

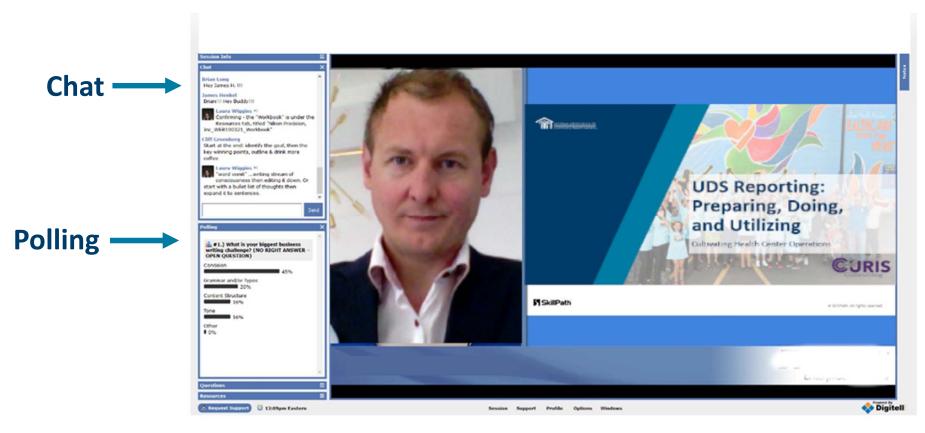
Moving the Needle:

The Value of the Pharmacy Team in Immunizing

Alyssa Puia, PharmD, RPh | Clinical Pharmacist Lori Lewicki, RPh | Chief Pharmacy Officer Holyoke Health Center, Inc. 230 Maple Street, Holyoke, MA 01040

Improving the health of our patients through affordable, quality health care & comprehensive community based programs

Audience Participation







Live Content Slide

When playing as a slideshow, this slide will display live content

Poll: We want to know who is attending this session! Please let us know what role you play at your health center/organization





Introduction Annual Ann

MEDICAL, DENTAL & PHARMACY CARE FOR OVER 50 YEARS



Holyoke, Massachusetts



- Located in Western Mass
- Fun facts:
 - Birthplace of Volleyball
 - Paper City
- Population:
 - 40,0000 people
 - Largely Hispanic/Latino (51.2%)
 - Mostly Puerto Rican



Holyoke Health Center, Inc.

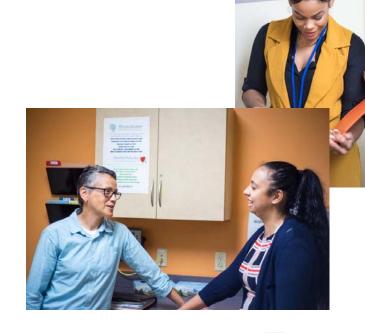


- Located in downtown Holyoke
- Second location in Chicopee, MA 15 min. commute
- Serves 22,000 patients
- Mostly underserved | 76% Medicaid
- Holyoke In-House Pharmacy established: January 8, 2007
- Chicopee In-House Pharmacy established: November 30, 2009



Demographics

- Primary patient population:
 - Low-income, underinsured
 - 65% Hispanic/Latino
 - 72% are below 200% Federal Poverty Level
 - 55% MassHealth/ Health Safety Net
 - 54% Spanish-speaking
- 52% Capture rate





Pharmacy Services

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Retail Pharmacy

Fill an average of 1200 prescriptions daily

■ Holyoke: Monday - Friday (8am - 6pm)

Chicopee: Monday - Friday (8am - 4:30pm)

Staff

- 10 Staff Pharmacists
- 4 Clinical Pharmacists
- 3 Pharmacy Residents





Medication Adherence Packaging



- 7-day blister cards
- Morning, Noon, Evening, Bedtime slots
- Fill 30 days monthly
- Meet with Clinical Pharmacist
 - To initiate \rightarrow 1-2 mo \rightarrow yearly



Clinical Pharmacy Services

Transitions-of-care (TOC)

Patients recently discharged from inpatient hospitalization

Telehealth visit with a pharmacist prior to primary care visit

Pharmacist note posted in EHR for provider

Summary of medication changes, etc.





