress

**5. Other business**

Nil.

Meeting closed at 12:40pm

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**ATAGI COVID Working Group**  
**Subgroup 3, Meeting No. 8**  
**17 December 2020, 11:30 – 12:30pm**

**In attendance:**

<b>Members</b>	<b>NCIRS Technical Staff</b>	<b>Department of Health reps</b>
Nigel Crawford - Lead	s11C	s47E(c), s47F
Allen Cheng		
Tony Korman		<b>Secretariat</b>
John Kaldor		s22
s47E(c), s47F		
Alan Leeb		
Paul Effler		
Diane Walsh		
Margie Danchin		
Katie Atwell		
Debra Petrys		
Tom Snelling		

**1. Welcome and apologies / general committee business**

Members:

- NOTED acknowledgement to country
- NOTED attendees and apologies (Bette Liu)
- Declared no conflicts of interest

**2. Outcomes and Actions from previous meeting on 10 December**

- Members ENDORSED outcomes and actions from previous meeting with no amendments and provided feedback on the excellent scenario planning that was undertaken

**3. Update from ATAGI Working Group Information Sharing Session 15 Dec 2020**

Members AGREED:

- Session was useful however noted the need for further clarity on issues including:
  - how safety signals are communicated to the Department
  - decision making in relation to prioritisation (from a consumer perspective)
  - how to handle media requests and the need for a clearer process

Members NOTED:

- Established mechanisms in place to communicate significant safety signals to the Department
- Need for a mechanism to share speaking points to ensure consistency in messaging
- Corona Comms Team's intention to provide greater clarity on handling media requests
- Overlap in issues considered across the ATAGI subgroups and opportunities to work together

**4. Evaluation framework - planning**

Members AGREED:

- Two aspects of the evaluation framework:
  - real-time monitoring of the rollout (data collection)
  - broader aspects of evaluation (impacts on disease burden etc)

Members DISCUSSED

- Role of Department's logistics and data partners
- Potential topics for the evaluation framework including:
  - Doses given, mandatory reporting to AIR
  - Vaccine safety, adverse events

**ATAGI COVID Working Group**  
**Subgroup 3, Meeting No. 8**  
**17 December 2020, 11:30 – 12:30pm**

- Cold chain breaches
- Communications and messaging
- Vaccine sentiment, hesitancy
- Data sources and collection points
- How far back the evaluation framework will go (e.g. formation of subgroups)
- Lessons learned, what worked and any improvements
- Focus on what needs to be in place in the early days of the rollout and separating immediate and longer term requirements
- Identifying the indicators and frequency of reporting, the decisions that need to be made about rollout and the information needed to inform those decisions
- Advice on specific data fields that need to be captured
- How the national evaluation framework will link to jurisdictional processes
- Lessons learned from the CDNA HPV vaccine evaluation framework
- Role of Subgroup in giving advice on an evaluation framework rather than undertaking the evaluation
- Longer term and broader picture, such as addition of COVID-19 vaccines to the NIP
- Reputable sources of information such as the Department's vaccine hub and NCIRS FAQs

Members NOTED:

- TGA working closely with NHMRA in relation to Adverse Events Following Immunisation (AEFI) data, noting that only high level information on adverse events cases are visible on WHO database
- TGA receives adverse event reports through the Database of Adverse Event Notifications which is updated following validation of reports
- TGA considering how to report AEFI
- Mandatory reporting to AIR is well underway

Action	Responsible officer/s	Progress
Provide high level evaluation framework by mid-January 2021	Subgroup 3/NCIRS	In progress
Circulate link to Canada's playbook	Secretariat	Completed

**5. Subgroup 3 meeting timetable 2021**

Members AGREED to:

- Phase 1: provide feedback on the draft evaluation advice by **8 January 2021** (*Preliminary draft advice on evaluation strategies v2.1*) – high level inclusions in an evaluation plan
  - NCIRS to finalise draft in week of **11 January 2021**
  - Subgroup 3 Lead, NCIRS and Secretariat to pre-meet on **11/12 January 2021**
  - Subgroup 3 to reconvene **14 January 2021** to endorse evaluation advice and provide to Executive Group for consideration on 15 January 2021
- Phase 2: build on Phase 1 work via Expressions of Interest for smaller group/s to flesh out detail of evaluation plan

Action	Responsible officer/s	Progress
Seek members' availability and topic interests for smaller group evaluation workshop	Secretariat	Completed

Subgroup Lead thanked everyone for their work and support and wished everyone a restful break. Meeting closed 12:30pm

**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group #1  
Videoconference  
4 September 2020**

**Outcomes**

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**In attendance:**

**Executive Members**

Chris Blyth (Co-Chair)  
Allen Cheng (Co-Chair)  
Lisa Schofield  
Nick Henderson  
s11C  
Hope Peisley  
Katie Flanagan  
Nigel Crawford  
Robyn Gibbs

**Sub group Members**

Karen Bellamy  
Katherine Gibney  
Michelle Giles  
Madeline Hall  
Cheryl Jones  
Bette Liu  
Debra Petrys  
Nicholas Silberstein  
Tom Snelling  
s47E(c), s47F  
Angus Dawson  
Kanta Subbarao  
Margie Danchin

**National Centre for Immunisation Research and Surveillance (NCIRS) representatives (observers)**

s11C  
s11C

**Department of Health representatives**

**Secretariat**

s47E(c), s47F

### 1. Meeting Opened

Members:

- NOTED attendees and apologies
- DECLARED no conflicts of interest

### 2. Finalise Scope and Terms of Reference (ToR) for the Working Group

Members:

- DISCUSSED Working Group ToR and members asked for comments
- NOTED sub group leads were encouraged to advise the Executive if they require representation from a particular group
- NOTED Dr Penny Burns, Prof Lena Sancu, Dr Alan Leeb could possibly be the primary healthcare representatives

Action:

Action	Responsible officer/s	Progress
2.1 Review ToR and add suggested updates	ATAGI Secretariat	Completed
2.2 Endorse Working Group ToR with changes	Co-Chairs	Completed
2.3 Draft map of COVID-19 Committees and how they integrate with one another	COVID-19 Taskforce	In progress
2.4 Make recommendations of possible Primary Care representatives for the Working Group	Executive members	Completed

### 3. Working Group work streams

Members:

- NOTED NCIRS Technical Support staff will support each sub group, refer to Attachment A – Working Group Structure
- NOTED NCIRS draft work plan

Action:

Action	Responsible officer/s	Progress
3.1 Review NCIRS work plan to identify gaps and ensure key deliverables of each sub group are included.	COVID-19 Taskforce	In progress
3.2 Taskforce to provide a list of resources that are available.	COVID-19 Taskforce	In progress
3.3 Approved work plan to be provided to Sub Group leads for comment.	ATAGI Secretariat	In progress
3.4 Establish new email inbox and a Working Group SharePoint page for the ATAGI COVID Working Group	ATAGI Secretariat	SharePoint page is Complete, email inbox in progress
3.5 Establish a team to provide support to the ATAGI COVID	Immunisation and Communicable Disease Branch	In progress

Working Group and the JIC COVID Working Group		
3.6 Provide link to the COVID-19 Vaccines and Treatments for Australia Science and Industry Technical Advisory Group webpage	COVID-19 Taskforce	Completed
3.7 Schedule weekly Executive Working Group meeting	ATAGI Secretariat	Completed
3.8 Schedule initial meetings for each Sub Group	ATAGI Secretariat	Completed
3.9 Provide the COVID-19 Taskforce with a list of data required	NCIRS	Completed
3.10 Arrange CDNA representation on each Subgroup	ATAGI Secretariat	In progress

#### 4. Sub groups – Preliminary Discussions

Members:

- NOTED introductions from Members

#### 5. Meeting Closed: 11:15 am

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group #2  
Videoconference  
11 September 2020**

**Draft Outcomes**

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**In attendance:**

**Executive Members**

Chris Blyth (Co-Chair)  
Allen Cheng (Co-Chair)  
Lisa Schofield  
Nick Henderson  
s11C  
Hope Peisley  
Katie Flanagan  
Nigel Crawford  
Robyn Gibbs

**Department of Health representatives**

Sarah Sinclair  
s47E(c), s47F

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED attendees and apologies
- DECLARED conflicts of interest – s47F declared three COVID-19 Research grants – no pharmaceutical funding received. No further conflicts declared.

**2. NCIRS work plan**

Members:

- NOTED the deliverables requested by the Department of Health for each sub group. Will need to provide Government with preliminary advice from the ATAGI COVID-19 working group by the end of September.
- NOTED NCIRS Technical Support staff will support each sub group.
- DISCUSSED the NCIRS work plan and agreed that it would be a useful iterative tool,

## Action:

Action	Responsible officer/s	Progress
2.1 Update and Finalise ATAGIs Preliminary advice on general principles to guide the prioritisation of target populations in a COVID-19 vaccination program in Australia	Subgroup 1 – Vaccine utilisation and prioritisation	In Progress (due 17/9)
2.2 First draft of ATAGIs COVID19 vaccine prioritisation matrix	Subgroup 1 – Vaccine utilisation and prioritisation	In progress (due 17/9)
2.3 Overlay priority populations with the Oxford and UQ vaccines.	Subgroup 1 – Vaccine utilisation and prioritisation	In progress (due 17/9)
2.4 Monitoring of COVID-19 vaccines	COVID-19 Taskforce	In progress
2.5 Prepare implementation plan for rollout of Oxford, UQ and RNA vaccines.	Subgroup 2 – Vaccine distribution and program implementation	In progress (due 30/9)
2.6 Prepare advice on Workforce required for implementation of COVID-19 vaccine – determine how many and what sort of training will be required	Subgroup 2 – Vaccine distribution and program implementation	In progress (due 30/9)
2.7 Plan for monitoring and tracking doses of the COVID-19 vaccine	Subgroup 2 – Vaccine distribution and program implementation	In progress (due 30/9)
2.8 Prepare advice on safety and surveillance, monitoring system to be used- how existing systems such as AusVaxSafety and AIR fit.	Subgroup 3 – Vaccine Safety, Evaluation, Monitoring and Confidence	In progress
2.9 Test the communication strategy and messaging around the COVID-19 vaccine	Subgroup 3 - Vaccine Safety, Evaluation, Monitoring and Confidence	In progress
2.10 NCIRS technical leads to be invited to Executive Group meetings	ATAGI Secretariat	Completed

### 3. Working Group work streams

#### Members:

#### Subgroup 1

- NOTED the prioritisation matrix needs to be updated to align with what is happening in Australia
- NOTED ring- fencing may need to be considered.

## Subgroup 2

- NOTED that implementation plan for the rollout of COVID-19 Vaccines and systems to track the vaccine are a priority of this subgroup.

## Subgroup 3

- NOTED a landscape analysis of global vaccine safety plans would be useful.
- NOTED the importance of linking into the communication strategy early.
- NOTED that tracking vials administered to patients is a priority for this subgroup.

## Action:

Action	Responsible officer/s	Progress
3.1 s47F to meet with NCIRS technical leads prior to sub group1 meeting.	NCIRS technical leads and Subgroup 1 Lead	Completed
3.2 ATAGI secretariat to establish process with TGA to share information	ATAGI Secretariat	In progress
3.4 Establish new email inbox and a Working Group SharePoint page for the ATAGI COVID Working Group. Provide details to Working Group members	ATAGI Secretariat	Completed-Email to Members with SharePoint and inbox details 14/9/2020
3.5 AIR should be a standing item on the Executive Meeting Agenda	ATAGI Secretariat	Completed

## 4. Meeting Closed: 10.30am

**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group #3  
Videoconference  
18 September 2020**

**Outcomes**

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**In attendance:**

**Executive Members**

Chris Blyth (Co-Chair)  
Allen Cheng (Co-Chair)  
Lisa Schofield  
Nick Henderson  
s11C  
Hope Peisley  
Katie Flanagan  
Nigel Crawford  
Robyn Gibbs

**NCIRS support staff**

s11C

**Department of Health representatives**

s47E(c), s47F

Sarah Sinclair

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED acknowledgement of Country
- NOTED attendees and apologies
- DECLARED no conflicts of interest

## 2. Australian Immunisation Register

- No discussion

## 3. Communications

Members:

- NOTED that any media requests should be responded to in line with other ATAGI media requests. ATAGI members are able to respond as individual experts, however if requested to speak on behalf of ATAGI or the ATAGI COVID-19 Working Group, members are required to seek approval from the Department via the [ATAGI.Secretariat@health.gov.au](mailto:ATAGI.Secretariat@health.gov.au).

## 4. Subgroup Updates

Members:

- NOTED updates from Subgroup leads.

Action:

Action	Responsible officer/s	Progress
4.1 Workshop ring-fencing and incorporate into prioritisation document.	Subgroup 1 – Vaccine utilisation and prioritisation	To progress
4.2 Overlay priority populations with the Oxford and UQ vaccines.	Subgroup 1 – Vaccine utilisation and prioritisation	In progress
4.3 Prepare implementation plan for the rollout of each vaccine -Oxford, UQ and RNA vaccines. How would you roll out a targeted program? Provide different scenarios.	Subgroup 2 – Vaccine distribution and program implementation	In progress ( preliminary draft due 30/9)
4.4 COVID 19 vaccine Taskforce to meet with <sup>s47</sup> F to further explore scenarios to be tested.	COVID-19 Vaccine Taskforce and Subgroup 2 Lead	To progress
4.5 Test Communication Strategy with various advisory groups including COVID-19 ATAGI working Group	COVID-19 Vaccine Taskforce and Subgroup 3 – Vaccine Safety, Evaluation, Monitoring and Confidence	To progress
4.6 Update ATAGI webpage to include information about the ATAGI COVID-19 Working Group	ATAGI Secretariat	In progress

## 5. Other business

### Members:

- NOTED the verbal update from Ms Peisley on the Astra Zeneca meeting, 16 September 2020.
- NOTED the verbal update from Ms Peisley on the NITAG meeting, 17 September 2020 (Australia, Canada, UK, US, Germany, and World Health Organisation).

### Action:

Action	Responsible officer/s	Progress
5.1 Arrange a meeting with AstraZeneca to brief the ATAGI COVID-19 Working Group	COVID-19 Vaccine Support Section	In progress
5.2 ATAGI to provide the Department with themes/questions they would like to discuss with AstraZeneca	ATAGI Co-Chairs	In progress
5.3 Provide overview brief of what NITAGS are doing in the COVID-19 space.	NCIRS	In progress

## 6. Meeting Closed: 10.31am

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #4 by Videoconference  
24 September 2020, 4.30-5.30pm  
Outcomes**

**In attendance:****Executive Members**

Chris Blyth (Co-Chair)

Lisa Schofield

Nick Henderson

s11C

Hope Peisley

Katie Flanagan

Nigel Crawford

Robyn Gibbs

**NCIRS support staff**

s11C

**Department of Health representatives**

Jodie Grieve

s47E(c), s47F

Sarah Sinclair

s47E(c), s47F

Sarah Sinclair

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED acknowledgement of Country
- NOTED attendees and apologies (Allen Cheng)
- DECLARED no conflicts of interest
- NOTED outcomes from previous meeting

**2. Communications**

Members:

- NOTED presentation by Jodie Grieve on the COVID-19 Communication Strategy and draft plan on a page summarising strategic approach, key messages, audience and activities. The communication strategy will:
  - include health care workers
  - align and interconnect with other strategies (eg Covid Safe)
  - reflect open and transparent decision making to promote confidence

- NOTED other communication activities being undertaken in the Department:
  - participation in a GP webinar discussing ATAGI activities
  - web content to be expanded and used for social media
  - letters to be sent to providers
  - market research to be conducted on community attitudes, noting strong community support for COVID-19 vaccines to date
- NOTED Subgroup 3 is considering communications and connections with other groups (eg aged care and disability)
- NOTED consistent messaging and transparency around decision making processes are crucial

Action	Responsible officer/s	Progress
2.1 Upload draft communication plan on a page on Sharepoint	Secretariat	Completed
2.2 Provide feedback on communication plan, including suggestions to disseminate information to key groups	Members	In progress
2.3 Incorporate feedback and bring revised plan back to Working Group	Jodie Grieve	In progress
2.4 Update ATAGI website with information about Working Group and Subgroups	Secretariat	In progress
2.5 Seek advice from Subgroup members regarding publication of names on website	Secretariat	In progress

### 3. New committee members

Members:

- AGREED to the addition of new CDNA representatives:
  - s47F – ATAGI full committee
  - Dr Christine Selvey – Subgroup 1
  - Dr Annaliese van Diemen – Subgroup 2
  - Prof John Kaldor – Subgroup 3
- AGREED to the addition of new GP representatives:
  - Dr Penny Burns – Subgroup 1
  - Prof Lena Sanci – Subgroup 2
  - Dr Alan Leeb – Subgroup 3
- AGREED to the addition of other representatives for Subgroup 1, noting that membership across groups will need to be agile as required:
  - Prof Dave Durrheim
  - Aboriginal and Torres Strait Islander rep (nominated through CDNA)
  - Gerontologist (preferred – Prof Chris Etherton-Beer; Geriatrician and PBAC member)
  - Member with expertise in evaluation of benefit versus risk

