
SEPTEMBER, 2003

**FINAL SUMMARY REPORT
AND PROPOSAL FOR
THE VACCINE POLICY ANALYSIS
COLLABORATIVE (VPACE)**



**The Wingspread Public Engagement
Planning Group**

The Keystone Center for Science and Public Policy serves as a 3rd party neutral facilitator for the Wingspread Public Engagement Planning Group. Please contact Mary Davis Hamlin of The Keystone Center with any questions or comments regarding this report. Ms. Hamlin can be reached at 970-513-5802, or by e-mail at mhamlin@keystone.org.

Background

A conference was convened in the summer of 2002 at Wingspread, the Frank Lloyd Wright home converted into a conference facility in Racine, Wisconsin. The Conference was jointly sponsored by the Johnson Foundation in Wisconsin and by the U.S. Public Health Service Agencies working through the National Vaccine Program Office (NVPO). Dr. Roger Bernier, Associate Director for Science, National Immunization Program (NIP), Centers for Disease Control and Prevention (CDC), helped to convene the group as part of a special assignment from the National Immunization Program. The assignment was to explore whether and how to enhance public engagement in government decision-making on vaccine policy issues. The National Vaccine Program Office contracted with The Keystone Center to provide neutral convening, facilitation and process guidance to the Wingspread group.

The Proposal for the Vaccine Policy Analysis Collaborative (VPACE), a three-year demonstration project, details recommendations regarding a specific type of public engagement - building the capacity to collaborate.

The convening process included scores of phone calls and numerous face-to-face meetings to identify both the key stakeholder groups and their credible representatives while also considering balance, diversity, inclusiveness and size.

The resulting Wingspread Public Engagement Planning Group (Planning Group) was comprised of approximately 40 representatives of key vaccine stakeholder groups including: health professionals, government agencies, industry, and representatives from three publics - the supportive public, the critical public, and the neutral public. Also in attendance were representatives from academia, minority groups, and public engagement consultants.

The question facing the Planning Group was whether or not increasing public engagement in decision-making about vaccines was a real need, and if so, how to best address this need. The Planning Group undertook a collaborative process (codified in their jointly developed and ratified "Protocols") to examine the issue. The Group concluded, at least tentatively at its first meeting, that increasing public engagement was indeed worth exploring further. Subsequently, a smaller subset of the Planning Group was appointed by The Keystone Center to serve as a Steering Committee in further exploring public engagement. The purpose of the Steering Committee was to further develop the preliminary ideas presented at Wingspread into a specific proposal for increasing public engagement. This proposal would be subject to final approval by the full Planning Group at a second plenary session conference.

During the second and final plenary session in Denver in May 2003, the Wingspread Public Engagement Planning Group considered the recommendations of its Steering Committee and finalized its best judgment on how to enhance public engagement. The judgment is captured in this proposal to create The Vaccine Policy Analysis Collaborative (VPACE), a three-year demonstration project designed to conduct dialogue and collaborative deliberations on selected vaccine issues with representative segments of the general public and stakeholder groups. The essential elements of the proposal are described below as well as pertinent background information and specifics about the Planning Group's rationale and approach. Not all members present at the first Wingspread Conference could attend the second Denver conference. Some withdrew voluntarily from the collaborative planning process because of concerns about the process or the substance of deliberations. Other new participants were added as replacements whenever feasible.

Types of Public Engagement

Public Engagement as a concept and activity is not new to government or to the vaccine community. For years the agencies involved in vaccine decision-making have employed public engagement mechanisms such as public comment periods at meetings or focus groups to support their work. The Types of Public Engagement fall on a continuum defined by the degree of involvement, which the public has or is expected to have in the decision-making. This involvement ranges from a minimum degree when the purpose of the engagement is exclusively to inform the public to an increased degree when the type of public engagement involves more collaborative initiatives. Examples of mechanisms of public engagement and criteria for use of each of the mechanisms in different circumstances are listed on page 5.



Type I - Informing the Public: One-way communication

Press Releases

When to use in decision-making: routine, little controversy, urgent, primarily technical/ without divergent values

Informational Materials: Ranging from Web Pages to Pamphlets

Administrative Announcements and Other Presentations

Type II - Soliciting Input from the Public (often one event): Two-way Interaction

Observer Comment Periods in Meetings

When to use in decision-making: legal requirement, fairly routine, information is easy to understand and disseminate, manageable level of controversy, scoping of concerns sufficient to understand/ define and solve problem, primarily technical/ without divergent values.

Public Hearings/Meetings

Polls/Focus Groups

Workshops

Deliberative Polling

Type III - Collaborating with the Public (generally multi-meeting): Ongoing two-way interaction

Policy Dialogues

When to use in decision-making: complex and important issues with long-term consequences; unclear or competing authorities; resource and technical expertise alone will not solve the problem; the problems are driven by values and require much consideration of opinion, beliefs, and convictions; high level of controversy with active and mobilized groups of competing interests; parties are not communicating or communicating at a distance or through extreme positions.