Clinical Pharmacy Services

- Medication Therapy Management (MTM)
 - In-person visit with patient to review medication use

Note summarizing problems/recommendations posted in EHR

- Collaborative Practice Agreement (CPA)
 - Hypertension
 - Diabetes



Learning Programs

- Pharmacy students
 - Five local colleges of pharmacy
 - One on-site clinical pharmacist (faculty)
- Pharmacy residents
 - 3 PGY-1 positions
 - Rotation blocks encompassing all pharmacy services
 - Integral part of immunization program











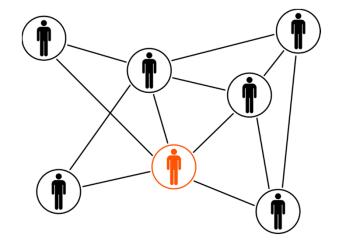
Immunization Program

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Utility of Pharmacist-Led Programs

- Revenue generating
 - On average, \$22 per immunization
- Integrates with MTM
 - Workup screening for eligible vaccinations
 - In visit vaccines offered/administered
- Reduces provider burden
 - Patients can be directed to pharmacy
- Increases patient access





Pharmacist-Led Vaccination at HHC



- Initiated in December 2018
 - Standing order for all adult vaccines
 - In accordance with CDC vaccine schedule
- All pharmacists on staff are certified immunizers*
 - Completion of a certificate course
 - CPR certified

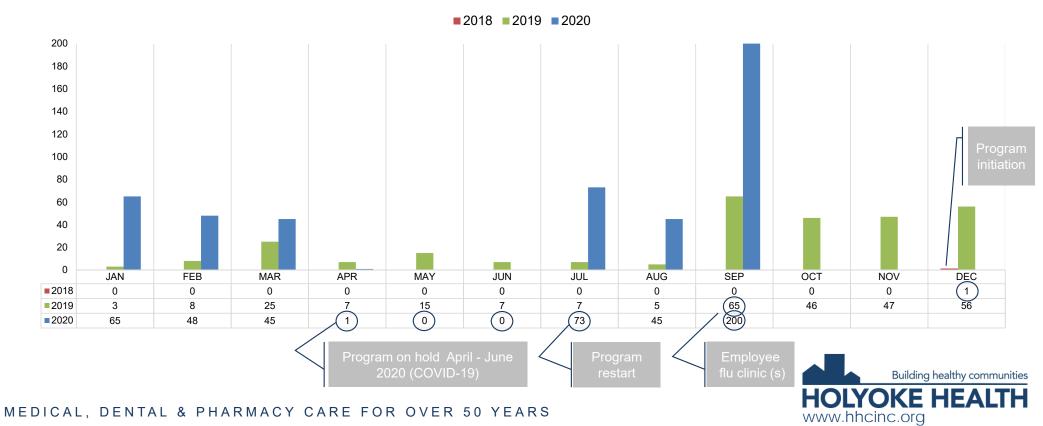
*constitutes certified immunizer status in the state of MA, check with your Board of Pharmacy for state-specific requirements

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HHC Program Growth

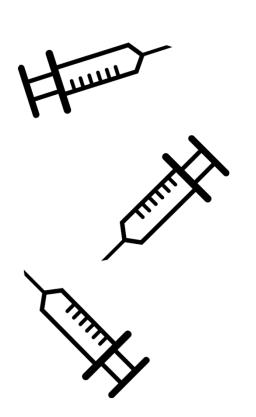
IMMUNIZATIONS ADMINISTERED-HHC



Immunization Workflow

1	Clerk	Alert immunizing pharmacist
2	CHW	Complete intake questionnaire
3	Pharmacist	Data entry
4	Technician	Prescription processing
5	Pharmacist	Quality assurance
6	Clerk	Complete prescription sale
7	Immunizer	Vaccine administration & documentation





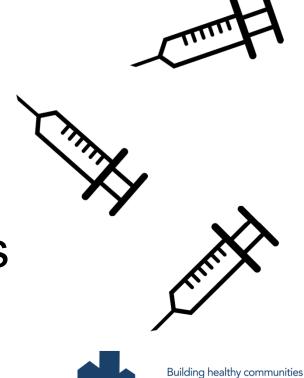
Immunizers

Standing Orders

Documentation

Space & Supplies

Stock & Storage



www.hhcinc.org

KE HEALTH

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Immunizers

- Are your pharmacists certified?
 - State regulations vary
 - Most new-graduates complete certification
- Does your state allow pharmacy interns or pharmacy technicians to administer vaccines?