Action	Responsible officer/s	Progress
3.1 Make necessary arrangements with proposed members	Secretariat	In progress



#### 4. Subgroup Updates

Members:

- NOTED updates from Subgroup leads
- NOTED Subgroups need to come together to share information
- AGREED Executive Team should consider and endorse documents developed by Subgroups before advice is provided to the Taskforce

Action	Responsible officer/s	Progress
4.1 Plan to bring Subgroup members together for half day information sharing (end of October)	Secretariat	To progress
4.2 Embed process to seek Executive approval of Subgroup documents	Secretariat and Subgroup leads	In progress

#### 5. Other business

Members:

- NOTED verbal update from Ms Peisley on arrangements for next meeting with AstraZeneca (likely week commencing 5 or 12 October)
- AGREED no Executive Team meeting next week
- AGREED future meetings on Fridays at 12 noon (AEST)

Action	Responsible officer/s	Progress
5.1 Arrange Friday meetings commencing 9 October	Secretariat	In progress

#### 6. Meeting Closed: 5.35pm

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #5 by Videoconference  
9 October 2020, 12-1pm  
Outcomes**


**In attendance:****Executive Members**

Chris Blyth (Co-Chair)  
 Allen Cheng (Co-Chair)  
 Lisa Schofield  
 Nick Henderson  
 s11C  
 Hope Peisley  
 Katie Flanagan  
 Nigel Crawford  
 Robyn Gibbs

**NCIRS support staff**

s11C  


**Department of Health representatives**

Sarah Sinclair  
 s47E(c), s47F  


**Secretariat**

s22  


**1. Meeting Opened**

## Members:

- NOTED Acknowledgement to Country and the excellent work Aboriginal and Torres Strait Islander communities have done in relation to COVID-19
- NOTED attendees and apologies (nil)
- DECLARED no conflicts of interest

**2. Outcomes and Actions from previous meeting**

## Members:

- ENDORSED outcomes from the previous meeting on 24 September 2020
- NOTED information on the ATAGI COVID-19 Working Group was published today at <https://www.health.gov.au/committees-and-groups/australian-technical-advisory-group-on-immunisation-atagi-covid-19-working-group>
- NOTED all ATAGI COVID-19 Subgroups discussed the proposal to publish member names on the website with no objections
- AGREED to proceed with publishing member names subject to completion of consent forms by members
- AGREED to bring all members together for a half day information sharing session in the first week of November 2020

Action	Responsible officer/s	Progress
2.1 Seek written consent from all subgroup members to publish names on website	Secretariat	To progress
2.2 Organise half day session for all members in November	Secretariat	In progress

### 3. Overall aim of COVID-19 Vaccine Program

Members:

- NOTED the suggested aim of the program under discussion by Subgroup 1

### 4. Subgroup Updates

Members:

- NOTED new members appointed to all Subgroups
- NOTED updates from Subgroups, including:
  - Subgroup 1 will bring a prioritisation matrix to the Executive meeting in a fortnight
  - Subgroup 2 has proposed further workplan topics (Executive identified top three topics as multidose vials, consent, and checklist/s relating to vaccine delivery)
  - Subgroup 3 is preparing a confidence and communication framework from a social science perspective and is working closely with the Department
- AGREED to invite s47F to join Subgroup 3 due to his expertise in safety and evaluation

Action	Responsible officer/s	Progress
4.1 Advise on the process around information prepared by the ATAGI COVID-19 Working Group and whether further input is needed	Lisa Schofield	Discuss at next meeting
4.2 Extend invitation to s47F	s47F	Completed

### 5. Subgroup 2 papers for endorsement

Members:

- ENDORSED the following discussion papers, noting they will be updated when more information about the vaccine/s is available:
  - frozen vaccine logistics
  - workforce competencies
- DISCUSSED next steps in relation to this work, including whether the documents can be circulated to Jurisdictional Immunisation Coordinators

Action	Responsible officer/s	Progress
5 Advise on next steps in relation to discussion papers on workforce competencies and frozen logistics	Lisa Schofield	Discuss at next meeting

### 6. Meeting with AstraZeneca (20 October)

Members:

- NOTED advice from Ms Peisley that attendance at the meeting with AstraZeneca carries strict obligations and any information provided can only being used for the express purposes under which it is given (i.e. within the ATAGI structure and not beyond)

- NOTED the Taskforce is anticipating a similar meeting with CSL in approximately one month

Action	Responsible officer/s	Progress
6 Email to be sent to ATAGI members seeking confirmation regarding AstraZeneca meeting obligations	Taskforce	In progress

## 7. Australian Immunisation Register (AIR)

Members:

- NOTED the Minister has provided approval for the Department to commence consultation on mandatory reporting to the AIR

## 8. Communications

Members:

- DISCUSSED the need for COVID-19 key stakeholder briefings broader than primary care (similar to monthly flu roundtables)

Action	Responsible officer/s	Progress
8.1 Clarify what COVID-19 stakeholder briefings have been done or are planned	Hope Peisley	In progress
8.2 Discuss stakeholder briefings with Lisa Schofield	s47F	Completed

## 9. Other Business

Members:

- NOTED NCIRS is holding a public seminar with AstraZeneca in late November
- DISCUSSED the need for clarity in defining the safety roles of ATAGI and the TGA's Advisory Committee on Vaccines (ACV) and whether a meeting with Chairs and the Department is needed to define roles and discuss how the committees can work together

9 Organise meeting with ACV and ATAGI Chairs subject to advice from Lisa Schofield	Secretariat	To progress
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## 10. Meeting Closed: approx. 1pm

**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #6 by Videoconference  
16 October 2020, 12-1pm  
Outcomes**

**In attendance:****Executive Members**

Chris Blyth (Co-Chair)  
 Allen Cheng (Co-Chair)  
 Nick Henderson  
 s11C  
 Hope Peisley  
 Katie Flanagan  
 Nigel Crawford  
 Robyn Gibbs

**NCIRS support staff**

s11C  
 [Redacted]

**Department of Health representatives**

Sarah Sinclair  
 s47E(c), s47F  
 [Redacted]

**Secretariat**

s22  
 [Redacted]

**1. Meeting Opened**

Members:

- NOTED Acknowledgement to Country
- NOTED attendees and apologies (Lisa Schofield and s11C )
- DECLARED no conflicts of interest

**2. Outcomes and Actions from previous meeting**

Members:

- ENDORSED outcomes from the previous meeting on 9 October 2020
- DISCUSSED how outputs of working group will be managed once finalised
- NOTED the update on stakeholder briefings recently undertaken:
  - GP webinar
  - GP newsletters
  - Web content uploaded and more content in development
  - Letter from Dr Brendan Murphy sent to the 15 peak bodies
  - Professor Kidd social media video published and more content in development
  - UQ agreement announcement published on health.gov.au and on social media
  - TGA statement about AstraZeneca provisional determination published

Action	Responsible officer/s	Progress
2.1 Seek written consent to publish member names on website	ATAGI COVID-19 Working Group Secretariat	Completed
2.2 Half day information sharing for Subgroups: 1-5pm AEDT, Tuesday 10 November 2020	ATAGI COVID-19 Working Group Secretariat	In progress
2.3 Outline timeframes for when key deliverables from Subgroups can be shared with stakeholders	COVID-19 Taskforce	In progress
2.4 Centralise international documents on SharePoint	ATAGI COVID-19 Working Group Secretariat and NCIRS	In progress

### 3. Subgroup membership

Members:

- DISCUSSED the requests for additional members on the Subgroups
  - Health Economist to be included on Subgroup 1 – agreed to approach Professor Kirsten Howard, Chair of Economics Sub Committee (ESC)
  - Additional Jurisdictional Immunisation Co-ordinators (JIC) member to be included on Subgroup 2 – agreed to approach Scott Brown QLD JIC Representative
  - Paul Effler was recently appointed to Subgroup 3 and Katie Atwell has joined a smaller group of Subgroup 3
- NOTED that this will complete the membership of the Working Group

Action	Responsible officer/s	Progress
3.1 Invite the additional members to Subgroup 1 and Subgroup 2	Chris Blyth and ATAGI COVID-19 Working Group Secretariat	Completed

### 4. Implementation considerations for COVID-19 vaccine

Members:

- DISCUSSED the Commonwealth leading the initial delivery of the COVID-19 vaccine outside the National Immunisation Program, with involvement of JICS
- DISCUSSED the importance of modelling to inform the rollout of COVID-19 vaccine - to be led by the modelling team within the Health Economics Research Division
- DISCUSSED No fault compensation and providing indemnity to the manufacturer

Action	Responsible officer/s	Progress
4.1 Arrange meeting with Health Modelling Team s47F and s47F	COVID-19 Taskforce	Completed – Modelling team to present at Subgroup 1 meeting on 27 October
4.2 Develop a pathway to manage adverse events – link in with TGA pathways and pharmacovigilance plan	Sub-group 3	Will work through logistics and report back to Executive Group

**5. Meeting with AstraZeneca 20 October 2020**

Members:

- NOTED the meeting with AstraZeneca will be on 20 October 2020, 4-6pm AEDT

Action	Responsible officer/s	Progress
5.1 Respond to email sent by s47F on 15/10/2020 regarding probity arrangements	All AstraZeneca meeting attendees	Completed

**6. Meeting with Seqirus 22 October 2020**

Members:

- NOTED the meeting with Seqirus will be on 22 October 2020, 6-8pm AEDT

Action	Responsible officer/s	Progress
6.1 Provide members with a list of confirmed attendees	COVID-19 Taskforce/ Secretariat	Completed

**7. Consent-COVID19 Vaccination**

Members:

- NOTED a standardised consent form and framework will be required as well as an accompanying information sheet/statement about the vaccine

Action	Responsible officer/s	Progress
7.1 Develop standardised consent form/framework in line with normal practices	NCIRS and Sub-group 2	In progress
7.2 Create master list/straw man of the resources that will be required	NCIRS	Completed – on Exec agenda 23/10

**8. Australian Immunisation Register (AIR)**

- Nil Discussion

**9. Communications**

- See Other Business

**10. Other Business**

Members:

- NOTED the Collaboration on Social Science and Immunisation (COSSI) paper on COVID-19 Vaccination and agreed to integrate with the Commonwealth's COVID-19 Communication Strategy

**11. Meeting Closed: 1pm**

**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #7 by Videoconference  
23 October 2020, 12-1pm  
Outcomes**

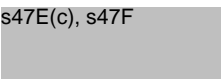
**In attendance:****Executive Members**

Chris Blyth (Co-Chair)  
 Allen Cheng (Co-Chair)  
 Lisa Schofield  
 Nick Henderson  
 s11C  
 Hope Peisley  
 Katie Flanagan  
 Robyn Gibbs

**NCIRS support staff**

s11C  


**Department of Health representatives**

Sarah Sinclair  
 s47E(c), s47F  


**Secretariat**

s22  


**1. Meeting Opened**

Members:

- NOTED Acknowledgement to Country
- NOTED attendees and apologies (Nigel Crawford, s11C )
- DECLARED no conflicts of interest

**2. Outcomes and Actions from previous meeting**

Members:

- ENDORSED outcomes from the previous meeting on 16 October 2020
- NOTED an update from the Taskforce including that Jurisdictional Immunisation Coordinators (JICs) were advised yesterday about the Department's current thinking in relation to the COVID-19 vaccine program
- NOTED upcoming discussions by Government which will inform next steps and that revised preliminary advice on priority populations developed by Subgroup 1 will be part of these considerations
- NOTED the Commonwealth will not embark on program implementation without discussions with jurisdictions and messaging will need to be explicit about partnership arrangements



### 3. Harmonisation of work with JICs

Members:

- NOTED sharing of key deliverables from the ATAGI subgroups will be considered following decisions by Government

Action	Responsible officer/s	Progress
Taskforce to consider ATAGI Working Group's list of documents/deliverables and liaise with [REDACTED]	Lisa Schofield	To progress

### 4. Subgroup updates

Members:

- NOTED updates from Subgroup leads
- NOTED Subgroup 1 will commence discussions on data modelling next week in consultation with the Department
- DISCUSSED whether a chapter would be required in The Australian Immunisation Handbook given its role as the clinical guideline for vaccine delivery in Australia, or an ATAGI Statement
- AGREED in principle that information would be required in the Handbook however this is likely to be an expedited process with iterative updates required

Action	Responsible officer/s	Progress
Clarify timing and clearance requirements for an expedited Handbook process	Hope Peisley	In progress
Add Handbook chapter to workplan	NCIRS	In progress
Prepare list of outward facing documents/advice required for consideration at next Exec meeting	NCIRS [REDACTED]	In progress

### 5. Subgroup 1 papers for endorsement

Members:

- ENDORSED two papers developed by Subgroup 1:
  - ATAGI-prelim-advice-COVID-vaccine-priority-grps\_Edition2\_v4a\_(21OCT2020) CHAIR ENDORSED
  - ATAGI-prelim-advice-AZD1222-possible-priority-pops\_v2.1a-21Oct2020

Action	Responsible officer/s	Progress
Forward both Subgroup 1 endorsed documents to Taskforce	Secretariat	Completed 26/10

### 6. Draft overview of program phases and communication resources

Members:

- DISCUSSED draft slides prepared by NCIRS including program phases and program communication resources required
- NOTED that decisions are yet to be made by Government in relation to dates and phases

Action	Responsible officer/s	Progress
Provide feedback to NCIRS on draft program phases and program communication resources	Exec Team members	In progress [REDACTED] has provided feedback)

**7. Meetings held with AstraZeneca and Seqirus**

Members:

- NOTED meetings held with AstraZeneca on 20 October and Seqirus on 22 October

**8. Other Business**

Members:

- AGREED to include a representative from TGA on Subgroup 2
- AGREED to invite a representative from TGA to update this Executive Team on a fortnightly basis

• Action	Responsible officer/s	Progress
Invite TGA rep to attend Subgroup 2 meetings	Secretariat	Completed
Invite TGA rep to update Exec Team fortnightly	Secretariat	Completed (first update provided by email 28/10)

**11. Meeting Closed:** approx. 1pm

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #8 by Videoconference  
30 October 2020, 11.30-12.30pm  
Outcomes**

**In attendance:****Executive Members**

Chris Blyth (Co-Chair)

s11C

Nigel Crawford

Hope Peisley

Katie Flanagan

Robyn Gibbs

Lisa Schofield

Nick Henderson

**NCIRS support staff**

s11C

**Department of Health representatives**

Sarah Tyquin

s47E(c), s47F

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED Acknowledgement to Country
- NOTED attendees and apologies (Allen Cheng)
- DECLARED no conflicts of interest

**2. Subgroup updates****2.1 Vaccine Utilisation and Prioritisation**

Members:

- NOTED Subgroup 1 received a presentation from the Department's data modelling branch covering two models (economic/workforce and distribution/rollout) and were concerned about the absence of health outcome data and lack of alignment with Subgroup 1 activities
- NOTED advice that the Department has flexibility and capacity to model health as well as economic outcomes and will resource this work
- AGREED data modelling is now the priority for Subgroup 1 and that early conversations between key members and the Department's data modellers are needed
- NOTED Subgroup 1 intends to scope the University of Queensland vaccine and requested second meetings with CSL and AstraZeneca be arranged for late 2020

Action	Responsible officer/s	Progress
2.1.1 Key members from Subgroup 1 and NCIRS to meet with data modellers	s47F	In progress
2.1.2 Arrange meetings with CSL and AstraZeneca in Nov/Dec 2020	Secretariat	To progress

## 2.2 Vaccine Distribution and Program Implementation

Members:

- AGREED to provide comments on two discussion papers to s47F by 2 November to allow endorsement by the Executive Team
  - Multidose vials ('Discussion\_paper\_MDV's\_draft\_2020.10.27-clean-for-exec')
  - AIR issues ('Discussion\_paper\_AIR-issues\_V4\_clean\_20201028')
- NOTED concerns raised by Jurisdictional Immunisation Coordinators (JICs) in relation to information sharing by the Commonwealth on the COVID-19 vaccination program and that the Department anticipates further information will be provided to JICs shortly

## 2.3 Vaccine Safety, Evaluation, Monitoring and Confidence

Members:

- NOTED the Director of Regulatory Education at TGA had attended a small meeting of Subgroup 3 to discuss communications from the regulator's perspective
- NOTED the US FDA met on 22 October and publicly disseminated information and data on COVID-19
- NOTED Subgroup 3 aims to prepare preliminary advice in relation to three areas – confidence/communications (paper currently being finalised), safety and evaluation

## 3. Half day information sharing session 10 November 2020

Members:

- DISCUSSED whether information considered at the half day session could be made public
- DISCUSSED content for the agenda which could include cross cutting issues (priority populations, data modelling, communications, stakeholders, multidose vials, Australian Immunisation Register), key recommendations and gaps to be resolved

Action	Responsible officer/s	Progress
3.1 Discuss with Health-Comms whether a forward facing statement, communique or annotated agenda can be released for the session	Hope Peisley/Secretariat	In progress
3.2 Discuss with Taskforce whether JICs can attend the session	Hope Peisley/Secretariat	Completed
3.3 Meet to develop agenda and content	s47F, NCIRS	In progress
3.4 Prepare a one page summary for consideration by Lisa Schofield to publish on ATAGI webpage	s47F/Lisa Schofield	In progress

#### 4. Taskforce update

- Lisa Schofield provided an update on recent discussions with Government around principals for program implementation and advised that
  - The Secretary is expected to write to stakeholders and Health CEOs again soon
  - While the Commonwealth is taking a lead role and a centralised implementation approach, the program will be designed and operationalised in partnership with jurisdictions and with strong engagement with peak organisations

Members:

- NOTED the Taskforce's update including advice relating to a centralised approach, stakeholder consultations and data modelling (item 2.1)

#### 5. Outcomes and Actions from previous meeting

Members:

- ENDORSED outcomes from the previous meeting on 23 October 2020
- NOTED an email was being drafted to NHMRC seeking advice about timing and clearance requirements for an expedited Handbook process
- NOTED the Taskforce was finalising a list of ATAGI deliverables that would be circulated following the meeting
- NOTED NCIRS had developed an updated list of outward facing advice/documents that would be circulated following the meeting

Action	Responsible officer/s	Progress
5.1 Circulate list of ATAGI deliverables	Taskforce	In progress
5.2 Circulate list of outward facing advice/documents developed by NCIRS	Secretariat	Completed
5.3 Obtain advice from NHMRC re an expedited Handbook process	Hope Peisley	In progress

#### 6. Australian Immunisation Register

Members:

- NOTED difficulties with some health care workers accessing PRODO, including hospital nursing staff, and that Services Australia will attend a Subgroup 2 meeting to discuss barriers and resolution.

