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## Priorities for the National Vaccine Plan

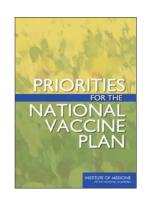
As a fundamental component of medical care and of public health, vaccinations prevent the spread of infectious and potentially deadly diseases. However, there are many complexities involved in the process of making and providing vaccines, from research and development of new vaccines to the financing of immunization services. The National Vaccine Plan was required by the 1986 National Childhood Vaccine Injury Act to facilitate coordination of the vaccine enterprise across the United States. The National Vaccine Plan is centered on five goals:

- Goal 1: Develop new and improved vaccines
- Goal 2: Enhance the safety of vaccines and vaccination practices
- Goal 3: Support informed vaccine decision-making by the public, providers, and policy makers
- Goal 4: Ensure a stable supply of recommended vaccines, and achieve better use of existing vaccines to prevent disease, disability, and death in the United States
- Goal 5: Increase global prevention of death and disease through safe and effective vaccination.

In 2008, the National Vaccine Program Office (NVPO), which is located in the Office of the Assistant Secretary for Health in the Department of Health and Human Services (HHS), asked the Institute of Medicine (IOM) to convene a committee to hold workshops with national expert stakeholders in medicine, public health, and vaccinology. The committee was charged with reviewing a draft update of the National Vaccine Plan and identifying priority actions under each of the five goals that NVPO and its partners can take when finalizing and implementing the Plan. The committee found that although the National Vaccine Program has had some great successes and can provide examples of excellent coordination, neither the NVPO nor the Plan have functioned as intended in the 1986 legislation. Overall, the committee concludes that because vaccines are considered a major public health intervention that involves multiple government agencies and stakeholders (including health care providers, patients, researchers, health departments, and vaccine manufacturers), an effective coordinating entity is required. Therefore, the committee recommends the Secretary of HHS demonstrate support for the National Vaccine Plan by declaring its primacy as the strategic planning tool applicable to all relevant federal agencies and by allocating the resources necessary to assure robust planning and implementation.

### **VACCINE DEVELOPMENT**

Currently, there is no process for identifying priority vaccines that involves relevant stakeholders. The committee recommends that the National Vaccine Plan incorporate a process for prioritizing new and improved vaccine candidates in order to



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accelerate their development, making it easier to identify the public health need for a given vaccine. When assessing the current National Vaccine Plan draft, the committee noted the plan implied a distinction that is no longer useful between the "traditional" vaccines intended to prevent infectious disease and other types of vaccines (such as therapeutic vaccines). Therefore, the committee recommends that future iterations of the National Vaccine Plan include classes of vaccines (such as therapeutic vaccines and vaccines against chronic diseases) beyond those stated in the current statute (vaccines intended to prevent infectious disease).

## **VACCINE SAFETY**

Since vaccines are administered to large groups of healthy people, safety is of utmost concern. A robust system is in place to address safety and to identify emerging safety concerns through passive and active surveillance. However, currently there is no prioritized national vaccine safety research agenda to guide and coordinate the efforts of all federal agencies (e.g., NIH) and stakeholders. The committee recommends that the National Vaccine Plan create the basis for a prioritized national vaccine safety research agenda that spans all federal agencies and includes all stakeholders who conduct research related to vaccine safety.

#### **COMMUNICATION**

An effective national plan should include a process for informing the public about new vaccines, according to the committee. Since the universe of vaccine information is large and complex, and since much of the public and some professionals have a poor understanding of many aspects of the system, an overall national strategy for communication is needed. The committee recommends that the National Vaccine Plan incorporate the development of a national communication strategy on vaccines and immunization, targeting both the public and health care professionals. Such a strategy should:

- Reflect current research
- Describe how relevant government agencies will coordinate and delineate primary responsibility for specific components and audiences
- Anticipate, plan, and support rapid response to emerging high-profile scientific, safety, policy, or legal developments
- Provide the right information to the right individual(s) or group(s) in the most appropriate manner, with attention to literacy, linguistics, and culture of the target audience(s)
- Receive adequate support of dedicated human and financial resources

## **VACCINE USE AND SUPPLY**

As with other goals in the draft plan, vaccine supply and use issues are intertwined with safety, research and development, and communication matters. The committee suggests that one way to remedy these issues is to develop strategies to assure a stable supply of vaccines for both routine use and for public health preparedness. The committee also recommends that the National Vaccine Plan include the development of a strategy to eliminate financial barriers, such as disincentives for providers

to offer immunization services. Given the importance placed on the national adoption of certified health information technology and electronic health records, the committee recommends that the National Vaccine Plan ensure active involvement of NVPO and partners in the planning and implementation of the national health information initiative. This involvement should include assuring that the definition of "meaningful use" of electronic health records considers immunization services and reporting. In addition, the Plan should incorporate comprehensive assessment of the outcomes of national health reform and a strategy for addressing their implications for the nation's vaccine and immunization priorities.

## **GLOBAL VACCINE ISSUES**

While it may seem unusual that a National Vaccine Plan intended for the United States includes objectives for vaccination programs in other countries, global vaccine availability and immunization have implications for the United States. Low- and-middle income countries are more affected than the U.S. by such issues as not being able to pay for vaccines, inadequate infrastructure, and a lack of providers to administer vaccines. The committee recommends that the National Vaccine Plan call for U.S. federal agencies to support immunization capacity-building in an effort to implement new vaccines in low to middle income countries. U.S. federal agencies also should provide the expertise and financial resources necessary to incorporate new vaccines, strengthen immunization infrastructure, and achieve higher levels of vaccination.

## **CONCLUSION**

Prior to the November 2008 draft, the National Vaccine Plan had not been updated since 1994. Since then, a number of changes have occurred in the vaccine enterprise. There are many new vaccines available, many diseases have become less visible thanks to successful vaccination programs, and the ways by which Americans communicate and obtain health information have evolved. Americans rely on a health care system that includes preventive measures such as immunization services and they expect to have full access to relevant health information. An effective National Vaccine Plan can help ensure rapid detection of and accurate communication about potential vaccine-related adverse events, and coordinate government agencies' and stakeholders' efforts to prevent diseases.

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#### FOR MORE INFORMATION . . .

Copies of *Priorities for the National Vaccine Plan* are available from the National Academies Press, 500 Fifth Street, N.W., Lockbox 285, Washington, DC 20055; (800) 624-6242 or (202) 334-3313 (in the Washington metropolitan area); Internet, www.nap.edu. The full text of this report is available at www.nap.edu.

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