

Memorandum

Decision to increase the Pfizer/BioNTech COVID-19 vaccine interval to six weeks

Date due to MO: 6 August 2021 **Action required by:** 6 August 2021

Security level: IN CONFIDENCE **Health Report number:** 20211788

To: Vaccine Ministers

Contact for telephone discussion

Name	Position	Telephone
Dr Ashley Bloomfield	Director General of Health	§ 9(2)(a)

Action for Private Secretaries

N/A

Date dispatched to MO:

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Decision to increase the Pfizer/BioNTech COVID-19 vaccine interval to six weeks

Purpose of report

1. This memo seeks your approval to increase the Pfizer/BioNTech COVID-19 vaccine interval from three to six weeks for the majority of people.

Background and context

2. In February 2021, Medsafe approved the use of the Pfizer/BioNTech COVID-19 vaccine in New Zealand. This approval required the vaccine to be administered in two doses with a minimum duration of 21 days between each dose.
3. The vaccination roll-out philosophy adopted by the programme to date has been to fully vaccinate individuals as soon as possible, once they become eligible, within the regulatory approval set by Medsafe. This approach was underpinned by the sequencing framework which sought to achieve high efficacy for individuals that were most vulnerable, or most likely to contract COVID-19 due to their occupations, particularly within supply constraints early in the rollout.
4. The Director-General of Health recently requested an update from CV TAG on the emerging information regarding a longer interval between doses for everyone (attached), as part of the original recommendation for a longer interval for people under 30 years of age based on risk of myocarditis. The opportunity to shift approach was initially signalled to Vaccine Ministers on Friday 31 August 2021.

Rationale for the change

5. Internationally the COVID-19 pandemic remains a huge challenge. This has been particularly evident in the recent outbreaks and community transmission in Australia and the spread of the Delta variant across the world.
6. Many countries have a longer interval than three weeks for the Pfizer/BioNTech COVID-19 vaccine as standard. This includes the UK, Canada, and several European countries, with intervals ranging from around eight to 16 weeks.
7. Internationally, the initial reasons for having a longer dose interval were:
 - a. practical (e.g. covering more of population with at least one dose quickly in an active outbreak); and
 - b. scientific (e.g. prior scientific consensus and basic principles of vaccinology and immunology that, in general, intervals longer than three weeks are typical between the prime and booster doses in order to maximise the immune response).
8. Given the emergence of Delta, and potentially other variants, we consider there is merit in increasing the recommended dose interval. This would allow more people to receive their first dose sooner, lowering the population risk in the case of an outbreak and community transmission. In addition, we consider this would provide a potential upside

of potentially stronger immune response based on emerging evidence, with no negative impact on safety across the population.

9. As a result of new and emerging information, the Ministry recommends increasing the standard interval between doses from current three week minimum to a six week minimum for most consumers. The increased interval advice is consistent with CTAG advice re. myocarditis associated in younger people.
10. No additional Medsafe approval is required in order to implement the recommended change.

Implementation approach

11. In order to increase the interval between vaccinations the following changes would be implemented:
 - a. a national communications campaign to reinforce the rationale of the change and reassure consumers who have been vaccinated under the current settings that they are still appropriately protected against COVID-19. This would be released in line with any public announcement
 - b. a technology change to the booking system to provide second appointments at a minimum of six-week interval, unless the consumer chooses to be vaccinated sooner (but no less than 21 days) or there is a clear reason for it to be shorter eg. Cancer patients ahead of treatment, border workers (to ensure they are fully protected as soon as possible)
 - c. enable the national call centre support to respond to questions and assist consumers who wish to alter their existing booking to increase the duration between their current appointments
 - d. continuing to work with DHBs to ensure their forward capacity supports the increased interval between vaccinations
 - e. an update to operational procedures and service standards to align these documents to the change in approach.

Timeframe for implementation

12. The earliest that the technology change could be implemented and released is Wednesday 11 August. It is therefore recommended that the change be implemented as effective from this date.
13. Once the technology has been implemented, it is expected that most consumers would book new appointments with at least six weeks between the first and second dose.
14. Individuals with existing bookings would not be automatically rescheduled to increase the interval between doses. Both the national booking system and the national call centre would enable individuals to reschedule their second appointment should they wish to do so.
15. A number of primary care providers are using their own practice management systems to manage bookings. We will work with primary care providers to ensure a consistent approach is implemented across providers in relation to the change in dose interval.

Impacts of the change

16. There are several issues arising from the implementation of this change that need to be acknowledged prior to implementing this approach.

Consumer Confidence in the Programme

- a. Increasing the duration between vaccinations for all future bookings may lead to questions about vaccine effectiveness for consumers who have either had both of their vaccines or are booked with a duration of less than six weeks between their vaccinations.
- b. Effective public communications will be needed to inform fully vaccinated people who attend their existing appointments, that they are still appropriately protected against COVID-19. This will also mitigate the risk of this change generating hesitancy for un-vaccinated people.

Consumer experience

- c. Individuals who are currently booked to receive their vaccinations within the newly recommended interval would have the opportunity to rebook their second appointment should they choose to do so. People would be encouraged to make these changes online, or by ringing the national call centre.
- d. Those individuals opting for vaccination at their primary care provider and booking on those providers local systems would also have the opportunity to rebook their second appointment directly with their provider if they choose to do so.
- e. It is difficult to predict the number of consumers who may want to change their existing booking, or the method that they will use to achieve this, as we have no previous relevant use cases to reference.
- f. To ensure that consumers can be assisted in changing their bookings, the national call centre would scale to anticipate a higher volume of calls when the change is implemented. As it is difficult to assess the magnitude of this demand, a high initial response may result in extended call times. This would be closely monitored.

DHBs production plans

- g. If a high number of existing appointments are moved into the future, this will result in a lower level of bookings for the weeks immediately after the announcement of the change. A degree of loss of productivity could occur, if the capacity created by consumers moving their second appointment into the future is not fully replaced by a new cohort wishing to book their first appointment.
- h. To mitigate against unused capacity, it is proposed that the next Group 4 age cohort (50–54 years) would also be released on Wednesday 11 August. DHBs would also be encouraged to accept walk-ins to further minimise this impact.

Vaccination capacity

- i. To support the longer duration between vaccinations, the Ministry is working with DHBs to ensure that enough vaccination capacity is available to allow consumers to select an appointment for both vaccinations. Should this not occur, consumers would potentially become frustrated and disengaged due to not being able to book both appointments, when availability for their first appointment existed.

Recommendations

It is recommended that you:

1.	note	The rationale for increasing the standard interval between Pfizer/BioNTech COVID-19 vaccination doses for the vaccination programme from three weeks to six weeks.	
2.	note	That an effective communications approach is critical to supporting this change and to maintaining public confidence in the COVID-19 vaccination and immunisation programme.	
3.	note	The recommended approach to implementing the six-week interval between vaccinations, including leaving all existing bookings unchanged to avoid an immediate slow-down of the programme (can be changed by individual consumer).	
4.	note	The potential impacts resulting from the implementation of this change and proposed mitigations.	
5.	agree	To implement a change to the standard interval between Pfizer/BioNTech COVID-19 vaccine doses for the vaccination programme from three to six weeks for all people booking a vaccination from Wednesday 11 of August 2021.	Yes/No



Dr Ashley Bloomfield

Te Tumu Whakarae mō te Hauora

Director-General of Health

Date: 5 August 2021