#### 7. Meeting Closed: approx. 12.30pm

**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #9 by Videoconference  
6 November 2020, 12-1pm  
Outcomes**

**In attendance:****Executive Members**

Chris Blyth (Co-Chair)  
Allen Cheng (Co-Chair)  
s11C  
Nigel Crawford  
Robyn Gibbs

**NCIRS support staff**

s11C

**Department of Health representatives**

s47E(c), s47F

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED attendees and apologies (Katie Flanagan, Hope Peisley, Lisa Schofield, Nick Henderson)
- DECLARED no conflicts of interest

**2. Outcomes and Actions from previous meeting**

Members:

- ENDORSED outcomes from the previous meeting on 30 October 2020
- NOTED the Taskforce is considering Working Group deliverables and will provide further advice
- NOTED the Department has contacted NHMRC in relation to the process for a COVID-19 Handbook chapter and a meeting is being arranged

Action	Responsible officer/s	Progress
Provide advice to Working Group re priority issues to be addressed	Taskforce	In progress

**3. Taskforce update**

Members:

- NOTED the Taskforce had been called to another meeting and were not available to provide today's update

- NOTED advice from the Secretariat on the Government's announcement of 5 November 2020 about two new COVID-19 vaccine agreements (Novovax and Pfizer), including information about priority groups, consultations, key vaccination sites and limited tender process
- NOTED the Taskforce advised Jurisdictional Immunisation Coordinators (JICs) about these developments yesterday, participated in a question and answer session and undertook to provide JICs with further information including letter from the Secretary to peak bodies
- NOTED there were two limited tenders underway: one for logistics and another for a data system which will utilise existing systems
- DISCUSSED member concerns about a lack of clarity around Commonwealth, state and territory roles and responsibilities, for example workforce training
- DISCUSSED member concerns about information flow to the ATAGI Working Group and jurisdictions
- NOTED the Secretariat's advice that further communications were underway following the recent announcement, including a meeting with Health CEOs, and that jurisdictional implementation plans were being developed in consultation with each state and territory
- NOTED that the Secretariat would commence planning for an information session with jurisdictions (similar to the upcoming session with ATAGI subgroups) with a tentative date of 19 November

Action	Responsible officer/s	Progress
Raise member concerns with the Department's Executive	Co-chair	In progress
Provide copy of Secretary's letter to Working Group	Secretariat	Completed
Organise information session with JICs	Secretariat	In progress

#### 4. Half day information sharing Session 10 November 2020

Members:

- NOTED over 40 acceptances for this session, including around 25 members plus NCIRS and Departmental staff
- NOTED insufficient time to prepare forward facing communications and supported the publication of a communique following the event

Action	Responsible officer/s	Progress
Draft public communique following information session	Secretariat	To progress

#### 5. Subgroup updates

##### 5.1 Vaccine Utilisation and Prioritisation

Members:

- NOTED Subgroup 1 members had participated in a meeting with the Department's data modelling branch to discuss two models – logistics/distribution and economic
- NOTED a gap in the models including sequencing of priority populations which may be addressed by commissioning further data modelling work
- NOTED that NCIRS requires detailed technical data to undertake its work effectively
- DISCUSSED the need for the Working Group to have early access to vaccine data submitted to TGA and to receive advice from TGA about processes and timelines

- NOTED the next meeting of TGA's Advisory Committee on Vaccines is 2 December
- AGREED that meetings should be arranged with Pfizer and Novovax for vaccine presentations, similar to AstraZeneca and Seqirus

Action	Responsible officer/s	Progress
List questions that need to be answered through further data modelling work	Subgroup 1 representatives	In progress
Invite TGA rep to next meeting	Secretariat	In progress
Arrange meetings with Pfizer and Novovax	Secretariat	In progress

## 5.2 Vaccine Distribution and Program Implementation

Members:

- DISCUSSED consent issues and the need to better understand legal requirements
- AGREED a table would be developed by NCIRS scoping workplace settings and vaccination status including aged care, public and private sectors
- ENDORSED the Consent paper (Discussion\_paper\_informed-consent\_draft\_20201104-clean)
- ENDORSED two checklists subject to any further comments from members:
  - Site requirements (Checklist\_site\_draft\_20201104-clean)
  - Equipment (Checklist\_equipment\_draft\_20201104-clean)
- AGREED to the principal of information sharing and to provide documents to JICs, subject to endorsement by the Taskforce

Action	Responsible officer/s	Progress
Develop a table scoping consent issues in workplace settings	NCIRS	In progress
Provide endorsed Working Group documents to JIC	Taskforce/Secretariat	To progress

## 5.3 Vaccine Safety, Evaluation, Monitoring and Confidence

Members:

- NOTED the update from Subgroup 3, including preparation of advice on vaccine confidence and communications

## 6. Australian Immunisation Register

Members:

- NOTED public consultation on mandatory reporting to the AIR closes 15 November 2020

## 7. Meeting Closed: approx. 1pm



**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #10 by Videoconference  
13 November 2020, 12-1pm  
Outcomes**

**In attendance:****Executive Members**

Chris Blyth (Co-Chair)  
 Allen Cheng (Co-Chair)  
 s11C  
 Nigel Crawford  
 Robyn Gibbs  
 Katie Flanagan  
 Lisa Schofield  
 Nick Henderson  
 Hope Peisley

**NCIRS support staff**

s11C  
 [Redacted]

**Department of Health representatives**

s47E(c), s47F  
 [Redacted]

**Secretariat**

s22  
 [Redacted]

**1. Meeting Opened**

Members:

- NOTED attendees and apologies
- DECLARED no conflicts of interest

**2. Outcomes and Actions from previous meeting**

Members:

- ENDORSED outcomes from the previous meeting on 6 November 2020

**3. TGA update**

Members:

- NOTED an update from TGA including:
  - two provisional determinations (AstraZeneca and Pfizer) which do not pre-suppose an outcome
  - limited data available at this stage, with data to be accepted on a rolling basis
  - close contact with international regulators including the US FDA
  - provisional approval allows for lawful supply in Australia
- AGREED that TGA would provide fortnightly updates to the Executive Team if needed

**4. Taskforce update**

Members:

- NOTED an update from the Taskforce including:

- National Cabinet's consideration of a COVID-19 Vaccination Policy and the ATAGI advice on priority populations, both of which are expected to be published on the website and circulated to jurisdictions and other stakeholders
- Commencement of bilateral meetings with jurisdictions next week on implementation planning
- Establishment of a COVID-19 Vaccine Strategy Taskforce Division within the Department of Health from next week
- DISCUSSED the draft Roles, Responsibilities and Reporting document prepared by <sup>s47F</sup>

Action	Responsible officer/s	Progress
Circulate two documents (Vaccine Policy and ATAGI advice on priority populations) subject to Government approval	Taskforce/Secretariat	Completed 13/11
Comment on draft Roles, Responsibilities and Reporting lines	Taskforce	In progress

#### 4. Education and Training

Members:

- DISCUSSED workforce training and asked NCIRS to conduct a gap analysis of the existing training landscape for immunisation providers and specific requirements for COVID-19 vaccines

Action	Responsible officer/s	Progress
Map core training components required for COVID-19 vaccines, existing vaccine training programs and how they can be adapted to upskill providers, any gaps and consider international training programs	NCIRS ( <sup>s47F</sup> ) and Subgroup 2 with assistance from Subgroup 3 on international programs	In progress

#### 5. Subgroup updates

##### 5.1 Vaccine Utilisation and Prioritisation

Members:

- NOTED Subgroup 1 is preparing recommendations on data modelling requirements for consideration at the next Executive Team meeting

##### 5.2 Vaccine Distribution and Program Implementation

Members:

- NOTED differences between the consumables procurement list provided by the Taskforce and the Equipment Checklist developed by Subgroup 2
- AGREED to endorse the Equipment Checklist, subject to any further comments from members
- NOTED the issue of multi-dose vials was raised by the Co-chair at the recent Infection Control Expert Group (ICEG) meeting and approval was sought from the ICEG secretariat to bring the ATAGI documents on multi-dose vials to them for consideration
- AGREED Subgroup 2 would bring the Clinical guidance document on multi-dose vials to the next Executive Team meeting for consideration prior to further consultation with ICEG

Action	Responsible officer/s	Progress
Send endorsed Equipment Checklist to Taskforce, subject to any further comments	NCIRS/Secretariat	In progress

Bring ATAGI documents on multi-dose vials to ICEG for consideration when ready	s47F	To progress
Develop an appendix to the Clinical guidance document with preliminary information on vaccine candidates, and bring to next meeting	NCIRS (s47F Secretariat)	In progress

### 5.3 Vaccine Safety, Evaluation, Monitoring and Confidence

Members:

- NOTED NPS MedicineWise had attended a Subgroup 3 meeting to discuss communication strategies (specifically on Codeine up-scheduling)
- NOTED work underway on an evaluation framework and scenario planning

### 6. Half day information session 10 November – Key issues identified

Members:

- NOTED additional issues identified at the information session:
  - Workforce training – to be addressed as part of planning processes with states and territories and under consideration by Subgroup 2 (see item 4)
  - Indemnity – members noted the Government has provided indemnity to COVID-19 vaccine manufacturers and this needs to be addressed in the communications strategy as part of vaccine confidence. Members raised the possibility of the COVID-19 vaccination program identifying gaps in the system which may need to be addressed by Government
  - Meetings with vaccine sponsors – preparations underway
  - Incident management strategy – to be discussed at next Executive Team meeting

**7. Meeting Closed:** approx. 1.10pm

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by the Department of Health and Aged Care

**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #11 by Videoconference  
12 November 2020, 12-1pm  
Outcomes**

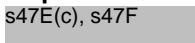
**In attendance:****Executive Members**

Chris Blyth (Co-Chair)  
 Allen Cheng (Co-Chair)  
 s11C  
 Nigel Crawford  
 Robyn Gibbs  
 Katie Flanagan  
 Lisa Schofield  
 Nick Henderson  
 Hope Peisley

**NCIRS support staff**

s11C  


**Department of Health representatives**

s47E(c), s47F  


**Secretariat**

s22  


**1. Meeting Opened**

Members:

- NOTED attendees and apologies (nil)
- DECLARED no conflicts of interest

**2. Outcomes and Actions from previous meeting**

Members:

- ENDORSED outcomes from the previous meeting on 13 November 2020
- NOTED discussions with NHMRC regarding the Handbook chapter for COVID-19 and that NHMRC will work with the Department to expedite this process
- DISCUSSED the revised Roles, Responsibilities and Reporting lines document developed for internal purposes, noting that additions/changes are likely to be made following bilateral meetings with jurisdictions
- NOTED the Taskforce is currently engaging directly with jurisdictions and will consider the ATAGI documents on a case by case basis following these meetings

Action	Responsible officer/s	Progress
Confirm legislative requirements around consultation timeframes with NHMRC	Hope Peisley	Completed (legislated 30 days)
Revise Roles, Responsibilities and Reporting lines document as information becomes available	Taskforce	In progress

Consider next steps for documents endorsed by Working Group	Taskforce	In progress
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### 3. Taskforce update

Members:

- NOTED an update from the Taskforce on bilateral discussions with jurisdictions including:
  - Meetings already held with NSW, Tas and Vic and meeting today with NT
  - Meetings scheduled for remaining jurisdictions early next week
  - Format of meetings covering discussions on program documents (vaccination policy) and questions on systems in place within each jurisdiction
  - Strong interest from jurisdictions in the Site Checklist developed by ATAGI
  - Next steps involving the Taskforce drafting state/territory implementation plans for comment and consideration by Government
  - The possibility for different types of jurisdictional models, with the Commonwealth role remaining consistent
- DISCUSSED approaches to vaccination in Indigenous communities including states/territories having responsibility and the need to be pragmatic eg by vaccinating all Indigenous adults in a community rather than specific risk groups
- NOTED the Taskforce will become a Division in its own right with three branches and additional staff to manage the vaccine rollout

### 4. Incident Management Strategy

Members:

- NOTED an update from s47F including discussions with Corona Comms about a list of potential incidents to be fleshed out with mock scenarios as part of an incident management strategy, including clinical interplay and communications
- NOTED advice from the Department that TGA is undertaking incident scenario work
- DISCUSSED the possibility of establishing a small and/or independent group to consider an incident management strategy
- AGREED to invite TGA to the next meeting to discuss this item

Action	Responsible officer/s	Progress
Bring incident list to next meeting for discussion	s47F / Secretariat	Circulated by s47F 23/11
Invite TGA to next meeting to discuss incident management	Secretariat	Completed

### 5. Education and Training

Members:

- NOTED preliminary work done by Subgroup 2 to analyse gaps in workforce training
- DISCUSSED workforce training including:
  - Advantages of modular training that allows one or more person to be involved in the administration of a vaccine and can be built upon as a program evolves
  - Numerous existing training pieces, resulting in the need to focus on designing new training in two areas – using multi-dose vials and specific vaccines
  - Focus on GPs, nurse immunisers, Aboriginal Medical Services and Aboriginal Community Controlled Health Organisations
- NOTED the National Immunisation Education Framework outlines training requirements

- AGREED to consider next steps in relation to education and training once the gap analysis has been finalised by Subgroup 2

## 6. Subgroup updates

### 6.1 Vaccine Utilisation and Prioritisation

Members:

- DISCUSSED Subgroup 1 advice to the Department recommending additional work be undertaken including epidemic dynamic models and health utility models
- NOTED resources may be available in the Department to assist and that Lisa Schofield will circulate the advice to relevant area/s for further consideration
- ENDORSED Subgroup 1 recommendations subject to any further comments from members
- NOTED NCIRS documents comparing key vaccines on immunogenicity and clinical trials will be provided to members when ready, to assist with understanding vaccine characteristics

Action	Responsible officer/s	Progress
Provide data modelling advice to Lisa Schofield for further discussions and consideration within Dept	Secretariat	Completed
Provide comments on data modelling paper	Members	Completed

### 5.2 Vaccine Distribution and Program Implementation

Members:

- NOTED two documents developed by Subgroup 2:
  - Review of lessons learned from the experience implementing the 2009 H1N1 pandemic influenza vaccine program
  - Guideline for the administration of SARS-CoV-2 vaccine from multi-dose vials
- AGREED a process needs to be developed for approval of key ATAGI Working Group documents, including outward facing documents such as the MDV Guideline
- AGREED to submit the MDV Guideline paper, subject to any further comments, for discussion at ICEG

Action	Responsible officer/s	Progress
Provide comments on H1N1 paper	Members	Completed
Provide comments on MDV Guideline	Members	Completed
Provide H1N1 Lessons Learned document to Subgroups 1 and 3	Secretariat	In progress
Prepare summary of ATAGI endorsed papers and next steps to assist in tracking documents and share with the Executive Group	Secretariat	In progress
Develop process for approval of key ATAGI WG documents, including outward facing	Taskforce	To progress
Send MDV Guideline paper to ICEG Secretariat for comment	Secretariat/s47F	In progress

### 5.3 Vaccine Safety, Evaluation, Monitoring and Confidence

Members:

- NOTED that Subgroup 3 is finalising advice on confidence/communications and safety for consideration by the Executive

- AGREED that work by Subgroup 3 to develop an evaluation framework covering real time monitoring, medium term and longer term transition to the National Immunisation Program is important work that needs to be undertaken

## 6. Other business

Members:

- NOTED Chris Blyth is preparing public information pieces on COVID-19 vaccine
- NOTED upcoming events including:
  - JIC information sharing session on 26 November
  - Second subgroup information sharing session on 15 December
  - Meetings with vaccine sponsors – dates to be confirmed

