**NCIC Quarterly Meeting Minutes  
February 9, 2021**

**12:00 pm Opening and NCIC Update**

**Lindsay Capozziello, PharmD, Chair**

**12:05 pm Joint COVID-19 “Node” of the Community Care of North Carolina and NC AHEC**

**Chris Weathington, Director, Practice Support, NC AHEC**

* Keeping Kids Well Campaign Update
  + COVID-19 has led to a measurable decrease in pediatric preventative care across all populations. Disparities in rates across populations seen historically persist, especially with Latinx and Black children.
  + Under-utilization of well-child visits are missed opportunities to identify physical, developmental, and behavioral concerns – many of which can be managed or treated.
  + Missed vaccinations can eventually lead to potential community outbreaks of preventable disease during a busy COVID-19 and influenza season. We don’t want another pandemic on top of a pandemic.
  + Need for AHEC and CCNC to help practices reduce care alerts or overdue well child checks to pre-COVID19 levels via 1:1 practice support assistance, webinars, media communications, printed resources, etc.
  + CCNC care management has been reaching out to parents and families with tailored messaging to Latinx and African-American families.
  + Local Health Departments are deploying care managers with active outreach to children in care management who are missing immunizations and well visits.
* COVID-19 vaccine administration assistance
  + AHEC and CCNC have partnered to also provide practice support assistance with COVID-19 vaccine administration. Practice support coaches are also able to assist with questions, clinical workflow guidance, and collaborate with the CVMS helpdesk to resolve issues.
  + AHEC and CCNC have a co-branded website with resources at [Coronavirus (COVID-19) Information | Community Care of North Carolina (communitycarenc.org)](https://www.communitycarenc.org/newsroom/coronavirus-covid-19-information).

**12:20 pm HPV Task Force Update**

**Scott Coleman, Member, HPV Task Force**

* HPV task force intends to apply for Merck grant in collaboration with NC Oral Health Collaborative. Project will focus on making online training related to HPV vaccination available for dentists.

**12:30 pm Immunization Branch Update**

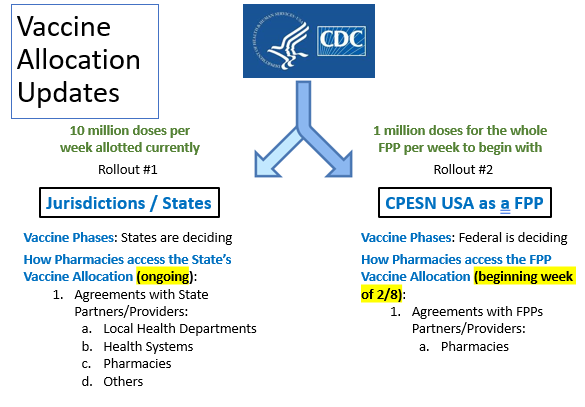
**Scott Coleman, Communications Specialist**

* North Carolina DHHS launched a new flu vaccination campaign for 2020-21 to encourage flu vaccination and educate North Carolinians about the health risks associated with flu- “The flu vaccine. Get it. Got it. Good.” Available at [flu.ncdhhs.gov/materials](https://flu.ncdhhs.gov/materials.htm). Results from campaign will be available shortly.
* Updated meningococcal (MCV4) booster requirement also included on new 12th grade N.C. Back to School Requirements fact sheet, as well. All updated grade-specific fact sheets, in English and Spanish, available at: <https://www.immunize.nc.gov/family/nc_immnz_requirements.htm>
* COVID-19 Communications Toolkit.
  + You can help people in your community find their spot and take their shot!
  + Resources are available at: <https://covid19.ncdhhs.gov/vaccines/covid-19-vaccine-communications-toolkit>

**12:40 pm The NC|Mutual CPESN Network Role in Community Immunizations and COVID-19 Activities**

**Christine Heath, PharmD, interim NC Mutual CPESN Network Facilitator**

* Community Pharmacy Enhanced Service Network (CPESN)’s goal is to reach as many patients in the community as possible.
* Currently, there are 282 CPESN Pharmacies in North Carolina. 209 CPESN Pharmacies in North Carolina selected CPESN USA as their Federal Pharmacy Partner to receive FPP allocation of the COVID-19 vaccine.
  + When taking the Social Vulnerability Index (SVI) into consideration, North Carolina has 143 CPESN Pharmacies or 68% of the CPESN Pharmacies that are above the 50th percentile of the SVI.
  + CPESN Pharmacies in North Carolina are ready and awaiting vaccine to be a solution in providing vaccines to those most vulnerable populations.
* More information and COVID-19 vaccine resources, learnings, and best practices are available at <https://www.covidbestpractices.com/vaccines>



**1:15 pm COVID-19 Vaccine Development**

**Tim Mullenix, PharmD, Vaccines Medical Director, Pfizer**

* Pfizer’s mRNA COVID-19 vaccine is currently authorized for emergency use but is not yet approved by the FDA. Pivotal phase 2/3 clinical trial is currently ongoing, and Pfizer anticipates filing for FDA approval at the end of March or beginning of April 2021
* Pfizer has fully enrolled 12-15-year-old patient group in ongoing trial and plans to conduct additional clinical trials in children and pregnant women in future
* Vaccination is important to achieve herd immunity to COVID-19. A significant threshold of herd immunity to SARS-COV-2 will be required to disrupt sustained viral transmission; this may be achieved through natural infection or mass vaccination. Natural immunity comes with the cost of significant morbidity and mortality. Assuming a uniform herd immunity threshold of 67% (R0=3) and an infection fatality rate of 0.6%, the absolute number of expected COVID-19 deaths across the globe would exceed 30 million people without vaccine intervention.
* Multiple potential vaccine platforms for COVID-19 vaccines, including inactivated, live-attenuated, protein-based, viral-vectored, DNA, and RNA.
* Spike protein is surface-exposed and mediates entry into host cells; therefore, it represents an attractive target for antibody-mediated neutralization and was the focus of vaccine design
* Pandemic vaccine development requires a fundamental shift in clinical development and innovative regulatory processes, allowing for faster authorization/approval of vaccines. Novel vaccine technologies also allow for acceleration of vaccine development

**1:55 pm Closing**

**Lindsay Capozziello, PharmD, Chair**

* **Please Save the Dates for Upcoming NCIC Quarterly Meetings:**
  + May 11, 2021
  + August 10, 2021
  + November 9, 2021

**2:00 pm Adjourn**