Standing Orders

- For each vaccine offered:
 - Target population (age, etc.)
 - Screening for contraindications
 - Administration
 - Documentation
 - Management of emergencies
 - Reporting of adverse events

	413	3-420-2200	
Name:	Date of Birth:		
Address:		Date:	
	i: To be administered intramuscularly by immunizing pharmacist Check for high dose vaccine (≥65 years of age) y: #1 syringe		

Templates for all routinely recommended vaccines are available from the Immunization Action Coalition (www.immunize.org/standing-orders)





Documentation

- Intake Questionnaire
 - Screening for contraindications
 - Information for:
 - Documentation in FHR
 - Reporting to state immunization information system (IIS)
- Procedures for documentation
 - Included in workflow



Space & Supplies

- Where will vaccination occur?
- Ensure supplies are on hand:
 - Syringes
 - Needles
 - Gloves
 - Bandages
 - Emergency meds

- Alcohol pads
- Gauze
- Sharps & Biohazard disposal containers





Stock & Storage

- Which vaccines will you stock?
 - Standing orders
 - Preference
- Storage
 - Vaccine fridge
 - Temperature monitoring system





Vaccinating during COVID-19

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Additional Screening

	Vaccine / COVID-19 Screenia	ng:					
1.	1. Have you had any of the following symptoms in the past 2-14 days?						
		No	Yes				
	Fever or chills						
	Cough						
	Shortness of breath or difficulty breathing						
	Fatigue						
	Muscle or body aches						
	Headache						
	New loss of taste or smell Sore throat						
	Congestion or runny nose						
	Nausea or vomiting Diarrhea						
	Diarrilea						
2.	Are you or anyone in your home diagnosed with or being	monitored fo	or COVID-19?				
	Yes	No					
3.	Have you traveled outside of the state in the last 30 days	?					
	Yes N	lo					
	If yes, please specify where:	-					
4	The following is a list of the most common vaccine side e	ffects:					
	Pain, redness, and swelling at the injection site						
	Headache						
	Muscle pain						
	Tiredness						
	Shivering						
	Fever						
	**Most reactions are mild to moderate with duration of 2-3 days **						
	have any questions or concerns about a potential reaction						
	or symptoms of COVID-19, please contact your primary care provider. Be sure to inform your provider						
tnat yo	ou have recently received a vaccine.						
Lhave	read the above statements. I certify that I am in good hea	Ith to receive	a vaccine toda	u lam			
	read the above statements. I certify that I am in good hea ible to vaccination and will reach out to my provider shou			iy. i airi			
agreea	ible to vaccination and will reach out to my provider shou	io i nave any c	oncerns.				
Signati	ure:	Date:					

- Screen for symptoms of COVID-19
 - Ensures patient is eligible
 - Limit exposure risk for staff
- Statement that vaccine side effects can mirror symptoms of COVID-19
 - Contact provider with concerns
 - Inform them of recent vaccine



Personal Protective Equipment (PPE)

- Subject to state & local guidelines
- At HHC we are utilizing:
 - Gloves (standard when immunizing)
 - Surgical mask (standard while in public)
 - Eye protection (standard for patient interactions)





How to address declining rates?



- Drive-thru vaccination clinics
 - Ensure timely vaccination
 - Minimize exposure risk for patients and staff
- Expansion of eligible patient age ranges
 - Subject to state regulation
 - Amendment to the PREP Act (Aug 2020)
 - Pharmacists to immunize patients ≥ 3 yo

Image: Nantucket Cottage Hospital



Drive-Thru Clinics: Not Adopted

- 1 Lack of space for monitoring
 - Inner city location
- Not conducive for our population
 - Few have private vehicles
- Fear of COVID-19 exposure not affecting vaccination rates
 - Appointment show rates improved





Expansion of Age Range: Not Adopted

Minimal decline in pediatric vaccination rates

- · Due to outreach by pediatric team
- Designated routine immunization time (AM) to minimize exposure risk
- Expansion unlikely to produce an effect due to shared setting
 - Pharmacy on 1st floor, Pediatrics on 2nd
 - Unwilling to bring child to pediatrics → unlikely to bring child to pharmacy





Lessons Learned

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Is this our "dress rehearsal"?

Influenza 2020-2021

RZV 2017-2019

Plentiful supply

Limited supply

Only 1 dose required

A 2-dose vaccine series

Takeaway:

Vaccines in the COVID-19 era

Takeaway:

Maximize use of limited supply



Supply & Demand

High Demand

Recombinant Zoster Vaccine (RZV)

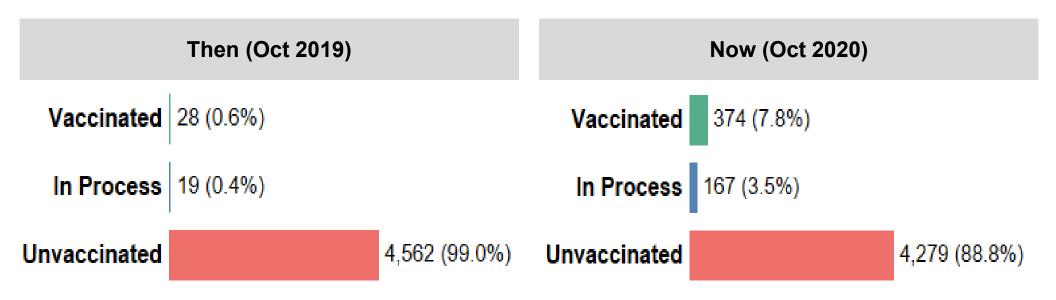
Superior protection (97% vs 70%) Two dose vaccine series