**7. Meeting Closed:** approx. 1.10pm

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #12 by Videoconference  
27 November 2020, 12-1pm  
Outcomes**

**In attendance:****Executive Members**

Allen Cheng (Co-Chair)  
Chris Blyth (Co-Chair) – part meeting  
s11C  
Nigel Crawford  
Robyn Gibbs  
Katie Flanagan  
Hope Peisley

**NCIRS support staff**

s11C

**Department of Health representatives**

s47E(c), s47F

Elspeth Kay – part meeting  
s47E(c), s47F – part meeting

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED attendees and apologies (Chris Blyth, Lisa Schofield, Nick Henderson, s11C )
- DECLARED no conflicts of interest

**2. TGA update**

Elspeth Kay and s47E(c), s47F provided an update on TGA pharmacovigilance planning including development of scenarios, linkages across the department and coordination with clinical, technical and government areas across Australia

Members:

- DISCUSSED
  - establishing an incident management team with representation from TGA, jurisdictions, Taskforce and ATAGI to coordinate responses to incidents
  - a safety response/communication plan previously developed/published
- AGREED to provide TGA with the following Subgroup 3 documents for circulation internally, noting they are draft and have not yet been endorsed by the Working Group
  - Adverse Events of Special Interest
  - Vaccine Enhanced Disease

Action	Responsible officer/s	Progress
Identify safety response/communication plan and circulate to Subgroup 3	Secretariat	To progress
Map out proposed incident management team and key participants	Subgroup 3	To progress



Provide draft Subgroup 3 documents to TGA for internal use	Secretariat/s47F	Complete
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### 3. Outcomes and Actions from previous meeting

Members:

- ENDORSED outcomes from the previous meeting on 20 November 2020
- NOTED actions including:
  - NHMRC legislative requirement for minimum 30 days public consultation (and likelihood of need for outward facing ATAGI statement/s to support the rollout)
  - Need for a clear process for reviewing and endorsing ATAGI statements with the Taskforce to meet shortly to consider:
    - Approval processes
    - Additional advice needed from ATAGI
    - Roles, responsibilities and reporting lines

Action	Responsible officer/s	Progress
Meet to consider approvals, additional advice and roles/responsibilities and advise ATAGI re next steps	Taskforce	In progress

### 3. Taskforce update

The Taskforce provided an update including:

- Completion of bilateral meetings as outlined at the shared information session with Jurisdictional Immunisation Coordinators on 26 November
- Commonwealth implementation plan to follow the structure of the Australian COVID-19 Vaccination Policy with headings such as workforce, surveillance etc
- Consideration of Subgroup 1 data modelling advice within the department, including meetings with key areas and stakeholders
- Consideration of workforce training on multi-dose vials within the department, including meetings with key stakeholders
- Two new ATAGI Working Group members with general practice expertise: Dr Richard Kidd (Subgroup 1) and Dr Chris Moy (Subgroup 2)
- Vaccine journey (one page PDF) available on SharePoint

### 4. Subgroup updates

#### 4.1 Vaccine Utilisation and Prioritisation

Members:

- NOTED that Subgroup 1 is scoping each vaccine in detail and will do a deep dive on the AstraZeneca vaccine at the next meeting
- DISCUSSED prioritisation of certain groups, with Subgroup 1 to consider:
  - how critical workers are classified, noting that jurisdictions are seeking national consistency
  - gathering more information on critical groups including size, risk factors and level of complexity in reaching them
  - ring fencing
  - requests from special risk groups for prioritisation (eg laboratory staff working with COVID-19), noting ATAGI's prioritisation matrix

Action	Responsible officer/s	Progress
Further consider prioritisation of critical worker and other special risk groups, along with ring fencing	Subgroup 1	In progress

## 6.2 Vaccine Distribution and Program Implementation

Members:

- ENDORSED two documents developed by Subgroup 2:
  - Overview of mandatory vaccination policies
  - Gap analysis workforce training
- NOTED
  - these documents were prepared as advice to the Taskforce
  - the Taskforce has been given a package of documents endorsed by the Working Group, some of which may be provided to jurisdictions to support their implementation planning

Action	Responsible officer/s	Progress
Provide two documents to Taskforce – mandatory vaccination policies and workforce training gap analysis	Secretariat	In progress

## 6.3 Vaccine Safety, Evaluation, Monitoring and Confidence

Members:

- ENDORSED the following communications advice prepared by Subgroup 3:
  - ATAGI COVID19 WG3 Comms strategy Preliminary advice
  - COSSI Working Paper COVID19 vaccination
  - Australian Immunisation stakeholder list (living document)
- AGREED that future Working Group agendas will include documents for endorsement up front (after outcomes from previous meeting) to allow more time for discussion, with Subgroup updates to be shown as a separate item
- NOTED Subgroup 3 is undertaking preliminary work on a program evaluation framework

## 7. Other business

Members:

- AGREED to refer correspondence from the Transplantation Society of Australia and New Zealand to Subgroup 1

Action	Responsible officer/s	Progress
Add TSANZ letter to Subgroup 1 agenda	Secretariat	In progress

8. Meeting Closed: approx. 1.10pm

**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #13 by Videoconference  
4 December 2020, 12-1pm  
Outcomes**

**In attendance:****Executive Members**

Allen Cheng (Co-Chair)

Chris Blyth (Co-Chair)

s11C

Nigel Crawford

Robyn Gibbs

Katie Flanagan

Lisa Schofield

Hope Peisley

**NCIRS support staff**

s11C

**Department of Health representatives**

s47E(c), s47F

– part meeting

s47E(c), s47F

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED attendees and apologies (nil)
- DECLARED no conflicts of interest

**2. Outcomes and Actions from previous meeting**

Members:

- ENDORSED outcomes from the previous meeting on 27 November 2020
- NOTED actions to be discussed under Item 5 (Taskforce: Next steps)

**3. TGA update**

s47E(c), s47F

provided an update from TGA including:

- three provisional determinations granted and three applications
- close work with sponsors and international regulators/organisations
- challenges including internationally harmonised label, communications, training for immunisers and multiple manufacturing sites

Members DISCUSSED

- the importance of ATAGI and NCIRS obtaining access to vaccine data to inform prioritisation and program roll out
- work underway within the Department to facilitate access to vaccine data via agreement from sponsors

Action	Responsible officer/s	Progress
Draft letters to vaccine sponsors requesting access to vaccine data	Secretariat and TGA	In progress

#### 4. Documents for endorsement

Members:

- NOTED the Vaccine Safety Preliminary Advice prepared by Subgroup 3 and that its audience is the Taskforce followed by TGA
- AGREED to provide any further feedback by Monday 7 December, then provide this advice to the Taskforce

Action	Responsible officer/s	Progress
Incorporate further feedback from members and forward safety advice to Taskforce	NCIRS and Secretariat	In progress

#### 5. Taskforce update

The Taskforce provided updates and facilitated discussions on:

##### *Commonwealth, state and territory planning*

- Collaboration with states and territories regarding implementation plans, with draft plans to be circulated to jurisdictions shortly and finalised by January 2021 for a March rollout
- Development of stand-alone implementation plans for aged care and disability groups and Aboriginal and Torres Strait Islander peoples
- Use of ATAGI documents
  - as attachments to implementation plans (eg checklists of minimum requirements to administer COVID-19 vaccine and for immunisation service provider sites)
  - as input to implementation plans (eg advice on workforce competencies & training)
- Commonwealth support in relation to workforce; understanding existing workforces in jurisdictions and addressing gaps to ensure the right people in the right places
- Procurement underway for logistics and data, noting that processes have not been finalised and further advice will be provided shortly

##### *Flu*

- Intersection with the annual flu program including staggering the dosing schedule for flu and COVID-19, noting priority populations are the same for both
- Development of principles on how to manage COVID-19 and Fluvax rollout concurrently, including theoretical and scientific rationale for co-administration (safety and feasibility)
- ATAGI full meeting on 11 December to include an item on the flu statement and handbook

##### *ATAGI outputs*

- Taskforce meeting to discuss next steps for ATAGI advice, that will be categorised as either
  - Documents for publishing (for providers and others), or
  - Advice to Government
- Summary of documents and categories to be provided to members for discussion next week
- Data modelling advice from Subgroup 1 under consideration within relevant areas of the Department with a further update to be provided

##### *Next steps – advice required from Working Group*

##### *Subgroup 1*

- Revisit prioritisation advice to provide greater level of granularity including
  - priority population groups eg high transmission v critical industry, and underlying medical conditions

- levels of priority within the priority population groups, noting limited supply of vaccine (eg which health care workers, what comorbidities and what age ranges)
- consider strategies in different epidemiological scenarios (eg no disease and community transmission) and supply/demand challenges

#### *Subgroup 2*

- No further advice required at this stage, noting work now underway within jurisdictions regarding implementation planning
- Taskforce meeting with Health Education Services Australia next week with further consideration of how to roll out nationally consistent training

#### *Subgroup 3*

- No further action required until discussion takes place in relation to evaluation planning to clarify responsibilities

#### *ATAGI Working Group Information Session 15 December*

- Agenda to focus on the workplan and the milestones for delivery – what needs to be done, when and by whom to meet deadlines
- Consider evaluation at the session along with other items where there may be duplication or lack of clarity (eg training and safety)

#### *Summary of priorities*

- Priority populations and flu principles (Subgroup 1)
- No new work for Subgroup 2 at this stage
- Consider and endorse safety advice from Subgroup 3

Action	Responsible officer/s	Progress
Revisit priority populations advice	Subgroup 1	In progress
Develop principles by January on managing COVID-19 and Fluvax rollout	Subgroup 1	In progress
Provide members with summary of ATAGI documents and categories for next steps (internal/external)	Secretariat	In progress
Provide members with update on Departmental meeting 4/12 re data modelling	Lisa Schofield	Completed – email 4/12
Discuss evaluation planning to clarify responsibilities	Taskforce	In progress
Add agenda item to information session on 15/12 to discuss evaluation and other areas of possible duplication (training, safety)	Secretariat	In progress

## **6. Other business – meeting schedule**

Members AGREED:

- the information session on 15 December will be the last meeting of the Working Group and Subgroups for 2020 and the Executive Group will reconvene on 8 January 2020
- to cancel the Executive meeting on 11 December due to a clash with the full ATAGI meeting – feedback on ATAGI deliverables will be provided at that meeting
- Future meetings will be scheduled around deliverables in the workplan

Action	Responsible officer/s	Progress
Cancel remaining Exec meetings for 2020	Secretariat	Completed
Advise Secretariat of leave arrangements over Christmas/New Year	All	In progress

## **7. Meeting Closed:** approx. 1.10pm

**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #14 by Videoconference  
18 December 2020, 10-11am  
Outcomes**

**In attendance:****Executive Members**

Allen Cheng (Co-Chair)

Chris Blyth (Co-Chair)

s11C

Robyn Gibbs

Katie Flanagan

Lisa Schofield

Hope Peisley

**NCIRS support staff**

s11C

**Department of Health representatives**

s47E(c), s47F

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED attendees and apologies (Nigel Crawford, Nick Henderson)
- DECLARED no conflicts of interest

**2. Outcomes and Actions from previous meeting**

Members:

- ENDORSED outcomes from the previous meeting on 4 December 2020
- NOTED actions arising:
  - Following permission from AstraZeneca, TGA has arranged for specified ATAGI members and NCIRS staff to access data through GovTEAMS
  - Pfizer has not provided permission to access data

**3. Feedback from Information Sharing Session on 15 December**

Members DISCUSSED feedback including:

- Challenges of managing a large number of members, meetings and issues
- More detail needed on pharmacovigilance roles and responsibilities
- Length of session (3 hours) requires a break

Members AGREED to hold another information sharing session in the week of 1 February 2021

Action	Responsible officer/s	Progress
Circulate latest information from TGA on its pharmacovigilance plan for COVID-19 vaccines	Lisa Schofield	Completed
Send invitations for next session (2 February)	Secretariat	To progress

#### 4. Key deliverables December / early 2021

Members DISCUSSED priorities for Subgroup 1:

- More granular prioritisation advice (top priority and due by Christmas)
  - Two scenarios needed to cover current epidemiology (low transmission) and any changes/outbreaks
  - Challenging given lack of data modelling
  - Numbers need refining for front line health care workers
  - Taskforce has requested quarantine worker numbers from jurisdictions
  - Prioritisation of groups is sufficient if numbers aren't precise
- Managing COVID-19 and flu rollout (second priority and due in January)
- Clinical guidance for health care providers (third priority and due in January)

Members DISCUSSED a Handbook chapter or equivalent:

- NCIRS is drafting a suite of documents for providers including training materials for each vaccine (more specific than the information produced by companies) and communication materials
- The Government has not made a decision in relation to consent (written or verbal) and further information will be provided by the Taskforce when available

Members NOTED the list of key deliverables and timeframes circulated by NCIRS prior to the meeting (annotated version at **Attachment A**)

Members AGREED:

- Advice on key components of an evaluation plan is due by mid-January
- The role of Subgroup 3 is to develop advice to Government, rather than undertake the evaluation itself
- Given competing priorities across the entire workplan, establishment of any additional groups should first be considered by the Executive Group in terms of purpose, outputs and resourcing

Action	Responsible officer/s	Progress
Prepare the first tranche of provider materials for Pfizer and AZ vaccines	NCIRS	In progress
Advise re any Government decision about consent	Taskforce	In progress

#### 5. Taskforce update

The Taskforce provided an update on:

- commencement of the second round of bilateral discussions with jurisdictions with the next draft implementation plans to be circulated in early January
- logistics partner expected to be announced shortly

**Meeting Closed:** approx. 11am

Attachment A - Advice/documents for COVID-19 program rollout

## Attachment A

## Advice/documents for COVID-19 program rollout

Document	Scope/ Content in brief	Person responsible	SG responsible	Timeline for completion of preliminary draft ready for WG/Exec Team consideration
Priority populations for initial stages of vaccination	Granular priority groups – break down groups by number of available vaccines	s47F	SG1	Preliminary draft before Xmas (Agreed)
Co-administration with flu vaccines	Clinical advice on administration of COVID and flu vaccines (does not address implementation issues)	s47F	SG1	Preliminary draft before Xmas (Now January)
Clinical statement on COVID-19 vaccines	Clinical guidance for providers on use of Pfizer and AZ vaccines	s47F	SG1	Preliminary draft before Xmas (Now January)
Consent form	1 page brief consent document (content based on consent advice developed by SG2)	s47F	SG2	Preliminary draft in early Jan (Subject to Govt decision on consent)
Discussion points for consent for providers	Brief 1-2 page max with points for discussion for providers, referencing other providers FAQs	s47F	SG2	Preliminary draft in early Jan (Subject to Govt decision on consent)
Provider information sheet	Scope not entirely clear yet – provider FAQs that may come up during consent but also other aspects of vaccination program?	s47F	SG1/2? (if part of consent package, then SG2)	Preliminary draft in mid Jan
Consumer info sheet	Points for inclusion in a consumer info sheet (vaccine specific info is separate from vaccine program info e.g. f/u on AEs)	We will list points for inclusion, but this is likely to be developed by DoH/someone else	SG2	Preliminary draft in early Jan



**Australian Technical Advisory Group on Immunisation (ATAGI) COVID Working Group  
Executive Team Meeting #15 by Videoconference  
8 January 2021, 12-1pm  
Outcomes**

**In attendance:****Executive Members**

Chris Blyth (Co-Chair)

s11C

Robyn Gibbs

Katie Flanagan

Nigel Crawford

Lisa Schofield

Hope Peisley

**NCIRS support staff**

s11C

**Department of Health representatives**

s47E(c), s47F

**Secretariat**

s22

**1. Meeting Opened**

Members:

- NOTED attendees and apologies (Allen Cheng)
- DECLARED no conflicts of interest

**2. Outcomes from previous meeting**

Members:

- ENDORSED outcomes from the previous meeting on 18 December 2020

**3. Taskforce Update**

Members:

- NOTED the Government announcement on 7 January 2021 including:
  - COVID-19 Vaccination Program to commence earlier (February 2021)
  - Different locations for Pfizer and AstraZeneca vaccinations across Australia
  - Further information at <https://www.health.gov.au/resources/publications/australias-epidemiology-and-covid-19-vaccine-roadmap>
- NOTED other developments including:
  - Draft implementation plans for aged and disability sectors, culturally and linguistically diverse groups, Aboriginal and Torres Strait Islander and vulnerable populations
  - Two tenders closing shortly with providers to be engaged for:

- Workforce surge capacity
- Vaccine training packages for Pfizer and AstraZeneca vaccines
- Weekly engagement through jurisdictions

Members DISCUSSED:

- Communications along with logistical issues, training and site setup
- Efficacy considerations – two concepts: product registration and programmatic discussion (benefit to the population)
- Importance of vaccine clinical details as well as data modelling to inform decision making, including spacing of vaccine doses

#### 4. TGA Update

Members NOTED:

- Pre market activities underway at TGA from both clinical and quality perspectives
- Advisory Committee on Vaccines meeting to be held next week and expected to provide advice in relation to any licensing restrictions
- Post market activities including Pharmacovigilance Plan and data sharing with international regulators regarding safety signals

#### 5. Key Deliverables in January 2021

Members NOTED deliverables required by the Taskforce:

