What They Did

There is a considerable need to provide adult patients with a full range of immunizations beyond influenza, and there is great potential for pharmacists to meet that need.

In Wisconsin, pharmacists can now use the Wisconsin Immunization Registry (WIR) as a tool to assess the vaccination needs of their adult patients and document the vaccinations given.

In this project, a community pharmacy in MadisonWisconsin, sought new approaches to assess, recommend, give, and document immunizations of their adult patients.

A 45-day feasibility trial was conducted in a community chain pharmacy to determine if an efficient standardized protocol could be put in place to increase adult immunization rates.

In a 2015 article in the Journal of the Pharmacy Society of Wisconsin, the authors describe their efforts to implement a protocol that:

- 1) identified patients eligible for vaccines;
- 2) raised patients' awareness regarding their vaccination needs;
- 3) increased the number of vaccine administrations in a community pharmacy; and
- 4) enhanced the use of the state's immunization registry.

In the 45-day trial from April to June 2015, here's what they did:

The pharmacist team identified Medicare Part D patients who were coming to pick up a prescription within the next week. Those patients were then cross-referenced in the WIR to determine eligibility for zoster vaccine. If the patient was eligible, an immunization history handout was printed directly from the WIR website (see Figure 1).

Client Informati	on				Sch	iool Relea	ase on File:
1							
Client Name (First - MI - Last)		DOE	Gender	Mother's Maiden	Track Scheo	ing lule	Chart #
					ACIP		
Address							
Comments							-
History							
Vaccine Group	Date Administered	Series	Trade Name (V	accine)	Dose	Owned?	Reaction H
nfluenza	<u>01/14/2015</u>	Booster			Full	No	
Pertussis/Tdap	06/25/2015	1 of 1	E	Boostrix®	Full	No	
	04/44/0045	1 of 3	(Pnou	imagagagal 22)	Full	No	
Pneumo-Poly	01/14/2015	1010	(Filed	mococcar 23)			
Pneumo-Poly Td	06/25/2015	1 of 1	E	Boostrix®	Full	No	
Pneumo-Poly Td Current Age: 59	<u>01/14/2015</u> <u>06/25/2015</u> years, 7 months	1 of 1	E	Boostrix®	Full	No	
Pneumo-Poly Td Current Age: 59 Vaccines Reco	<u>06/25/2015</u> <u>96/25/2015</u> years, 7 months mmended by Selec	1 of 1 ted Track	ing Schedule	Boostrix®	Full	No	
Pneumo-Poly Td Current Age: 59 Vaccines Reco Vaccine Group	years, 7 months mmended by Selec Vaccine	1 of 1 ted Track	ing Schedule	Boostrix® Recommended Date	Over	<u>No</u> due Date	Latest Dat
Pneumo-Poly Id Current Age: 59 Vaccines Reco Vaccine Group Influenza	years, 7 months mmended by Selec Vaccine	ted Track Earli	ing Schedule est Date R 1/2015	Recommended Date 08/01/2015	Over 04/	<u>No</u> due Date 14/2016	Latest Dat
Pneumo-Poly Td Current Age: 59 Vaccines Reco Vaccine Group Influenza Pertussis/Tdap	years, 7 months mmended by Select Vaccine	ted Track	ing Schedule est Date R 1/2015	Recommended Date 08/01/2015 Complete	Over 04/*	<u>No</u> due Date 14/2016	Latest Dat
Pneumo-Poly Td Current Age: 59 Vaccines Reco Vaccine Group Influenza Pertussis/Tdap Pneumo-Poly	years, 7 months mmended by Select Vaccine Pneumo-Conjuga 13	ted Track Earlin 08/0 ate 12/0	ing Schedule est Date R 1/2015	Recommended Date 08/01/2015 Complete 12/03/2020	Over 04/ ²	<u>No</u> due Date 14/2016	Latest Dat
Pneumo-Poly Td Current Age: 59 Vaccines Reco Vaccine Group Influenza Pertussis/Tdap Pneumo-Poly Td	years, 7 months years, 7 months mmended by Select Vaccine Pneumo-Conjuga 13	ted Track Earlin 08/0 tee 12/0 06/2	ing Schedule est Date R 1/2015 3/2020 5/2020	Recommended Date 08/01/2015 Complete 12/03/2020 06/25/2025	Over 04/*	No due Date 14/2016 03/2022 25/2025	Latest Da

This handout contained the full range of possible needs, including Tdap and pneumococcal vaccinations. A test claim was then run to provide a copay amount to the patient. The pharmacist presented and explained the handout to the patient, answered any questions, and asked if they would like to receive their immunizations at the pharmacy.