Younger indication Manufacturing (50+ yo vs 60+ yo) shortages

Recombinant vs. live Limited to 10-20 doses per month

Short Supply

RZV Vaccination Rates



^{*}Progress made over an 8 mo period, immunization program was on hold for 4 mo (March - July 2020) due to COVID-19



Supply Management

Patient Tracking

Appointment-Based Model

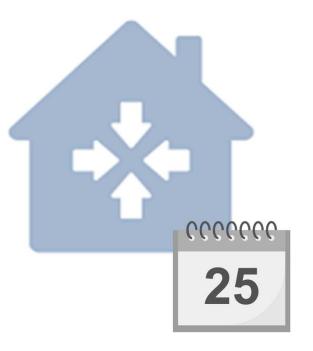
Designated Pharmacist Time





Supply Management

- Concentrate all available vaccine
 - Determine location (pharmacy)
 - Maximize use of minimal supply
- Allocation of 2nd dose
 - 1st dose administered → 2nd dose set aside
 - Ensure supply would be available
 - Guarantee dose schedule could be followed





Patient Tracking

- Data dashboards
 - Identifies all eligible patients
- Excel Spreadsheets
 - 1st dose waitlist
 - Provider sends prescription
 - Patient self-referral
 - 2nd dose appointment list

1st Dose Waitlist					
Patient Full Name	Date of Birth	Call 1	Call 2	Call 3	Scheduled Appt

2nd Dose Appointment List					
Patient Full Name	Date of Birth	Appointment Date	Reschedule Notes		



Patient Tracking

Waitlist

- Patient 4
- Patient 6
- Patient 7
- Patient 8

Scheduled for 1st Dose

- Patient 3
- Patient 5

Scheduled for 2nd Dose

- Patient 1
- Patient 2



Appointment-Based Model

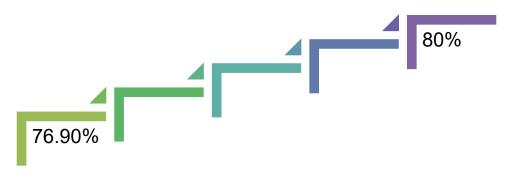
- Pharmacy CHWs outreach patients on waitlist (top to bottom)
- Appointments preferentially made for designated immunization time

	Pre COVID-19 10/1/19 - 3/13/20	COVID-19 3/14/20 - 7/6/20	Post COVID-19 7/7/20 - 8/7/20
Total, vaccines administered	308	0	90
Walk-ins	188 (61.0%)	n/a	10 (11.1%)
Appointments	120 (39.0%)	n/a	80 (88.9%)



Appointment-Based Model

- Appointment attendance:
 - 76.9% (Oct 2019 Mar 2020, "Pre-COVID-19")
 - 80% (Jul 2020 Aug 2020, re-initiation of services)
 - Fear of COVID-19 exposure did not hinder appointment attendance
 - Patients more motivated to pursue vaccination in light of pandemic?





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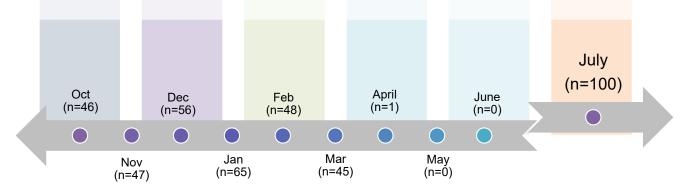
Designated Pharmacist Time

- Optimized workflows
 - The vaccination process is time consuming
- Improved the number of vaccines administered monthly
 - Prior to implementing = 8.7 vaccines / month
 - After implementing = 55.6 vaccines / month



The Ultimate Lesson Learned

- Culmination of these keys to success
- Allowed us to safely vaccinate a large number of patients over a short period of time
 - October to March, pre-COVID (n= 308).
 - July 2020, immunization program resumed (n= 100)





A Prescription for Success

- Value of pharmacy-based immunization
- Steps to initiate a pharmacist-led program
- Keys to success
 - Applicable to provision of a COVID-19 vaccine







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Thank you! Questions?

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