- **Training materials** – training packages to be developed by the Department's provider incorporating comments from Subgroup 2 during the development phase (full accreditation unlikely due to timeframes)
- **Prioritisation** (more granular advice to be considered by Government in January)
  - Communications to occur later in January around prioritising front line workers to protect others
  - General agreement that aged care staff and residents are priorities
- **COVID-19 and flu** – advice to be provided to Executive for endorsement at next meeting for messaging to the public in February
- **Consent** – ATAGI advice required (what does obtaining consent mean and how will it work - what are the implications for different population groups?)
  - Principles-based advice to allow Government to make a decision on next steps (ie. Do existing Handbook requirements apply to COVID-19?)
  - Focus on the how (leave written/verbal consent discussion for later)
- **Evaluation framework** – tracking business improvement and longer term issues
  - Two levels of advice proposed by Subgroup 3 – high level advice to be provided next week with more detailed advice to follow subject to direction from ATAGI Working Group Executive

Members NOTED an update from Subgroup 3 on the proposal for an incident management team, which has partly been addressed by scenario planning, along with work around Adverse Events of Special Interest and communications from a social science perspective

Action	Responsible officer/s	Progress
Provide draft consent documents (currently on Sharepoint) to SG2 and Executive for discussion at next meetings	Secretariat	In progress
Provide further advice to ATAGI Exec on consent issue and deliverables required, including whether standard/consistent information should be provided across Australia	Lisa Schofield	In progress

## 5. Other Business

Members NOTED:

- Provider materials are being developed by the Department's Communications team
- Subgroup 1 is finalising a clinical advice statement (for Exec endorsement next week) that forms a framework for the Handbook

Action	Responsible officer/s	Progress
Review public facing documents being prepared by Comms and provide advice to ATAGI Exec re any gaps	Hope Peisley	In progress

**Meeting Closed:** approx. 1pm

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID-19 Working Group  
Information Sharing Session  
15 December 2020, 1-4pm  
Outcomes**

**In attendance:**

<b>Executive members</b>	<b>Subgroup 3 members</b>	<b>Department of Health</b>
Chris Blyth (Co-Chair)	Nigel Crawford (Lead)	s47E(c), s47F
Allen Cheng (Co-Chair)	Tony Korman	
Robyn Gibbs	Margie Danchin	
Nigel Crawford	Deb Petrys	
s11C	Diane Walsh	
Lisa Schofield	Alan Leeb	
Hope Peisley	s47E(c), s47F	
<b>Subgroup 1 members</b>	John Kaldor	
Bette Liu	Paul Effler	
Tom Snelling	Cheryl Jones	
Jodie McVernon	Katie Attwell	
Penny Burns	<b>NCIRS technical support</b>	
Angus Dawson	s11C	
Kanta Subbarao		
James Wood (A/g Lead)		
Kirsten Howard		
James Ward		
Richard Kidd		
s11C		
David Durrheim		<b>Secretariat</b>
Christopher Etherton-Beer		s22
<b>Subgroup 2 members</b>		
Robyn Gibbs (Lead)		
Annaliese van Diemen		
Madeline Hall		<b>TGA</b>
Karen Bellamy		s47E(c), s47F
Katherine Gibney		
Nick Silberstein		
Lena Sanci		<b>Apologies</b>
Scott Brown		Katie Flanagan (SG1 Lead)
Michelle Giles		

## 1. Meeting Opened

Members:

- NOTED attendees and apologies (Katie Flanagan)
- New members (s11C), Richard Kidd, Chris Moy and Katie Attwell)
- DECLARED no conflicts of interest

## 2. Probity briefing

s47F provided a probity briefing.

Members NOTED:

- Member and observer probity obligations and requirements in relation to the ATAGI COVID-19 Working Group responsibilities

- Probity principles including integrity, confidentiality and management of conflict of interest
- Roles of probity advisers and their contact details as provided on SharePoint for any questions

### 3. COVID-19 Vaccine Strategy Taskforce update

Ms Lisa Schofield provided an update on Taskforce activities, provided sincere thanks to all members in recognition of the volume and quality of work already completed, and discussed future priorities.

Members NOTED:

- Commonwealth continues to monitor vaccine candidates globally, has deals with AstraZeneca, Novavax and Pfizer and the TGA has provided provisional registration for Janssen/Johnson & Johnson
- Change to the Commonwealth's vaccine portfolio, noting decision to cease development of the CSL/ University of Queensland vaccine, to ensure vaccine confidence, and subsequent procurement of additional AstraZeneca and Pfizer doses. ATAGI Working Group will be advised if/when any deals are made with additional vaccine sponsors
- Rollout planning ongoing, aim to commence in early March 2021, based on regulatory approvals and availability of vaccines in Australia
- Commonwealth will continue to engage:
  - with States and Territories to discuss key issues, e.g. vaccination sites, workforce training and priority populations
  - fortnightly Health CEOs and Chief Health Officers (CHOs) to enable national discussion on program rollout and national approach to addressing any issues that may arise
  - with peak bodies and a number of advisory groups across a range of sectors: Aboriginal and Torres Strait Islander groups, aged care, disability, culturally and linguistically diverse (CALD), rural and regional, Public Health Networks(PHNs), General Practitioners (GPs), and nurses
- Commonwealth is aiming to finalise the overall implementation strategy plan and individual jurisdictional implementation plans by late January
  - First drafts of the jurisdictional plans were sent out last week (wk beg 07/12) and feedback has been received from nearly all states, second round of bilateral discussions commencing this week (wk beg 14/12);
  - Some elements of the jurisdiction plans will remain the same (e.g. site and training requirements) and some will be iterative to allow for flexibility in responding to the program rollout (e.g. scaling up sites)
- There are several key pieces of ATAGI work required quickly to support the Commonwealth (to be discussed in Item 6)

### 4. Commonwealth Communications Activities

s47E(c), s47F

provided an update on communications activities.

Members NOTED:

- The overview of the communications approach and the focus on building confidence in safety, efficacy and success of the vaccine
- Continuous research tracking is ongoing, identifying potential concerns from the public and there is potential for the survey results to be shared with the Working Group to identify gaps
- Commonwealth has fortnightly engagement with GPs, regular discussions with various peak bodies such as AMA and RACGP, and has established networks with peak bodies and stakeholders with

Aboriginal and Torres Strait Islander communities to seek input and review of communications plan specific to these communities

- Commonwealth is planning to go out to various entities to discuss vaccine communications adaptations
- The strategies being used to ensure accurate information on key social media platforms and using spokespeople to be “trusted advisers”
- Explainer videos will be provided through the Department’s channels/social media channels
- Department’s vaccine hub allows public to subscribe for updates
- The current focus is on building confidence, however Commonwealth will explore the issue of protection from infection versus risk of transmission in the research

## 5. Therapeutic Goods Administration

s47E(c), s47F

provided an update and re-cap on pre-market activities.

Members NOTED:

- TGA update on the provisional registration approval pathway, including provisional approvals to Janssen/ Johnson and Johnson, AstraZeneca and Pfizer
- The significant challenges outlined by the TGA in managing the receipt and assessment of rolling data provided by the sponsors, requires tight communications with the sponsors to understand estimated timelines for submission of data tranches
- Pfizer is considered the most advanced in terms of quality of information and data and the TGA is expecting additional data tranches in the lead up to Christmas
- The difficulties described by the TGA in predicting decision dates for granting provisional registration approval until last data roll is seen and gaps have been identified
- TGA needs time to consider and develop consistent, appropriate validation methodologies for the assessment of batches before they are released
- TGA advice regarding the changes to labels, for example: labels will not include an AusPAR number, some labels may refer to “emergency use” if manufactured overseas, batch expiry will be limited, and TGA is working with other regulators about using an internationally harmonised label
- There is limited safety data so far (two months), noting that the benefit of the emergency use approvals overseas will be the real world data
- TGA continues to maintain close liaison with international regulatory authorities such as Access Consortium
- TGA is expecting rolling data from Pfizer through to the end of the year/early new year and AstraZeneca in March 2021
- The clinical data will articulate if there is an efficacy data gap for specific subpopulations
- The unique logistics requirements for Australia and New Zealand are in the forefront of consideration by the TGA evaluators
- TGA vaccine hub is available now at <https://www.tga.gov.au/covid-19-vaccines>

s47E(c), s47F

provided an update on post-market activities.

Members NOTED:

- TGA and AIR are now linked, so there is a dominator for adverse event following immunisation (AEFI) data, but in absence of a comparator will rely on disproportionate analysis
- TGA will establish a team of forensic doctors to gather information in the event of any fatal AEFI
- TGA is hosting two groups of medical regulators, one on safety signals and another on vaccine confidence, who are meeting fortnightly
- There is a need to accurately communicate the robustness of TGA regulatory processes

- Other than two reported anaphylactic cases in the United Kingdom, there are no safety signals at this stage
- There are challenges with sharing data beyond the seven usual regulators, with Periodic Safety Updates to be discussed at the next meeting (tonight).

## 6. Workplan

Ms Schofield revisited and acknowledged some of the key pieces of work that the Working Group have done and how these have been used, including:

### Subgroup 1

- Preliminary advice on prioritisation has been a key piece in informing Government, very useful in public messaging and has been published by Government;
- Modelling advice to Government has been helpful in raising issues for consideration

### Subgroup 2

- Advice on workforce competencies, checklists for equipment and site requirements was very useful and has been shared with jurisdictions during the bilateral meetings as part of the jurisdictional implementation plans, to assist with national consistency
- MDV and AIR advice to Government discussion papers have helped inform Commonwealth conversations regarding implementation

### Subgroup 3

- Useful feedback on key stakeholders to engage with and issues to address

Ms Schofield again thanked the Working Group for their work and contributions to date

Members NOTED next key deliverables and timeframes for ATAGI (refer **Table 1**).

**Table 1: Key deliverables and timeframes for ATAGI: December 2020 – Early 2021**

Item	Description	WG Responsible	Delivery Date/ Status
1	Granular view of prioritisation: <ul style="list-style-type: none"> <li>• a few different views of prioritisation are required to allow Taskforce to consider various options/implementation issues and allow for flexibility as needs may change:</li> <li>• month by month by categories (number of people and how to split that down month by month)</li> <li>• who would get first 1 million Pfizer doses?</li> <li>• who would get first 3.5 million AstraZeneca doses?</li> </ul>	SG#1	As soon as possible, prior to Christmas  Complete (subject to further revisions if/when required)
2	Evaluation: two key components <ul style="list-style-type: none"> <li>• a process / administration / lessons learned, to occur as rollout happens (Commonwealth lead); and</li> <li>• the bigger picture evaluation, as would occur for a routine vaccination program, e.g. impacts of vaccination program on disease burden</li> </ul>	Commonwealth  SG#3	Mid- January  In progress
3	What does COVID-19 vaccine rollout alongside flu vaccine mean?	SG#1	End January 2021  In progress

	<ul style="list-style-type: none"> <li>Review of documentation from the UK and US programs has very limited detail, e.g. in the UK documents Pfizer has noted a 14 day interval</li> <li>Any thinking and advice to Government would be useful</li> </ul>	Input from other groups as required	
4	<p>Information for healthcare providers/GPs when talking to patients/ consumers</p> <ul style="list-style-type: none"> <li>Review of documentation from the UK and US programs has very limited public information/ detail</li> <li>Any advice to Government on the questions the Commonwealth should be focussing on would be useful</li> </ul>	<p>SG#3</p> <p>Input from other groups as required</p>	<p>Mid – late January 2021</p> <p>To progress</p>

#### Subgroup 1 update

s47F provided an update on behalf of SG#1.

#### Members DISCUSSED:

- Effects of the vaccine candidates on transmission is still unknown, requiring an alternative strategy by looking at a transmission priority organisation and a risk priority organisation.
- Risks are at ports of entry, uncertainties whether vaccine/s will address this
- As timeframes remain uncertain, it may be better to look at first 500,000 doses?
- Age as most critical risk factor; consider smaller groupings, starting with the oldest, to get to granularity
- What happens after the first 1 million Pfizer doses and 3.5 million AstraZeneca doses?
  - Ms Scofield noted a rough overview has been provided to SG1 to inform their work
  - The month by month prioritisation list of populations will help the Taskforce consider all issues in implementation and allow for flexibility to changing needs.
  - Acknowledged that efficacy between vaccines looks different at the moment, however currently doses are limited and further details of future production are not yet available, so ATAGI advice to Government is required to inform which groups are the immediate priorities for vaccine candidates and the Commonwealth will take that forward
- Possibility for vaccine wastage if dosing intervals are starting to creep
- Communication regarding the transmission rollout model versus no community transmission model
- Importance of protecting healthcare workers at greatest risk
- The need for consideration of quarantining doses for outbreak management and ring fencing
  - Commonwealth noted it would appreciate ongoing advice on this as appropriate, noting limited does in the first phase

#### Subgroup 2 update

s47F sought feedback on proposed priorities identified for SG#2:

- What was needed to get sites ready; and
- What those immunisation providers might need to start the program.
- Delivery date: mid-February 2021.**

#### Members DISCUSSED and NOTED:

- What sites and immunisation providers need to get ready for the rollout
  - Ms Scofield noted a range of advice from SG#2 on site requirements has already been shared with jurisdictions during bilateral discussions, and Commonwealth and jurisdictions



have discussed that all sites would go through pre-qualification process, e.g. to demonstrate capacity to receive delivery of doses, ability to upload to AIR

- Commonwealth would be interested in advice from SG#2 on what other issues need to be considered, e.g. Pfizer vaccine logistics/implementation issues, for example will possibly be using sites that wouldn't normally be vaccination sites
- Qualification process and what it should look like
- Development of three documents: Patient information, provider information and consent framework template (i.e. a nationally consistent list for providers to ensure they have covered key information for patients)
  - Need to ensure all parties (sponsors, TGA and Commonwealth/ATAGI) are playing their own role, e.g. it is important that sponsors take responsibility for elements they have responsibility for (e.g. product information), noting that sponsors do not inform consent process
  - It was noted the UK and US have similar advice, however this isn't the ATAGI-equivalent organisation developing
  - Noted that in Australia, providers don't tend to use Product Information provided by companies, rather they rely on the advice provided ATAGI/NCIRS/NIP
- Importance of consistent patient and provider information sheets across the board
- Commonwealth to have further discussions with Jurisdictional Immunisation Coordinators (JIC) to progress national consistent training package/program
- Government has stated that GPs will be involved in the rollout
- Contracts with preferred data/ logistics tenderers not yet finalised
  - Logistics and data partners are separate noting that logistics will have track and trace elements however, data partner will provide separate data from acceptance of doses to adverse events following immunisation
  - Terms of Reference for data and logistics providers to be provided to the Working Group when available
- National booking system being discussed with JICs
- No decisions made on consent at this stage; may not need a consent model across the board, other than what happens in normal circumstances
- Concerns about pre-consent (e.g. via online booking) that does not give recipients adequate opportunity to ask questions

Action	Responsible officer/s	Progress
SG#2 to provide advice on how to get sites and immunisation providers ready for rollout	Subgroup 2/NCIRS	To progress (due mid-February)
Advice on what needs to be considered (e.g. Pfizer vaccine logistics/implantation issues; GP capacity with vaccination, using sites that would not normally be vaccination sites)	Subgroup 2/NCIRS	To progress
Provide Terms of Reference of data/ logistics contracts to Working Group when available	Lisa Schofield/ Secretariat	Complete: media release provided on SharePoint
Develop patient information sheet	Subgroup 2/NCRIS	To progress
Develop provider information sheet	Subgroup 2/NCRIS	To progress
Develop consent framework template	Subgroup 2/NCRIS	To progress

Subgroup 3

s47F

provided a presentation and update.

## Members NOTED:

- Safety is featured in all implementation plans and bilateral discussions, and TGA's pharmacovigilance plan slide deck to be shared with Working Group
- Department's market research is underway, and Commonwealth noted products can be shared when available

Action	Responsible officer/s	Progress
Provide TGA's pharmacovigilance plan slide deck to Working Group, when available	Lisa Schofield/ Secretariat	Completed

**7. Next steps**

## Members AGREED:

- Secretariat to progress meeting dates for 2021

A/Prof Chris Blyth thanked the working group for all their work.