The feasibility study demonstrated the uses of the WIR as a tool for pharmacists to better assess immunization status.

They were able to continue these new immunization protocols beyond the 45-day pilot, leading to increased numbers of immunization for their patients.

What Works To Improve Adult Immunization 2016

Beyond Influenza: One Wisconsin Pharmacy Tests New Protocols to Increase Immunization Rates Among Adult Patients

"It really tells that all of us in health care should be advocating for the regular utilization of the state *immunization registry. I would like it to be used nationally*" – Pharmacist in Madison, Wisconsin



Boosting Vaccine Awareness, Administration, and WIR Use

From the Journal of the Pharmacy Society of Wisconsin, September/October 2015 Cameron P. Cech, 2016 PharmD Candidate, David J. Dulak, 2016 PharmD Candidate, and Christopher R. Gardipee, 2016 PharmD Candidate

With special thanks to Betty Chewning, Ph.D., University of Wisconsin School of Pharmacy

This "What Works" vignette is one in a series of examples collected by the Provider Workgroup of the National Adult and Influenza Immunization Summit. For more information or to nominate an example of "what works" to improve adult immunization, go to http://www.izsummitpartners.org/. This vignette does not constitute an endorsement from any of the organizations that participate in the Provider Workgroup or the NAIIS.

With time as the staff increased their use of the WIR, the process became smoother and more efficient. Equally important, WIR is a vehicle for pharmacists to document and communicate a patient's ongoing and updated vaccination history to that patient's other providers.

through December 31, 2015. It also provides data for the same time period one year prior. Following implementation of the intervention, immunization rates increased by 214% overall, pneumococcal vaccinations increased by 917%, Tdap increased by 425%, zoster by 213%, and influenza by 168%. Wider implementation of this systematic approach, in collaboration with the WIR, has the potential to reduce a major gap in public health needs in Wisconsin and raise patients' awareness of the pharmacist's expanding role in health care.

Results They Got

Implementation of the protocol increased the number of pharmacy-administered adult immunizations during the 45-day intervention period (April 20–June 3, 2015).

Compared with the same 45-day period in the previous year, the total number of vaccinations among adults increased from 2 to 21. The number of vaccinations increased from 3 to 21 compared with the 45-day period leading up to the intervention.

Table 1: What the 45-Day Feasibility Trial Demonstrated

accination Rates	April 30–June 3, 2014	March 6–April 19 2015	April 30–June 3, 2015
neumococcal	0	2	11
dap	2	1	4
oster	0	0	6
otal	2	3	21

Staff reported that the protocol was quickly implemented without significantly increasing the workload and led to increased vaccine awareness, administration, and WIR use.

"People really do respond to seeing the vaccination recommendations on paper, and they like to get vaccinated without having to make a special appointment, pay an appointment co-pay, etc." — Pharmacist in Madison, Wisconsin

This protocol, built upon the WIR's existing systems and resources, is an adaptable intervention that was easy to integrate into work flow.

Due to the success, the pharmacy continues to use these new immunization protocols. The more recent data shown in the table below were provided by the authors and show the results beyond the 45-day feasibility trial period.

Table 2: Longer-term Results Beyond The Feasibility Trial

accination Rates	April 20–Dec 31, 2014	April 20–Dec 31, 2015	Percent Increase
neumococcal	6	55	917%
dap	4	17	425%
oster	8	17	213%
ifluenza	108	181	168%
otal	126	270	214%

This table shows results from April 20, 2015—when the intervention was implemented—

