A Prescription to Expand Vaccine Access: Partnering with Pharmacists
Workshop Presenters

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- Julie Amio, Pharm.D.
  - Ralphs Grocery Company Pharmacies
- James McCabe, RPh
  - Safeway Pharmacies
- Michelle Tenerelli, RPh
  - Rite Aid Corporation Pharmacies
Immunization and Pharmacists

• CA Pharmacists authorized to vaccinate since 1995

• B&P 4052
  – Administer immunizations pursuant to a protocol with a prescriber.
  – No age or vaccine limits
  – No patient specific protocol
Protocols and Pharmacists

81% can vaccinate teens

17% CANNOT vaccinate pregnant women

Goad, J. Survey of CA pharmacist immunizers, 2009 (*unpublished data*)
Pharmacists and Protocol Physicians

- 26% did not know how to contact their protocol physician
- Only 3% had contacted their protocol physician in the last 12 months
- 65% say protocol restrictions have limited their ability to vaccinate in the past 12 months
- 73% of pharmacists feel the physician signed protocol is unnecessary

Goad, J. Survey of CA pharmacist immunizers, 2009 (unpublished data)
Julie Amio, Pharm.D.

Ralphs Grocery Company Pharmacies
Ralphs Grocery Company

• Division of The Kroger Company Family of Pharmacies
• 90 Pharmacies across Southern CA
• Clinical Programs
  – Immunizations
  – Health and Wellness Programs
  – Disease-state management
Immunization Program

- Under protocol, we can administer vaccinations to patients ≥ 11 years
- Over 230 Immunization certified pharmacists in CA alone
- Almost 40,000 vaccines were administered in fiscal year 2010 (Southern CA only)
Vaccines Per Protocol

- Influenza
- Tetanus, Diphtheria, Pertussis (Td/Tdap)
- Pneumococcal
- Hepatitis A
- Hepatitis B
- Meningococcal
- Measles, Mumps, Rubella
- Herpes Zoster
- Human Papillomavirus
Partnerships Past and Present

• Senior population
• Private businesses
  – Office buildings
  – Employer groups
• Underserved/Uninsured communities
  – CPG partnership
  – Salvation army
Goals and Strategies

- **Goals**
  - Expand access to immunizations
  - Educate patients on importance of up-to-date vaccinations
    - Prevention vs. Treatment
    - Childhood vs. Adult immunizations

- **CA Immunization Registry (CAIR)**

- **Websites**
  - Adacel® locator
    - [http://soundsofpertussis.com/#/findadoctor](http://soundsofpertussis.com/#/findadoctor)
  - Merck Adult Vaccination Program (MAVP)
    - [https://www.merckvaccines.com/srv/gw/mavp/mavpLanding.jsp](https://www.merckvaccines.com/srv/gw/mavp/mavpLanding.jsp)
Goals and Strategies (cont.)

- Targeting population groups
  - Health fairs
  - Free promotional screenings
  - Presentations at senior homes
  - MTM

- Collaborating with prescriber offices / Accountable Care Organizations (ACOs)

- Utilizing previously established partnerships
  - External
  - Internal
Lessons Learned

• Barriers
  – Third Party reimbursement
  – Employer / Consumer buy-in
  – Competition

• Persistence

• Creativity

• Networking

• Collaborative practice

maximizes patient outcomes
James McCabe, RPh

Safeway Pharmacies
Successes and Challenges of Vaccine Delivery in a Retail Pharmacy Environment

• **Foundations of Pharmacy Practice:**
  - Continuing Education.
  - Accurate Dispensing.
  - Empathetic Counseling.
  - Clear Communication with other Health Care Professionals.

• **Continued Relevance as a Profession Depends on:**
  - Creative Approach towards Patient Centered Practice.
  - Medication Therapy Management (MTM).
  - Specialty Pharmaceuticals – Education and Administration.
  - Emergency Contraceptive Practice.
  - Biometric Evaluation and Referral.
  - Immunization Education and Administration.
Rationale for Pharmacy Based Immunization

• Pharmacists are Protocol Driven Creatures and are Experts in:
  - Procurement.
  - Handling.
  - Storage.
  - Dispensing.
  - Administration.