Action	Responsible officer/s	Progress
Provide list of 2021 meeting dates and key outputs and timelines to Working Group	Secretariat	To progress

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the Freedom of Information Act 1982  
by the Department of Health and Aged Care

ATAGI COVID-19 Working Group					
Executive Group					
Record of meeting outcomes					
Meeting date	Action item	Action	Responsible officer/s	Progress / Comments	Complete Y/N
4-Sep-20	2.1	Review ToR and add suggested updates	ATAGI Secretariat	Completed	Y
4-Sep-20	2.2	Endorse Working Group ToR with changes	Co-Chairs	Completed	Y
4-Sep-20	2.3	Draft map of COVID-19 Committees and how they integrate with one another	COVID-19 Taskforce	See outstanding item for 2020 below	N
4-Sep-20	2.4	Make recommendations of possible Primary Care representatives for the Working Group	Executive members	Completed	Y
4-Sep-20	3.1	Review NCIRS work plan to identify gaps and ensure key deliverables of each sub group are included	COVID-19 Taskforce	Completed	Y
4-Sep-20	3.3	Approved work plan to be provided to Sub Group leads for comment	ATAGI Secretariat	Completed and on Sharepoint	Y
4-Sep-20	3.4	Establish new email inbox and a Working Group SharePoint page for the ATAGI COVID Working Group	ATAGI Secretariat	Completed	Y
4-Sep-20	3.5	Establish a team to provide support to the ATAGI COVID Working Group and the JIC COVID Working Group	Immunisation and Communicable Disease Branch	Completed	Y
4-Sep-20	3.6	Provide link to the COVID-19 Vaccines and Treatments for Australia Science and Industry Technical Advisory Group webpage	COVID-19 Taskforce	Completed	Y
4-Sep-20	3.7	Schedule weekly Executive Working Group meeting	ATAGI Secretariat	Completed	Y
4-Sep-20	3.8	Schedule initial meetings for each Sub Group	ATAGI Secretariat	Completed	Y
4-Sep-20	3.9	Provide the COVID-19 Taskforce with a list of data required	NCIRS	Completed	Y
4-Sep-20	3.1	Arrange CDNA representation on each Subgroup	ATAGI Secretariat	Completed	Y
11-Sep-20	2.1	Update and Finalise ATAGIs Preliminary advice on general principles to guide the prioritisation of target populations in a COVID-19 vaccination program in Australia	Subgroup 1 – Vaccine utilisation and prioritisation	Completed - preliminary advice on COVID vaccine priority groups endorsed by Co-Chairs on 17 September	Y
11-Sep-20	2.2	First draft of ATAGIs COVID19 vaccine prioritisation matrix	Subgroup 1 – Vaccine utilisation and prioritisation	Completed (first version of the prioritisation matrix provided to Taskforce)	Y
11-Sep-20	2.4	Monitoring of COVID-19 vaccines	COVID-19 Taskforce	Completed - weekly State of Play report	Y
11-Sep-20	2.5	Prepare implementation plan for rollout of Oxford, UQ and RNA vaccines	Subgroup 2 – Vaccine distribution and program implementation	Completed (paper on frozen vaccines to Exec 9/10) Also see 18/9 item 4.3 below	Y
11-Sep-20	2.6	Prepare advice on Workforce required for implementation of COVID-19 vaccine – determine how many and what sort of training will be required	Subgroup 2 – Vaccine distribution and program implementation	Completed (workforce paper to Exec 9/10) Also see 18/9 item 4.3 below	Y
11-Sep-20	2.7	Plan for monitoring and tracking doses of the COVID-19 vaccine	Subgroup 2 – Vaccine distribution and program implementation	NFA - referred to Commonwealth and JICS	Y
11-Sep-20	2.8	Prepare advice on safety and surveillance, monitoring system to be used- how existing systems such as AusVaxSafety and AIR fit	Subgroup 3 – Vaccine Safety, Evaluation, Monitoring and Confidence	NFA - referred to Commonwealth and JICS	Y
11-Sep-20	2.9	Test the communication strategy and messaging around the COVID-19 vaccine	Subgroup 3 - Vaccine Safety, Evaluation, Monitoring and Confidence	Discussed at meeting on 2/10	Y
11-Sep-20	2.10	NCIRS technical leads to be invited to Executive Group meetings	ATAGI Secretariat	Completed	Y
11-Sep-20	3.1	s47F to meet with NCIRS technical leads prior to subgroup 1 meeting.	NCIRS technical leads and Subgroup 1 Lead	Completed	Y
11-Sep-20	3.2	ATAGI secretariat to establish process with TGA to share information	ATAGI Secretariat	Completed (weekly meetings)	Y
11-Sep-20	3.4	Establish new email inbox and a Working Group SharePoint page for the ATAGI COVID Working Group. Provide details to Working Group members	ATAGI Secretariat	Completed-Email to Members with SharePoint and inbox details 14/9/2020	Y
11-Sep-20	3.5	AIR should be a standing item on the Executive Meeting Agenda	ATAGI Secretariat	Completed	Y
18-Sep-20	4.1	Workshop ring-fencing and incorporate into prioritisation document	Subgroup 1 – Vaccine utilisation and prioritisation	Completed	Y
18-Sep-20	4.2	Overlay priority populations with the Oxford vaccine	Subgroup 1 – Vaccine utilisation and prioritisation	Completed - Endorsed by Exec 23/10/20	Y
18-Sep-20	4.2	Overlay priority populations with the UQ vaccine	Subgroup 1 – Vaccine utilisation and prioritisation	No longer applicable	N/A
18-Sep-20	4.3	Prepare implementation plan for the rollout of each vaccine - Oxford, UQ and RNA vaccines. How would you roll out a targeted program? Provide different scenarios	Subgroup 2 – Vaccine distribution and program implementation	Completed - Taskforce developing implementation plans and SG 2 providing technical advice	Y
18-Sep-20	4.4	COVID 19 vaccine Taskforce to meet with s47F to further explore scenarios to be tested	COVID-19 Vaccine Taskforce and Subgroup 2 Lead	Completed	Y
18-Sep-20	4.5	Test Communication Strategy with various advisory groups including COVID-19 ATAGI working Group	COVID-19 Vaccine Taskforce and Subgroup 3 – Vaccine Safety, Evaluation, Monitoring and Confidence	Completed	Y
18-Sep-20	4.6	Update ATAGI webpage to include information about the ATAGI COVID-19 Working Group	ATAGI Secretariat	Completed, website page forwarded to comms team	Y
18-Sep-20	5.1	Arrange a meeting with AstraZeneca to brief the ATAGI COVID-19 Working Group	COVID-19 Vaccine Support Section	Completed - meeting held 20 October	Y
18-Sep-20	5.2	ATAGI to provide the Department with themes/questions they would like to discuss with AstraZeneca	ATAGI Co-Chairs	Completed - Questions to AZ 23/9	Y
18-Sep-20	5.3	Provide overview brief of what NITAGS are doing in the COVID-19 space	NCIRS	Completed 9 October 2020 and on Sharepoint	Y
24-Sep-20	2.1	Upload draft communication plan on a page on Sharepoint	Secretariat	Completed	Y
24-Sep-20	2.2	Provide feedback on communication plan, including suggestions to disseminate information to key groups	Members	Completed	Y
24-Sep-20	2.3	Incorporate feedback and bring revised plan back to Working Group	Jodie Grieve	Completed (update at half day information session 10 November)	Y
24-Sep-20	2.4	Update ATAGI website with information about Working Group and Subgroups	ATAGI Secretariat	Completed - preliminary information published 9 October	Y
24-Sep-20	2.5	Seek advice from Subgroup members regarding publication of names on website	ATAGI Secretariat	Completed (on SG meeting agendas)	Y
24-Sep-20	3.1	Make necessary arrangements with proposed new members	ATAGI Secretariat	Completed	Y

24-Sep-20	4.1	Plan to bring Subgroup members together for half day information sharing (end of October)	ATAGI Secretariat	Completed - discussed at Exec meeting 9/10 (to be held in November)	Y
24-Sep-20	4.2	Embed process to seek Executive approval of Subgroup documents	ATAGI Secretariat and Subgroup leads	Completed	Y
24-Sep-20	5.1	Arrange Friday meetings commencing 9 October	ATAGI Secretariat	Completed	Y
9-Oct-20	2.1	Seek written consent from all subgroup members to publish na	ATAGI Secretariat	Completed	Y
9-Oct-20	2.2	Organise half day session for all members in November	ATAGI Secretariat	Scheduled for 10 November	Y
9-Oct-20	4.1	Advise on the process around information prepared by the ATAGI COVID-19 Working Group and whether further input is needed	Lisa Schofield	Completed - update provided at Exec meeting 23/10	Y
9-Oct-20	4.2	Extend invitation to s47F	s47F	Completed	Y
9-Oct-20	5	Advise on next steps in relation to discussion papers on workfo	Lisa Schofield	Completed - update provided at Exec meeting 23/10	Y
9-Oct-20	6	Email to be sent to ATAGI members seeking confirmation regar	Taskforce	Completed	Y
9-Oct-20	8.1	Clarify what COVID-19 stakeholder briefings have been done or	Hope Peisley	Completed	Y
9-Oct-20	8.2	Discuss stakeholder briefings with Lisa Schofield	s47F	Completed	Y
9-Oct-20	9	Organise meeting with ACV and ATAGI Chairs subject to advice from Lisa Schofield	ATAGI Secretariat	Completed - TGA rep (responsible for ACV) attending Exec 13/11 (Allen Cheng also in attendance)	Y
16-Oct-20	2.1	Seek written consent to publish member names on website	ATAGI COVID-19 Working Group Secretariat	Completed	Y
16-Oct-20	2.2	Half day information sharing for Subgroups: 1-5pm AEDT, Tuesday 10 November 2020	ATAGI COVID-19 Working Group Secretariat	Completed	Y
16-Oct-20	2.3	Outline timeframes for when key deliverables from Subgroups can be shared with stakeholders	COVID-19 Taskforce	Completed - update provided at Exec meeting 23/10	Y
16-Oct-20	2.4	Centralise international documents on SharePoint	ATAGI COVID-19 Working Group Secretariat and NCIRS	Completed - centralised resource area established on sharepoint	Y
16-Oct-20	3.1	Invite the additional members to Subgroup 1 and Subgroup 2	s47F and ATAGI COVID-19 Working Group Secretariat	Completed	Y
16-Oct-20	4.1	Arrange meeting with Health Modelling Team	COVID-19 Taskforce	Completed - SG1 meeting 27/10	Y
16-Oct-20	4.2	Develop a pathway to manage adverse events – link in with TGA pathways and pharmacovigilance plan	Sub-group 3	Completed - TGA presentation at SG3 16/10 and ongoing discussions	Y
16-Oct-20	5.1	Respond to email sent by s47F on 15/10/2020 regarding probity arrangements	All AstraZeneca meeting attendees	Completed	Y
16-Oct-20	6.1	Provide members with a list of confirmed attendees	COVID-19 Taskforce/ Secretariat	Completed	Y
16-Oct-20	7.1	Develop standardised consent form/ framework in line with normal practices	NCIRS and Sub-group 2	Completed - endorsed by SG2 4/11 and to Exec	Y
16-Oct-20	7.2	Create master list/straw man of the resources that will be required	NCIRS	Completed – on Exec agenda 23/10	Y
23-Oct-20	3	Taskforce to consider ATAGI Working Group's list of documents/deliverables and liaise with s47F	Lisa Schofield	Completed - discussed Exec meeting 30/10	Y
23-Oct-20	4.1	Clarify timing and clearance requirements for an expedited Handbook process	Hope Peisley	Completed - discussed Exec meeting 30/10	Y
23-Oct-20	4.2	Add Handbook chapter to workplan	NCIRS	In progress	Y
23-Oct-20	4.3	Prepare list of outward facing documents/advice required for consideration at next Exec meeting	NCIRS s47F	Completed - discussed Exec meeting 30/10	Y
23-Oct-20	5	Forward both Subgroup 1 endorsed documents to Taskforce	Secretariat	Completed 26/10	Y
23-Oct-20	6	Provide feedback to NCIRS on draft program phases and program communication resources	Exec Team members	Completed	Y
23-Oct-20	8.1	Invite TGA rep to attend Subgroup 2 meetings	Secretariat	Completed	Y
23-Oct-20	8.2	Invite TGA rep to update Exec Team fortnightly	Secretariat	Completed (first update provided by email 28/10)	Y
30-Oct-20	2.1.1	Key members from Subgroup 1 and NCIRS to meet with data modellers	s47F	Completed - emails sent and dates being determined	Y
30-Oct-20	2.1.2	Arrange meetings with CSL and AstraZeneca in Nov/Dec 2020	Secretariat	Completed	Y
30-Oct-20	3.1	Discuss with Health Comms whether a forward facing statement, communicate or annotated agenda can be released for the session	Hope Peisley/Secretariat	Completed - under discussion for Exec agenda 6/11	Y
30-Oct-20	3.2	Discuss with Taskforce whether JICs can attend the session	Hope Peisley/Secretariat	Completed (separate session to be held)	Y
30-Oct-20	3.3	Meet to develop agenda and content	s47F, NCIRS	Completed 4/11	Y
30-Oct-20	3.4	Prepare a one page summary for consideration by Lisa Schofield to publish on ATAGI webpage	s47F /Lisa Schofield	Completed - s4 and s4 published article in The Conversation 2/12/20	Y
30-Oct-20	5.1	Circulate list of ATAGI deliverables	Taskforce	Discussed at meeting on 6/11 - see item 2.1 below	Y
30-Oct-20	5.2	Circulate list of outward facing advice/ documents developed by NCIRS	Secretariat	Completed	Y
30-Oct-20	5.3	Obtain advice from NHMRC re an expedited Handbook process	Hope Peisley	Completed	Y
6-Nov-20	2.1	Provide advice to Working Group re priority issues to be addressed	Taskforce	Completed - initial advice provided by email 2/12/20	Y
6-Nov-20	3.1	Raise member concerns with the Department's Executive	Co-chair	Completed	Y
6-Nov-20	3.2	Provide copy of Secretary's letter to Working Group	Secretariat	Completed	Y
6-Nov-20	3.3	Organise information session with JICs	Secretariat	Completed	Y
6-Nov-20	4	Draft public communicate following information session	Secretariat	Completed - communicate drafted (not published yet)	Y
6-Nov-20	5.1.1	List questions that need to be answered through further data modelling work	Subgroup 1 representatives	Completed	Y
6-Nov-20	5.1.2	Invite TGA rep to next meeting	Secretariat	Completed	Y
6-Nov-20	5.1.3	Arrange meetings with Pfizer and Novovax	Secretariat	Completed	Y
6-Nov-20	5.2.1	Develop a table scoping consent issues in workplace settings	NCIRS	Completed	Y
6-Nov-20	5.2.2	Provide endorsed Working Group documents to JIC	Taskforce/Secretariat	Discussed by Taskforce 4 December 2020 (some docs attached to jur implmn plans)	Y
13-Nov-20	4.1	Circulate two documents (Vaccine Policy and ATAGI advice on priority populations) subject to Government approval	Taskforce/Secretariat	Completed 13/11	Y
13-Nov-20	4.2	Comment on draft Roles, Responsibilities and Reporting lines	Taskforce	Completed (see 20/11 item 2.2)	Y