Advisory Groups

Stakeholder Forums

Regulatory Negotiations

Study Circles

The Wingspread Public Engagement Planning Group's Specific Focus: Collaborating with the Public

Public engagement activities undertaken to date by agencies involved in vaccine policy-making have generally fallen within the first two categories, Type I and Type II. However, decision-makers in organizations ranging from government agencies to non-governmental organizations (NGO's) are facing issues that can be effectively and efficiently addressed only by engaging stakeholders and the larger public in collaborative deliberations (Type III public engagement). Currently, the federal agencies responsible for vaccine related topics lack the mechanisms and capacity that are needed to collaborate with the public in order to address Type III issues. The Planning Group focused its efforts on how to enhance the capacity to collaborate with the public in order to address pertinent Type III issues.

Why Is Public Engagement and Building Capacity to Collaborate Important?

The ultimate purpose of any public engagement effort is to help produce well informed, sound, and supportable decisions. The Planning Group stated that creating enhanced capacity for collaboration in the vaccine policy area is essential to ensuring the continuous improvement of the national public health vaccine program. Enhanced collaborative capacity will:

- ♦ Facilitate honest communication among diverse interests;
- ♦ Increase understanding of the full range of the public's interests;
- ♦ Provide the opportunity to constructively wrestle with the implications of the limitations of science and questions involving competing values and trade-offs;
- ♦ Help to build trust and constructive relationships among stakeholders;
- ♦ Help to provide useful input into official policy decisions; and
- ♦ Reduce the need to use more costly adversarial forums.

THE VACCINE POLICY ANALYSIS COLLABORATIVE (VPACE): A PROPOSAL

The key elements of the VPACE Design Proposal are diagrammed below and explained on the pages that follow. The VPACE Proposal captures the results of the Wingspread Planning Group's thinking on what is the soundest and most supportable design for building collaborative public engagement capacity in the vaccine policy making arena. In its deliberations, the Planning Group considered the following topics:

- ◆ The current type of public engagement activities undertaken by government agencies;
- ◆ The need and desire for enhancing collaborative public engagement to address Type III issues;
- ◆ The participants' core interests and concerns related to enhancing public engagement;
- ◆ Principles of good public engagement and state of the art examples; and
- ◆ The feasibility of various design options to enhance collaborative public engagement.

Key Elements of the Design Proposal

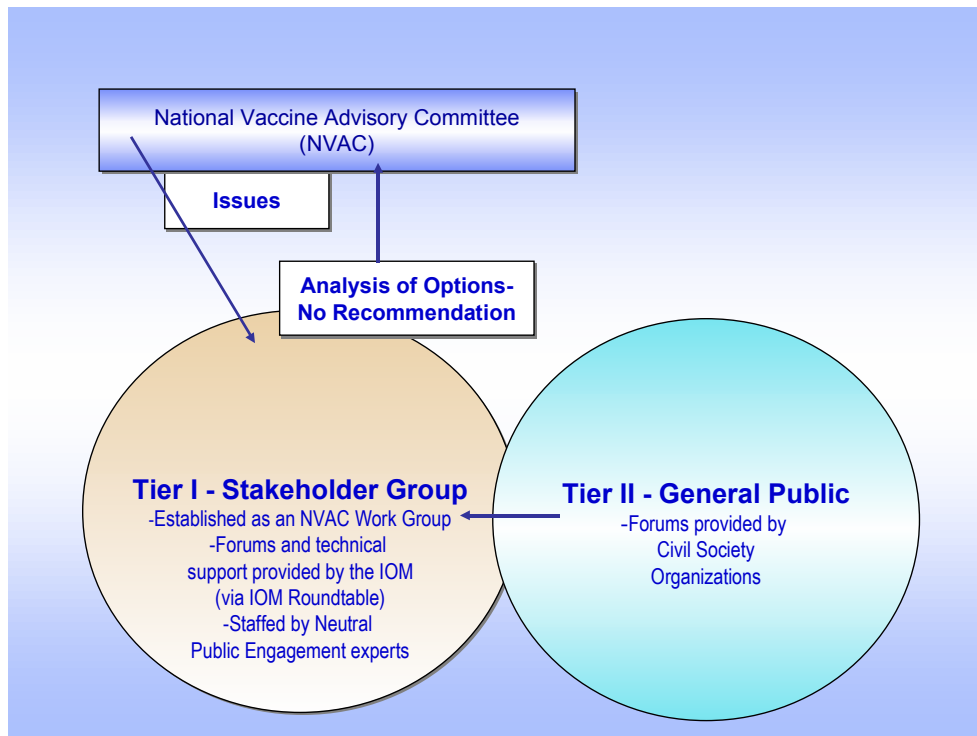


Figure 1, VPACE - General Concept Three - Year Demonstration Project

What Would VPACE Do?