• Ten Years of Experience as Immunization Providers.
  - APhA Nationally Recognized Training.
  - Most Accessible Health care Provider.
  - Public Provider with Unlimited Client Base.
  - Walk-in service 7 days / week, 363 days / year.
  - Robust IZ P&P Contributes to Outstanding safety record.
Collaborative Practice and Standing Orders

- Current Safeway CPA directs that pharmacists follow ACIP guidelines allowing for real-time changes in administration protocol.
  - Hepatitis A
  - TIV and LAIV
  - Tdap and Td
  - Polio
  - Varicella Vaccines
  - HIB
  - Hepatitis B
  - Pneumococcal Vaccines
  - Meningococcal Vaccines
  - MMR
  - HPV Vaccines
  - Typhoid Vaccines

- Travel Health Program.
  - Yellow Fever
  - Japanese Encephalitis
  - Travelers Diarrhea
  - Rabies
  - Anti- Malarials
  - Altitude Sickness
Contribution to Public Health

• Since the inception of Safeway’s immunization program, our pharmacy teams have delivered over 5 million doses of vaccine.

• 23% of all Flu Vaccine doses nationally are currently administered in a pharmacy setting.

• Greater than 45% of all shingles vaccine doses were delivered in a pharmacy setting in 2010.

• Pharmacy based immunization “came of age” during the 2009-10 H1N1 pandemic, clearly demonstrating our surge capacity and ability to effectively collaborate with County, State, and Federal authorities in mass vaccination administration.
Logistics of a School Flu Clinic Project

• In collaboration with UCSD, Safeway Pharmacy partnered with a Northern California School District to provide flu clinics in 9 elementary schools in the fall of 2009.

• The coordination of multiple entities was required to successfully complete this project.
  - VFC – CaDPH Immunization Branch.
  - CAIR – CaDPH Immunization Branch.
  - County DPH.
  - School District Administration.
  - School Principals.
  - School Nurses.
Logistics of a School Flu Clinic Project

• Effective education and messaging to parents required the development of specific bilingual communication pieces.
  - Dear Parent / Guardian announcement letter from School Superintendent sent home with children at the beginning of the school year.
  - Consent and Release adapted to gather parent detail for registry, and opt out option. These were returned and processed prior to clinic.
  - Follow up letters for children requiring 2\textsuperscript{nd} dose.

• Site visits prior to start of clinics.
  - Meet with Principals and school nurse to discuss logistics.
  - View libraries and designate immunization area and post immunization observation area.
Logistics of a School Flu Clinic Project

Clinic day execution

- Two pharmacists (providers) and a school nurse (observer) attended each clinic. A VFC representative from CaDPH also attended as an observer.
- Children were brought in by class, each wearing a name tag applied by their class teacher.
- Parent volunteers matched the children to their consent and release forms.
- C&R forms were rechecked and children immunized either with LAIV or TIV.
- Each class watched a 10 minute video about hand washing while being observed, and were then released back to their classroom.
School Flu Clinic Successes

- Approximately 500 children aged between 5 and 12 years old were immunized in the 9 schools without incident or adverse reaction.

- Logistically, pharmacist administered school clinics are feasible, replicable, and well accepted by parents and the school district.

- From the UCSD study based on this project:
  "Our study is consistent with other publications detailing how well pharmacists follow guidelines and adhere to protocols. The pharmacists were notably unfailing in following ACIP national guidelines such as reviewing health history, checking for allergies and contra-indications, and documenting and providing Vaccine Information Statements to patients. The combination of high production value and consistent adherence to protocol and guidelines results in the best efficiency value published to date".

- Valuable relationships were developed with CaDPH, County DPH, School District, and VFC program.
School Flu Clinic Challenges

- Consistently, the biggest single challenge to Pharmacy Based Immunization practice is adequate reimbursement. The school clinic project was no exception:
  - Patients covered by HMO who wanted the convenience of the school clinic did not have the option unless willing to pay cash.
  - Patients covered by commercial insurance had varying copays that often did not reimburse for administration.
  - Children eligible for VFC were most often also MediCal patients, and MediCal does not recognize pharmacists as providers.