13-Nov-20	5.1	Map core training components required for COVID-19 vaccines, existing vaccine training programs and how they can be adapted to upskill providers, any gaps and consider international training programs	NCIRS s47F ) and Subgroup 2 with assistance from Subgroup 3 on international programs	Completed	Y
13-Nov-20	6.2.1	Send endorsed Equipment Checklist to Taskforce, subject to any further comments	NCIRS/Secretariat	Completed	Y
13-Nov-20	6.2.2	Bring ATAGI documents on multi-dose vials to ICEG for consideration when ready	s47F	Completed (see 20/11 item 6.2.6)	Y
13-Nov-20	6.2.3	Develop an appendix to the Clinical guidance document with preliminary information on vaccine candidates, and bring to next meeting	NCIRS s47F )/ Secretariat	Completed	Y
20-Nov-20	2.1	Confirm legislative requirements around consultation timeframes with NHMRC	Hope Peisley	Completed (legislated 30 days)	Y
20-Nov-20	2.2	Revise Roles, Responsibilities and Reporting lines document as information becomes available	Taskforce	Completed (Taskforce provided comment to Exec on initial draft)	Y
20-Nov-20	2.3	Consider next steps for documents endorsed by Working Group	Taskforce	Completed 4 December 2020	Y
20-Nov-20	4.1	Bring incident list to next meeting for discussion	s47F )/ Secretariat	Circulated by s47F 23/11	Y
20-Nov-20	4.2	Invite TGA to next meeting to discuss incident management	Secretariat	Completed	Y
20-Nov-20	6.1.1	Provide data modelling advice to Lisa Schofield for further discussions and consideration within Dept	Secretariat	Completed	Y
20-Nov-20	6.1.2	Provide comments on data modelling paper	Members	Completed	Y
20-Nov-20	6.2.1	Provide comments on H1N1 paper	Members	Completed	Y
20-Nov-20	6.2.2	Provide comments on MDV Guideline	Members	Completed	Y
20-Nov-20	6.2.3	Provide H1N1 Lessons Learned document to Subgroups 1 and 3	Secretariat	Completed - see SG2 action items 18/11 (SG1 advised at meeting 1/12)	Y
20-Nov-20	6.2.4	Prepare summary of ATAGI endorsed papers and next steps to assist in tracking documents and share with the Executive Group	Secretariat	Completed	Y
20-Nov-20	6.2.5	Develop process for approval of key ATAGI WG documents, including outward facing	Taskforce	Completed 4 December 2020	Y
20-Nov-20	6.2.6	Send MDV Guideline paper to ICEG Secretariat for comment	Secretariat, s47F	Completed 1/12/20	Y
27-Nov-20	2.1	Identify safety response/communication plan and circulate to Subgroup 3	Secretariat	Completed 2/12/20	Y
27-Nov-20	2.2	Map out proposed incident management team and key participants	Subgroup 3	TGA has mapped out its internal govt response processes for confirmed significant safety signals, including linkages, and building on established pathways. SG3 has done scenario planning and will continue to discuss.	Y
27-Nov-20	2.3	Provide draft Subgroup 3 documents to TGA for internal use	Secretariat, s47F	Completed	Y
27-Nov-20	3	Meet to consider approvals, additional advice and roles/responsibilities and advise ATAGI re next steps	Taskforce	Completed	Y
27-Nov-20	4.1	Further consider prioritisation of critical worker and other special risk groups, along with ring fencing	Subgroup 1	Completed - discussed SG1 1/12	Y
27-Nov-20	6.2	Provide two documents to Taskforce - mandatory vaccination policies and workforce training gap analysis	Secretariat	Completed	Y
27-Nov-20	7	Add TSANZ letter to Subgroup 1 agenda	Secretariat	Completed - discussed SG1 1/12	Y
4-Dec-20	3	Draft letters to vaccine sponsors requesting access to vaccine data	Secretariat and TGA	Completed	Y
4-Dec-20	4	Incorporate further feedback from members and forward safety advice to Taskforce	NCIRS and Secretariat	Completed	Y
4-Dec-20	5	Revisit priority populations advice	Subgroup 1	Completed (SG1 meeting 22/12)	Y
4-Dec-20	5	Develop principles by January on managing COVID-19 and Fluvax rollout	Subgroup 1	Completed (see SG1 8/12, item 5)	Y
4-Dec-20	5	Provide members with summary of ATAGI documents and categories for next steps (internal/external)	Secretariat	Completed	Y
4-Dec-20	5	Provide members with update on Departmental meeting 4/12 re data modelling	Lisa Schofield	Completed - email 4/12	Y
4-Dec-20	5	Discuss evaluation planning to clarify responsibilities	Taskforce	Completed	Y
4-Dec-20	5	Add agenda item to information session on 15/12 to discuss evaluation and other areas of possible duplication (training, safety)	Secretariat	Completed	Y
4-Dec-20	6	Cancel remaining Exec meetings for 2020	Secretariat	Completed	Y
4-Dec-20	6	Advise Secretariat of leave arrangements over Christmas/New Year	All	Completed	Y
18-Dec-20	3.1	Circulate latest information from TGA on its pharmacovigilance plan for COVID-19 vaccines	Lisa Schofield	Completed	Y
18-Dec-20	3.2	Send invitations for next combined info session (2 February)	Secretariat	Completed	Y
18-Dec-20	4.1	Prepare the first tranche of provider materials for Pfizer and AZ vaccines	NCIRS	Completed week of 11/1/21	Y
18-Dec-20	4.2	Advise re any Government decision about consent	Taskforce	Completed - discussed Exec meeting 8/1/21 - ATAGI advice sought re what consent means and how it will work with different populations	Y
<b>Outstanding item 2020</b>					
4-Sep-20	2.3	Draft mud map of COVID-19 Committees and how they integrate with one another	Taskforce	Taskforce is progressing priority implementation activities and this item has been overtaken by events (Jan 2021)	Y
<b>2021</b>					
8-Jan-21	5	Provide draft consent documents (currently on Sharepoint) to SG2 and Executive for discussion at next meetings	Secretariat	In progress	
8-Jan-21	5	Provide further advice to ATAGI Exec on consent issue and deliverables required, including whether standard/consistent information should be provided across Australia	Lisa Schofield	In progress	
8-Jan-21	6	Review public facing documents being prepared by Comms and provide advice to ATAGI Exec re. any gaps	Hope Peisley	In progress	


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ATAGI COVID-19 Working Group					
Subgroup 1. Vaccine utilisation and prioritisation					
Record of meeting outcomes					
Meeting date	Action item	Action	Responsible officer/s	Progress / Comments	Complete Y/N
15-Sep-20	6.1	Update and finalise ATAGI COVID Vaccine Preliminary Advice document and Prioritisation Matrix in line with the Preliminary COVID-19 vaccination priority Review and edit preliminary advice document groups List prioritisation principles with no reference to ranking Map cohorts to the prioritisation principles Remove colour coding. Insert caveat for all principles where information is not available	* Sub Group Members * NCIRS * Co-chairs	Complete	Y
22-Sep-20	3.1	Gather data on numbers of aged care workers, health care workers and people in at-risk occupations in states/territories to guide decision making	NCIRS	Prioritisation matrix has estimates for occupation groups nationally (may need Dept to source population numbers for occupation groups at jurisdictional level if required)	Y
22-Sep-20	3.2	Develop a request for consideration by the Taskforce outlining key input and expertise required by this Subgroup	s47F in consultation with members	Completed - new members agreed at Exec meeting 24/9	Y
22-Sep-20	4.1	4.1 Circulate data on at-risk groups to members	NCIRS	Completed - see 14/12, item 4	Y
44096	4.2	4.2 Gather data on specific populations to understand the landscape	NCIRS	Completed - see 14/12, item 4	Y
22-Sep-20	4.3	4.3 Contact NIR and request presentation on latest data eg NSW data on health care workers and VIC data	Secretariat	Completed presentation on 6/10	Y
22-Sep-20	5.1	5.1 Circulate questions for AstraZeneca to members for comment	Secretariat	Completed - questions provided to AZ Sept 2020	Y
22-Sep-20	6.1	6.1 Prepare a summary list of documents under development by NCIRS for the sharepoint site to assist with tracking and identifying gaps	s47F	Completed 3/11 - currently populating with appropriate content 17/11	Y
6-Oct-20	5	Provide further questions and answers following meeting	Members/Martin Kirk	Completed	Y
6-Oct-20	6.1	Further discussion to define aims of program	Secretariat	Completed - on Executive meeting agenda for 9/10	Y
6-Oct-20	6.2	Summarise issues and continue discussion by email	s47F and members	Completed	Y
6-Oct-20	6.3	Complete prioritisation framework by 30 October	Members and NCIRS	Completed - to Exec 23/10	Y
6-Oct-20	7	Place all Subgroup agenda papers on Sharepoint	Secretariat	Completed	Y
13-Oct-20	3	Seek confirmation from members to publish names on website	Secretariat	Completed	Y
13-Oct-20	6.1	Provide comments via email or Sharepoint on preliminary advice document by Friday 16/9 and prioritisation framework by Monday 19/10	Members	Completed	Y
13-Oct-20	6.2	Collate comments and provide revised documents for next meeting	s47F and NCIRS	Completed - agenda for 20/10	Y
20-Oct-20	4.1	Amend and finalise preliminary advice document	NCIRS and s47F	Completed 21/10/20	Y
20-Oct-20	4.2	Submit to Taskforce following Co-Chair Executive endorsement	Secretariat	Completed 21/10/20	Y
20-Oct-20	5	Submit to Taskforce following endorsement by Executive	Secretariat	Completed 26/10/20	Y
20-Oct-20	6	Invite Department's data modellers to provide a half hour presentation on data modelling relevant to this group	Secretariat	Presentation for 27/10	Y
20-Oct-20	7.1	Invite TGA representative to present on TGA approval process	Secretariat	Completed (update provided to Exec Team by email and s47F invited to Exec following return from leave early Nov)	Y
20-Oct-20	7.2	Liaise with s47F regarding sharing of information with the COVID-19 Aboriginal Taskforce	Secretariat	Completed	Y
27-Oct-20	4.1	Allison Essex to consider further information to be provided to Subgroup 1 and liaise with members on data modelling work, including feasibility of sandpit approach	Allison Essex	Completed - meeting 5/11	Y
27-Oct-20	5.1	Email Allison Essex outlining Subgroup's thinking and offering to collaborate and provide input	s47F	Completed	Y
27-Oct-20	5.2	Continue discussions at Executive meeting and Subgroup 1 meetings	Secretariat	Completed - initial meeting with data modelling branch 5/11	Y
27-Oct-20	5.3	Prepare brief paper on data modelling requirements	Subgroup 1/ NCIRS	Completed - meeting of 17/11	Y
3-Nov-20	5.1	Provide Allison Essex with the group's prioritisation document as per	Secretariat	Completed	Y
3-Nov-20	5.2	Organise modelling sandpit session with Allison Essex	Secretariat	Completed	Y
17-Nov-20	3.1	Invite TGA to update at next SG1 meeting	Secretariat	Complete	Y
17-Nov-20	6.1	All interested SG1 members to review modelling advice and provide edits and comments by Wednesday morning	SG1	Complete	Y
17-Nov-20	6.2	Submit data modelling recommendations to Executive Group for consideration	NCIRS/Secretariat	Complete	Y
24-Nov-20	6.1	Prepare a detailed presentation on the Oxford Vaccine for discussion at the next meeting	NCIRS	Completed	Y
1-Dec-20	4	Upload NCIRS draft document re critical workers on Sharepoint	NCIRS	Completed	Y
8-Dec-20	4	Provide a more detailed breakdown of priority populations and staged rollout by month or quarter according to predicted vaccine doses available	NCIRS/Subgroup 1	Completed - see 14/12 item 4	Y
8-Dec-20	5	Recommend how next year's flu vaccine program will interface with COVID vaccine rollout	NCIRS	Completed - see 5/1/21	Y

8-Dec-20	6	Add questions for meeting with Pfizer	NCIRS	Completed	Y
14-Dec-20	4.1	Provide a more nuanced prioritisation and month by month phase by number of available doses	Subgroup 1/NCIRS	Completed - revised prioritisation advice provided to Taskforce 24/12/20	Y
14-Dec-20	4.2	Discuss logistics and delivery issues with subgroup 2	Subgroup 1	Completed - share session 15/12/20, Exec meetings etc	Y
14-Dec-20	4.3	Finalise documents that detail/map at risk groups	NCIRS	Completed Dec 2020	Y
14-Dec-20	4.4	Provide jurisdictional data on priority population numbers to subgroup 1	s47F, s47E(c) /Secretariat	Completed	Y
22-Dec-20	3	Provide further feedback on draft prioritisation advice in next 24 hours	Members	Completed	Y
22-Dec-20	3	Provide input in relation to GPs and prioritisation	s47F	Completed	Y
22-Dec-20	3	Incorporate member comments to enable revised version to be circulated to Subgroup 1	NCIRS,s47F	Completed	Y
22-Dec-20	3	Provide prioritisation advice to Executive Group for endorsement by 24 December	Secretariat	Completed	Y
5-Jan-21	5	Incorporate Subgroup 1 comments and put revised draft Clinical Advice Statement on sharepoint	NCIRS	In progress	Y
5-Jan-21	5	Refer revised version of Clinical Advice Statement to Subgroups 2 and 3 for input/comment	s47F	In progress	
5-Jan-21	5	Finalise revised Clinical Advice Statement next week for consideration by Exec on 15 January	All	In progress	
5-Jan-21	5	Seek Product Information for Pfizer vaccine	Secretariat	Completed - publicly available info put on sharepoint 8/1/21	Y
5-Jan-21	6	Provide comment on draft flu document for discussion at next SG1 meeting on 12 January and finalisation for consideration by Exec on 15 January	All	In progress	
12-Jan-21	4	Include agenda item for Exec meeting re ATAGI meetings with Janssen and Moderna	Secretariat	Completed	Y

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ATAGI COVID-19 Working Group					
Subgroup 2. Vaccine distribution and program implementation					
Record of meeting outcomes					
Meeting date	Action item	Action	Responsible officer/s	Progress / Comments	Complete Y/N
16-Sep-20	4.1	Prepare discussion paper on logistics and issues of distributing frozen COVID-19 Vaccines	NCIRS technical support	Completed	Y
44090	4.2	Review learnings from 2009 PanVax Program	NCIRS	Completed (on SG2 agenda 4/11 and held over to next meeting)	Y
16-Sep-20	4.3	Prepare discussion paper on immunisation workforce- capacity, competencies and training needs.	NCIRS technical support	Completed	Y
16-Sep-20	4.4	Prepare discussion paper on information systems to track distribution and coverage of COVID-19 vaccines	NCIRS technical support	NFA - referred to Commonwealth/ Taskforce	Y
23-Sep-20	2.1	Update membership list and circulate	Secretariat	Completed	Y
23-Sep-20	3.1.1	Finalise paper on frozen vaccines following further input from members and consideration at next Subgroup meeting - include high level summary at beginning; clear recommendations and conclusions; and reference to Commonwealth Request for Tender (RFT) to review system readiness	S47F	Completed following SG2 meeting on 30 September 2020	Y
23-Sep-20	3.1.2	Develop another piece of work incorporating different scenarios	NCIRS	Now part of paper at 3.1.1	Y
23-Sep-20	3.1.3	Consider availability and cost of freezers and transporting of vaccines	Sarah Sinclair	Referred to Taskforce	Y
23-Sep-20	3.1.4	Circulate public information on RFT to members	Secretariat	Completed	Y
23-Sep-20	3.2.1	Finalise paper on workforce competencies following further input from members and consideration at next Subgroup meeting	S47F	Completed following SG2 meeting on 30 September 2020	Y
23-Sep-20	3.3.1	Report back to members at next meeting regarding JIC discussions, intersect with this Subgroup and respective roles	S47F	On agenda for 30/9 meeting	Y
23-Sep-20	4.1	Develop list of other pieces of work to be undertaken	NCIRS	On agenda for 30/9 meeting	Y
23-Sep-20	4.2	Update workplan in Sharepoint as required	NCIRS	Updated late September and ongoing	Y
23-Sep-20	5.1	Organise a test of videoconferencing with members	Secretariat	Completed	Y
30-Sep	3	Members to send comments to Secretariat in relation to possible publication of names	Members	Completed - no further comments received	Y
30-Sep	4	Place item on Exec agenda re possible TGA rep on Subgroup 2	Secretariat	Completed for Exec meeting 9/10	Y
30-Sep	5.1	Finalise paper on frozen vaccines following further input from members, for consideration at Exec meeting 9/10	S47F	Completed	Y
30-Sep	5.2	Finalise paper on workforce competencies following further input from members for consideration at Exec meeting 9/10	S47F	Completed	Y
30-Sep	6	Place item on Exec agenda re Subgroup 2 proposed work	Secretariat	Completed for Exec meeting 9/10	Y
30-Sep	8.1	8.1 Move meeting times to Wednesdays from 12-1pm	Secretariat	Completed	Y
30-Sep	8.2	8.2 Consolidate information already gathered on AIR data quality and present at next meeting	NCIRS	Completed - on agenda for SG2 meeting 7/10	Y
30-Sep	8.3	8.3 Provide draft points on multidose vials at next meeting	NCIRS	Completed - on agenda for SG2 meeting 7/10	Y
7-Oct	3.1	3.1 Executive Group to discuss TGA representative	Executive Group	Not discussed on 9/10 and now on hold	Y
7-Oct	3.2	3.2 Executive Group to discuss publication of member names online	Executive Group	Completed – discussed on 9/10, proceed subject to written confirmation from members	Y
7-Oct	3.3	3.3 Executive Group to endorse workforce and frozen vaccine discussion papers	Executive Group	Completed	Y

7-Oct	4.1	4.1 WG 2 to develop list of consumables, both a 'minimum requirements' list and more detailed version.	NCIRS	Completed	Y
7-Oct	5.1	5.1 Members to send through any further comments or questions on MDV in writing.	Members	Completed	Y
7-Oct	5.2	5.2 NCIRS to update MDV paper following discussion, including addition of section on implications for different clinical settings	NCIRS	Completed	Y
7-Oct	5.3	5.3 Discuss at Executive meeting this group developing a checklist for site requirements necessary to deliver COVID vaccines	Secretariat	Completed – discussed at Exec meeting 9/10	Y
7-Oct	5.4	5.4 NCIRS to discuss AIR paper with Tracie Hibbard	NCIRS	Completed	Y
14-Oct	4.1	4.1 Invite s47F, s47E(c) from the Gene Technology Policy Section to the next meeting to discuss: <ul style="list-style-type: none"> <li>• whether the proposed vaccines are considered GMO, and</li> <li>• if so, what are the disposal requirements?</li> </ul>	Secretariat	Update provided 28/10	Y
14-Oct	5.3	5.3 Will the vaccines have serial numbers?	Taskforce	Completed, discussed with taskforce.	Y
14-Oct	5.4	5.4 Raise issue of implementation / track and trace software at the Executive Working Group and report back	Secretariat	To be discussed at SG #3 with AIR Representative 30 October	Y
14-Oct	5.5	5.5 Develop a Discussion Paper on consent	NCIRS	Completed	Y
14-Oct	5.6	5.6 Members to review both checklists and updated MDV paper on SharePoint prior to seeking endorsement at the next meeting	Members	Email reminder sent from Secretariat on 19 October, for discussion 28/10	Y
21-Oct	3.1	3.1 Seek an update from the Taskforce at the next meeting about the AstraZeneca & Seqirus information and implementation.	Taskforce	Discussions ongoing at Exec WG and JIC. Completed.	Y
21-Oct	3.2	3.2 Executive WG meeting Friday 23/10: add item for discussion (following meetings with Sponsors this week) regarding the regulatory pathway timing for both AstraZeneca & Seqirus and how this impacts implementation timelines.	Secretariat	Discussions ongoing at Exec WG and JIC. Completed.	Y
21-Oct	4.1	4.1 Secretariat to raise issue of training at JIC either Thursday 22/10 or the following week.	Secretariat	Complete. Added to agenda for 19/11.	Y
21-Oct	4.2	4.2 • Update MDV paper to include a recommendation that nationally consistent training on use of MDVs is required (both for routine providers and new immunisation providers). • Review updated MDV paper out of session, ahead of endorsement at the next meeting.	NCIRS, Members	Endorsed 28/10	Y
21-Oct	4.3	4.3 Taskforce to provide an update on PPE being purchased at the next meeting.	Taskforce	Update provided 28/10	Y
21-Oct	5.1	5.1 Review and comment on the following documents on SharePoint by Monday 26 October, for endorsement at next meeting: <ul style="list-style-type: none"> <li>o Checklists;</li> <li>o Consent discussion paper;</li> <li>o AIR discussion paper; and</li> <li>o Clinical guidance.</li> </ul>	Members	Complete.	
21-Oct	6.1	6.1 NCIRS to produce a list of 'outward facing' ATAGI advice / actions for program implementation, for consideration by the Executive WG & Taskforce	NCIRS	Completed	Y
28-Oct	2.1	2.1 Taskforce to follow up what level discussions have been held on the proposed implementation approach.	Taskforce	Completed – discussed at Executive Meeting 30/10	Y
28-Oct	2.2	2.2 s47F to follow up discussion regarding the rationale for these decisions	s47F	Completed – discussed at Executive Meeting 30/10	Y