VPACE will conduct dialogue and collaborative deliberations with broad segments of the general and stakeholder publics designed to provide rich and useful analyses on selected pending decisions about vaccines forwarded to VPACE by one or more Immunization Advisory Committees or federal agencies. The primary purpose of these activities is to help inform the decision-making of existing policy-makers in immunization.

Who Would Be A Part Of VPACE?

As shown in Figure 1, the Planning Group proposes two tiers of participation. Tier I will be comprised of approximately 30 representatives from six key stakeholder groups in immunization. Participation on the Tier I Stakeholder Group will include each major interest group (for example, federal agencies, health professional organizations, vaccine companies, and the supportive, critical and neutral publics). The Stakeholder Group, once convened, will design and initiate the larger scale Tier II consultations with representative groups of citizens from the general public.

What Kinds Of Questions Would VPACE Work On?

Pertinent questions or decisions to be forwarded to VPACE for analysis are those in which significant, diverse and competing values must be weighed in addition to technical considerations, such as those with the characteristics listed on page 5, under Type III issues (for example: Should philosophical exemptions to school laws be available in all states?).



How Would VPACE Be Linked With Decision-makers?

To be effective, VPACE needs to be linked to the existing government structures for making vaccine related decisions. The Planning Group proposes that VPACE be created as the Work Group of an existing immunization advisory committee. The National Vaccine Advisory Committee (NVAC) has a mission statement which aligns most closely with public engagement and therefore NVAC is proposed as the most suitable vehicle to utilize in linking VPACE with decision-makers.

How Can VPACE Provide the Necessary Independence and Safe Harbor for Real Collaboration?

One of the important principles for conducting effective public engagement and for producing objective, non-partisan policy analyses is provision for independence in conducting the work without the undue influence of government or any other group. This supports a “safe harbor” that allows for honest communication and joint fact-finding. Several features of the VPACE Proposal are crucial to this:

- ♦ The NVAC Work Group will collaborate with The Institute of Medicine (IOM). The neutrality, credibility, experience, and resources of the IOM which can be brought to the VPACE will help to ensure its success. NVAC will create a Work Group and will ask the IOM to conduct the dialogue and deliberative sessions (via an IOM Roundtable). The NVAC Work Group will write its report based on the deliberations taking place in these sessions.
- ♦ A neutral process expert will be hired to convene and assist with the report writing for the NVAC Workgroup; and
- ♦ Public engagement experts from civil society organizations such as America Speaks, the Study Circles Resource Center, and/or others will provide technical assistance to conduct the larger deliberations involving the general public.



What Work Outputs Would VPACE Produce?

VPACE will provide to the NVAC, or other requesting committee, a report that includes a rich and deep analysis on the pending decision assigned to VPACE. The report will describe options with a discussion of the pro and con considerations. There will be no recommendations from VPACE, nor any statement about preferred options. Again, the purpose of VPACE’s effort is to inform the decision-making of other groups and not to compete with or usurp any existing advisory committee functions. The role of VPACE will be to serve as a conduit for meaningful and useable public input, which supplements and adds value to the work of existing committees.

Funding

Support for the planning phase of this project was obtained from the National Immunization Program, the National Vaccine Program Office, representing U.S. Public Health Service Agencies, and the Johnson Foundation in Racine, Wisconsin.

For implementation funding, this VPACE proposal calls for the CDC Foundation to serve as the source of funding support since the Foundation is able, if it agrees to take on the proposal, to help raise funds and/or administer the VPACE project as needed. In addition, the IOM is able to help raise funds and add these to any existing funds if the IOM agrees to collaborate in creating the Roundtable and working with the NVAC Workgroup, and if the IOM is requested to do so by the NVAC, or other initiating sponsor of VPACE.

Current Status As Of July 2003

Representatives of the Wingspread Planning Group presented the VPACE proposal at the June 2003 meetings of the NVAC and the Advisory Committee on Immunization Practices (ACIP).

NVAC is currently creating a group to assess the VPACE proposal in greater depth and will ask the group to make a recommendation to the full Committee on whether or not to support implementation of VPACE through the proposed combined NVAC Work Group/IOM Roundtable mechanisms.

Suggestions for how to move forward with funding and implementation are welcome. Please send to Mary Davis Hamlin at mhamlin@keystone.org or to Dr. Bernier at rbernier@cdc.gov.

For More Detailed Information

A complete report is available that includes:

- ◆ Meeting Summaries
 - ◆ August 2002 Wingspread Plenary;
 - ◆ November 2002 Steering Committee;
 - ◆ May 2003 Denver Plenary
- ◆ Planning Group's Protocols
- ◆ Minority Report
- ◆ Participant Lists (Planning Group and Steering Committee)
- ◆ Key Background Materials on Public Engagement

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* This report captures the best advice of the majority of the Planning Group participants. However, not all participants could or were willing to attend both plenary sessions and not all participants join in the support of this proposal.