- The CA Education Code restricts the administration of vaccines at facilities under the control of the Dept of Education to certain specified professions. Ch. 9, PUPIL AND PERSONNEL HEALTH, Article 1. General Powers - School Boards section 49400 - 49415.

- Nobody should ever have to be subjected to the same children's “hand-washing” video over 120 times in 9 days.
Conclusion

• School based, pharmacist administered vaccination programs have the potential to be fiscally viable if adequate reimbursement can be secured through Federal, State, and Commercial programs.

• They are logistically self sustaining, and are a practical alternative to either medical office based or community based mass vaccination clinics.

• With the implementation of AB354, school based, pharmacist administered clinics can offer a practical strategy for vaccinating adolescents with Tdap and other mandated vaccines if the necessary approval for pharmacists to provide services at facilities under the control of the Dept of Education could be obtained.
Rite Aid
Immunization Program

• Launched it’s 1st immunization program in 2004. It was a volunteer program in 7 states. We provided 5 adult vaccinations.

• 2011 CA – all pharmacist will be trained by June 1st. Currently:
  – 592 stores of which 542 have immunizers at them right now
  – After June 1st you will be able to get any of our vaccines during business hours in CA stores

• Rite Aid focuses on the underserved Adolescent and Adult populations but can provide nasal vaccines to children 2 and over and injectable vaccines to 3 and over if needed

• In 2010, as a company, we administered 800,000 vaccines of which 170,000 in CA.
Vaccine Provided on Protocol

- Influenza
- Meningococcal
- Measles
- Mumps
- Rubella
- Pneumococcal
- Varicella
- Zoster (Shingles)

- Poliovirus
- Hepatitis A vaccine
- Hepatitis B vaccine
- Haemophilus Influenzae
- Human Papillomavirus
- Tetanus
- Diphtheria
- Pertussis
Tdap Administration

- Tdap administered in CA
  - since August 2010, 8,900 doses
  - Since March 2011, when all stores received vaccine, 1,400 doses
  - Starting marketing and outreach this month
Tdap Outreach

• Contacting schools
• Store Signage inside and outside
• Press release & social media outreach
• Websites Locators
• Catalina Marketing- message prints out on receipts
• In store
  – Flyers and educational pieces notifying customers of the new recommendations and laws
  – Pharmacists talking with pregnant customers, new mothers, and care takers
Documentation

• Provide all patients with a patient record of administration of vaccine
• Notify all primary care physicians
• Setting up CAIR reporting
• Providing stores with starting amount of CA “Yellow Card”
  – If stores need more they will be ordered them directly from the LPHD
• Pharmacies have access to the “Documentation of Tdap Administration Optional Form for Health Care Providers”
VFC Program

• Working with the VFC coordinator
  – Looking for limited sites in CA to provide VFC
    • High family medical population
    • Stores with consultation rooms
    • Motivated Immunization Pharmacists willing to work with their local community and public health department to provide this service
  – VFC Coordinator will help select potential sites in areas of need
  – Will provide all vaccines to children 3 and up as needed. The provider sites will have view access to CAIR and vaccinations will be electronically reported weekly
Pharmacy as Partners

• Pharmacists as advocates
  – Pharmacists are another resource to provide patients with information on new recommendations and laws
  – Due to insurance limitation, pharmacists often see their customers more times per year than their primary care physicians
  – Community Drug Stores have a lot of healthy customers that do not get prescriptions
  – Can identify patients based on data in patient profiles for education at the time of counseling (age, disease state, medications)

• Pharmacists as administrators
  – Often have better access since pharmacy has evening and weekend hours
  – Community pharmacies are moving toward all pharmacists being trained to provide this service
    • This will provide a lot of additional sites and HCPs that can meet immunization demands as needed and help increase overall immunization rates
Pharmacy Partnership

Next Steps

• Working as a profession to provide standardized training and retraining

• Work on reimbursement issues to better provide access to all, with continued increase focus on those underserved communities

• Working together with other professionals on education and outreach
Success.

Thank You!