4-Nov	3.1	3.1 Seek list of consumables to be shared with SG#2	Secretariat	Complete, uploaded to SharePoint.	
4-Nov	3.2	3.2 s47F to follow up the pathway for key documents (e.g. NHMRC and other groups e.g. RACGP).	s47F	Complete.	
4-Nov	3.3	3.3 Discuss H1N1 paper at next meeting	Secretariat	Complete (added to agenda for 11/11).	Y
44146	2.1	2.1 Revise the MDV Clinical Guidance to incorporate group comments	Subgroup 2/NCIRS	Complete	Y
44146	2.2	2.2 Early engagement with the Infection Control Expert Group	Subgroup 2/s47F	Completed - raised by s47F at ICEG meeting on 11/11 and to be discussed at Exec meeting on 13/11	Y
11-Nov	2.3	2.3 Consult with the Executive on consultation procedures for outward facing documents	Subgroup 2 /Secretariat	Completed	Y
11-Nov	2.4	2.4 Recall the Checklist for Equipment, make revisions, and resubmit to Executive for endorsement	NCIRS/Secretariat	Completed – for Exec meeting 13/11	Y
11-Nov	3.1	3.1 Track progress of PRODA transition and continue discussions at Executive meetings	Subgroup 2/Secretariat	Completd - ongoing	Y
18-Nov-20	2.1	2.1 NCIRS to update H1N1 paper to include: • a statement noting need to consider safety; and • add recommendation on uptake	NCIRS	Completed - for Exec meeting 20/11	Y
18-Nov-20	2.2	2.2 Provide H1N1 paper to Executive Group for endorsement Friday 21/11	Secretariat	Complete, on agenda for Executive Group Friday 20/11	Y
18-Nov-20	2.3	2.3 Provide a copy of the H1N1 paper to WG#3 (and #1) once endorsed by the Executive Group	Secretariat	Completed (on SharePoint)	Y
18-Nov-20	2.4	2.4 Follow up sharing of papers with JIC and more broadly in jurisdictions	Secretariat	Completed - for Exec meeting 20/11	Y
18-Nov-20	3.1	3.1. Provide updated MDV Clinical Guidance to Executive Group for endorsement Friday 20/11	Secretariat	Complete, on agenda for Executive Group Friday 20/11.	Y
18-Nov-20	3.2	3.2 Members agreed to review the Overview of mandatory vaccination policies the paper on SharePoint and provide any comments by Monday 23 November 2020	Members	Complete	Y
25-Nov-20	3.1	Draft a surge workforce plan	NCIRS	In progress	
13-Jan-21	2	Finalise Multi-dose vials paper, incorporate ICEG edits as agreed by members, for Executive endorsement on 15 January	SG2/NCIRS	In progress	
13-Jan-21	2.2	Finalise suite of consent documents for SG2 endorsement 20 January, review by SG3 chair, and Executive endorsement on 22 January	SG2/NCIRS	In progress	

ATAGI COVID-19 Working Group					
Subgroup 3. Vaccine safety, evaluation, monitoring and confidence					
Record of meeting outcomes					
Meeting date	Action item	Action	Responsible officer/s	Progress / Comments	Complete Y/N
18-Sep-20	4.1	Sub Group 3 to review the Communications Strategy being developed by the Department of Health	COVID-19 Vaccine Taskforce	Discussed at meeting 2/10	Y
18-Sep-20	5.1	Small working group to be established to develop a framework regarding 'vaccine confidence' as part of the COVID-19 readiness planning	s47F	Held first meeting 29/9	Y
18-Sep-20	6.1	Schedule fortnightly meetings for Subgroup 3 - Friday 1.30-2.30pm using videoconference platform	s47F COVID-19 Vaccine Support Section	Completed	Y
2-Oct-20	2	Send Secretariat suggested revised wording for workplan from 'Covid vaccine' to 'effective and safe Covid vaccine...'	s47F	Completed	Y
2-Oct-20	3	Subgroup members to send comments to Secretariat in relation to possible publication of names	Members	Completed - no comments received at 11 October	Y
2-Oct-20	4.1.1	Fortnightly agenda item - key themes/updates on Commonwealth communication strategy	Jodie Grieve, s47F, s47E(c)	Completed - standing agenda item	Y
44106	4.1.2	Use Sharepoint page as a central repository for resources and communication pieces	Secretariat	Completed - separate section created on Sharepoint	Y
2-Oct-20	4.1.3	Agenda for next meeting to include item on community resources that can be shared, including regional components	Secretariat	Completed - on agenda for 16/10	Y
	4.2.1	Share COSSI strategy with members	s47F	Completed	
2-Oct-20	5	More information on the ATAGI subgroup#3 Confidence & Communication framework to be provided for next meeting	s47F / NCIRS	Completed - on agenda for 16/10	Y
16-Oct-20	3.1	Seek written consent to publish member names on website.	ATAGI COVID-19 Working Group Secretariat	Completed	Y
16-Oct-20	3.2	Half day information sharing meeting for Subgroups: 1-5pm AEDT, Tuesday 10 November 2020.	ATAGI COVID-19 Working Group Secretariat	Members notified by email 23/10	Y
16-Oct-20	4.1	Draft high level list of communication activities to be placed on SharePoint	COVID-19 Taskforce	Completed - s47F, s47E(c) provides fortnightly comms updates at SG3 meetings	Y
16-Oct-20	5.1	TGA to establish COVID Standing Committee and draft Terms of Reference	TGA	Completed - TGA issue and not for ATAGI (discussed with s47F, s47E(c) 13/11)	Y
16-Oct-20	6.1	Members to provide feedback on AESI discussion paper	Subgroup 3 Members	Completed	Y
16-Oct-20	6.2	Members to provide feedback on the SARS-CoV-1 / MERS-CoV Vaccine-associated Enhanced Disease discussion paper	Subgroup 3 Members	Completed	Y
30-Oct-20	2.1	Finalise preliminary advice on safety including AESI	Subgroup 3	Completed - taking to Exec for endorsement 4/12/20	Y
30-Oct-20	3.1	Invite Government agency working with linked data to Subgroup 3 meeting to discuss linking to the AIR	Secretariat	In progress	N
30-Oct-20	3.2	Prepare brief document outlining a range of evaluation options and timings	NCIRS (s47F)	Completed (see 17/12 item 4.1)	Y
30-Oct-20	5.1	Bring ATAGI communications advice to next Subgroup 3 meeting for endorsement	NCIRS/Secretariat	Completed	Y
26-Nov-20	4.1	Forward Comms advice to Executive for endorsement	Secretariat	Completed	Y
26-Nov-20	5.1	Incorporate changes to draft safety advice and circulate to members for comment by next week	NCIRS/Secretariat/Members	Completed	Y
26-Nov-20	7.1	Conduct scenario planning next week, 3 December 2020	Subgroup 3	Completed	Y
3-Dec-20	4.1	Forward safety advice to Executive for endorsement	Secretariat	Completed	Y
10-Dec-20	4.1	Circulate information on how and when to contact the news team	Secretariat, s47F, s47E(c)	To progress	N
17-Dec-20	4.1	Provide high level evaluation framework by mid-January 2021	Subgroup 3/NCIRS	In progress	N
17-Dec-20	4.2	Circulate link to Canada's playbook	Secretariat	Completed	Y
17-Dec-20	5	Seek members' availability and topic interests for smaller group evaluation workshop	Secretariat	Completed	Y

ATAGI Working Group - Information Sharing Sessions					
Record of meeting outcomes					
Meeting date	Action item	Action	Responsible officer/s	Progress / Comments	Complete Y/N
10-Nov-20	2.1	Develop a list of issues/threats for scenario planning and proposed responses	s47F, s47E(c) and Subgroup 3	Completed	Y
10-Nov-20	2.2	Provide feedback to Jodie Grieve on Commonwealth Communications plan and activities	All members	Ongoing/Completed	Y
10-Nov-20	2.3	Provide information to Secretariat on COVID-19 vaccine misinformation to assist Comms to respond	All members	Ongoing/completed	Y
10-Nov-20	2.4	Publish information on ATAGI webpage about Working Group activities	Taskforce/Secretariat	Ongoing/Completed	Y
10-Nov-20	3.1	Develop a list of products endorsed by the ATAGI COVID-19 Working Group for consideration by the Taskforce re next steps	Secretariat/Taskforce	Completed	Y
10-Nov-20	3.2	Develop a holistic view of work underway through ATAGI and the Taskforce and approval pathways	s47F /Taskforce	Completed	Y
10-Nov-20	3.3	Provide feedback on stakeholders to Secretariat	All members	Completed	Y
10-Nov-20	4.1	Outline the scope of work required to develop a more comprehensive modelling strategy for consideration by the Department	s47F and SG1 members with modelling expertise	Completed	Y
10-Nov-20	5.1	Develop roles and responsibilities summary with clear workflows and reporting lines	Chairs, Subgroup leads, NCIRS and Taskforce	Completed (implementation plan under development)	Y
10-Nov-20	6.1	Raise indemnity issues with Taskforce	Hope Peisley	Raised at Exec meeting on 13/11	Y

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**Australian Technical Advisory Group on Immunisation (ATAGI) COVID-19 Working Group**  
**Information Sharing Session**  
**10 November 2020, 1-5pm**  
**Outcomes**

**In attendance:**

<b>Executive members</b>	<b>Subgroup 3 members</b>	<b>Department of Health</b>
Chris Blyth (Co-Chair)	Nigel Crawford (Lead)	s47E(c), s47F
Allen Cheng (Co-Chair)	Tony Korman	Sarah Sinclair
Katie Flanagan	Margie Danchin	s47E(c), s47F
Robyn Gibbs	Deb Petrys	Jodie Grieve
Nigel Crawford	Diane Walsh	s47E(c), s47F
s11C	Alan Leeb	
Lisa Schofield	s47E(c), s47F	
Nick Henderson	John Kaldor	
Hope Peisley	Paul Effler	
<b>Subgroup 1 members</b>	Cheryl Jones	
Katie Flanagan (Lead)	<b>NCIRS technical support</b>	
Bette Liu	s11C	
Tom Snelling		
Jodie McVernon		<b>Secretariat</b>
Penny Burns		
Angus Dawson		
Kanta Subbarao		
James Wood		
Kirsten Howard		
<b>Subgroup 2 members</b>		
Robyn Gibbs (Lead)		<b>Apologies</b>
Annaliese van Diemen		Michelle Giles
Madeline Hall		Christine Selvey
Karen Bellamy		James Ward
Katherine Gibney		David Durrheim
Nick Silberstein		Christopher Etherton-Beer
Lena Sanci		
Scott Brown		

**1. Meeting Opened**

Members:

- NOTED attendees and apologies
- DECLARED no conflicts of interest

Co-chairs thanked all participants for their contribution to this work

**2. Commonwealth Communications activities**

Members:

- NOTED an update from Jodie Grieve on Commonwealth Communications activities including regular:
  - Website updates (health.gov.au)
  - Social media
  - GP webinars and newsletters
  - Media engagement
  - Engagement with Subgroup 3 on vaccine confidence and communications

- NOTED work underway including:
  - consumer research to inform the development of targeted communications in 2021
  - development of a searchable COVID-19 vaccine hub to provide quick and easy access to information
  - plans to publish information on the ATAGI webpage
- DISCUSSED the importance of early engagement with jurisdictions and the immunisation workforce
- AGREED to undertake scenario planning to assist with addressing vaccine implementation issues quickly

Action	Responsible officer/s	Progress
Develop a list of issues/threats for scenario planning and proposed responses	s47E(c), s47F and Subgroup 3	In progress
Provide feedback to Jodie Grieve on Commonwealth Communications plan and activities	All members	In progress
Provide information to Secretariat on COVID-19 vaccine misinformation to assist Comms to respond	All members	In progress
Publish information on ATAGI webpage about Working Group activities	Taskforce/Secretariat	In progress

### 3. COVID-19 Vaccine Strategy Taskforce update

Members:

- NOTED an update from Lisa Schofield including:
  - Government announcement on 5 November 2020 about two new purchase agreements with Novavax and Pfizer
  - Government consideration of Subgroup 1 advice on priority populations
  - Engagement with Health CEOs, Australian Health Protection Principal Committee, Jurisdictional Immunisation Coordinators, Communicable Diseases Network Australia and others
  - Plans to commence bilateral meetings with jurisdictions on implementation
- NOTED the audience and approval pathway for ATAGI Working Group advice will depend on the product and that the landscape for program related materials needs to be defined
- NOTED consumer perspectives including the need to:
  - expand the stakeholder list and utilise relationships with Primary Health Networks
  - provide clear information, including on TGA processes and priority populations

Action	Responsible officer/s	Progress
Develop a list of products endorsed by the ATAGI COVID-19 Working Group for consideration by the Taskforce re next steps	Secretariat/Taskforce	In progress
Develop a holistic view of work underway through ATAGI and the Taskforce and approval pathways	s47F /Taskforce	In progress
Provide feedback on stakeholders to Secretariat	All members	In progress

### 4. Subgroup 1 update – Priority populations and scenario modelling

Members:

- NOTED a presentation by s47F covering:
  - Preliminary advice on general principles to guide the prioritisation of target populations in a COVID-19 vaccination program
  - Preliminary advice on suitability of the Oxford/AstraZeneca vaccine for possible priority populations

- Modelling requirements for an Australian COVID-19 Vaccine Program
- NOTED the Department is developing two models – Economic cost and Distribution
- DISCUSSED the need for a model with various epidemiological and health outcomes (that links to the two existing models) which requires a distinct and specialist skillset

Action	Responsible officer/s	Progress
Outline the scope of work required to develop a more comprehensive modelling strategy for consideration by the Department	<sup>s47F</sup> and SG1 members with modelling expertise	In progress

## 5. Subgroup 2 update – Program implementation issues

Members:

- NOTED a presentation by <sup>s47F</sup> covering program implementation issues including:
  - Multidose vials
  - Workforce
  - Australian Immunisation Register
- DISCUSSED the importance of clear roles, responsibilities and reporting lines for the Commonwealth, states and territories including better definition of ATAGI and NCIRS roles
- DISCUSSED workforce issues including the need for clarity around development of training

Action	Responsible officer/s	Progress
Develop roles and responsibilities summary with clear workflows and reporting lines	Chairs, Subgroup leads, NCIRS and Taskforce	In progress

## 6. Subgroup 3 update - Vaccine safety, confidence, communication and education

Members:

- NOTED a presentation by Nigel Crawford covering:
  - Education and training
  - Safety
  - Indemnity
  - Evaluation
- NOTED the Commonwealth is undertaking consultations on proposed mandatory reporting to the Australian Immunisation Register (AIR), with a proposed implementation date of 1 March 2021
- AGREED that Subgroup 3 would prepare advice regarding evaluation of a COVID-19 immunisation program

Action	Responsible officer/s	Progress
Raise indemnity issues with Taskforce	Hope Peisley	Raised at Exec meeting on 13/11

## 7. Gaps, key issues and draft recommendations

Members:

- NOTED key issues/recommendations covered in this session included:
  - Need to develop advice on data modelling
  - Workforce training and model of vaccine delivery
  - Clarity in relation to indemnity
  - Incident management strategy (roles and reporting)
  - AIR
  - Communications strategy



- Meetings with vaccine sponsors
- TGA information sharing

#### 8. Next steps

Members thanked NCIRS staff for preparing papers for this session and:

- AGREED on the following priorities for the Working Group:
  - Advice on roles, responsibilities and reporting lines
  - Plan potential incidences and develop incident management strategies
  - Epidemiological modelling
  - Communications including the Department's COVID-19 hub
- AGREED to hold another information sharing session in mid-December and include Aboriginal and Torres Strait Islander vaccination issues on the agenda

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