Building a Year-Round Immunization Program

As the nation’s most accessible health care providers, pharmacists are well positioned to advocate, facilitate, and deliver immunizations throughout the year.

Although immunization administered by community pharmacists is a relatively new concept, this form of pharmaceutical care is rapidly being integrated into practices nationwide. Most pharmacist-led immunization services focus primarily on the influenza vaccine, but increased delivery of all vaccines is needed to avert thousands of preventable deaths each year in the United States. This session addressed strategies for developing a business model for a year-round immunization program—one that enhances patient access and collaborative opportunities with other health care professionals.

Role of the Pharmacist in Immunization

More pharmacists are needed to become advocates for immunization and to vaccinate against a spectrum of preventable diseases on a year-round basis. Each year, an estimated 55,000 to 80,000 people die from such vaccine-preventable diseases as influenza, pneumococcal disease, and hepatitis B infection. Through their involvement in immunization delivery, pharmacists can substantially reduce the morbidity and mortality that results from vaccine-preventable infections.

As of January 2000, 30 states explicitly permit pharmacists to administer drugs under certain circumstances. Pharmacy-based immunization centers offer many advantages, including excellent access and convenience, extended hours of availability, and the pharmacist’s knowledge of patients who may be in need of immunizations. Even in states where pharmacists are not allowed to administer vaccines, they have an important role in immunization advocacy and facilitation.

The pharmacist’s role in increasing adult immunization rates can be categorized into three levels of service:

- Advocacy. By providing education and promoting awareness of the health benefits of vaccination, pharmacists can motivate more people to obtain appropriate vaccinations.
- Facilitation. Pharmacists can serve as hosts in their practice sites for other health care professionals who are qualified to provide immunizations, such as nurses.
- Immunization. Pharmacists who have appropriate training, preparation, and equipment can administer vaccines in many states.

Developing a Year-Round Immunization Program

The best way to start a year-round immunization program is to develop a carefully considered business plan. Research has shown that pharmacists who enter the immunization market do not take market share from other health care providers but rather expand the total market. Immunization is an under-utilized means of disease prevention for many infectious disorders. For example, pneumococcal disease causes more than 40,000 deaths annually, yet only 20% to 30% of high-risk individuals are vaccinated against this infection.

Before implementing an immunization program, pharmacists should develop a business plan that includes these steps:

1. Perform a needs assessment and gather information. A needs assessment helps to define unmet needs for immunization in the community and to identify target populations for vaccinations. An analysis also should be conducted of the organization’s strengths and weaknesses and environmental opportunities and threats. Other important information includes practice requirements for immunizations, liability insurance needs, and immunization resources.

2. Plan the new program. Forming a development and planning committee may facilitate planning for the immuniza-
Table 1. Year-Round Immunizations

<table>
<thead>
<tr>
<th>Vaccine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pneumococcal</td>
</tr>
<tr>
<td>Tdap/DTP</td>
</tr>
<tr>
<td>Hepatitis B</td>
</tr>
<tr>
<td>Mumps/Rubella</td>
</tr>
<tr>
<td>Varicella</td>
</tr>
<tr>
<td>Lyme disease</td>
</tr>
<tr>
<td>Measles</td>
</tr>
<tr>
<td>Travel vaccines</td>
</tr>
</tbody>
</table>

The program should include a clearly worded mission statement and the program’s goals and objectives. A management plan should be developed that describes the structure of the program, its policies and procedures, staff training and responsibilities, job descriptions, and a performance appraisal system. A budget also should be developed that includes initial expenses, such as training, new furniture, and a refrigerator, and ongoing costs, such as the vaccine inventory, syringes and needles, emergency supplies, and marketing expenses.

3. Train the staff. Staff preparation and training are essential components of a successful program. Pharmacists will require specific training about vaccines and vaccine-preventable infections, administration technique, emergency procedures, storage and handling, billing, and marketing. Support staff require training on vaccine storage and handling, ordering, temperature monitoring, and billing.

4. Prepare the pharmacy. The pharmacist’s practice site may need to be modified to facilitate vaccine delivery. Adequate space is needed to provide patient privacy and make room for a refrigerator with freezer, supplies, and biohazardous waste disposal. Work-flow options, such as appointment-based vaccinations or walk-in appointments, also need to be considered.

5. Market the program. Marketing is an important tool to inform potential customers about the immunization program. Ideas include media and storefront advertisements, flyers, posters, direct mail, buttons, bag stuffers, networking, and business cards. Pharmacists can use their prescription database to notify patients who are at high risk for vaccine-preventable diseases.

6. Implement the program. A timeline should be developed for program implementation. A resource manual for pharmacists should also be developed that includes the program’s policy and procedures, documentation forms, patient and therapeutic information, fingerstick procedure, emergency protocols, and adverse event reporting.

7. Seek compensation for services. Compensation for vaccine prescriptions and administration is available from several sources, including self-pay, private employers, and third-party payers. For example, if a patient pays $12.00 out of pocket for the influenza vaccine, the pharmacist might receive a net profit of $6.50, with expenses of $5.50 for the vaccine, supplies, and the professional time.

8. Evaluate the program. The program should be evaluated periodically for quality assurance, outcomes, patient satisfaction, and compensation. The goal is to continuously make changes to improve the program.

Expanding Opportunities for Immunization

Seasonal immunization activity usually focuses on the influenza vaccine. The optimal time for vaccination against influenza is in the fall (October and November), well before the height of the flu season in the winter months. High-risk patients should be targeted for this form of immunization, along with local employers who wish to reduce flu-related absenteeism.

Vaccines that can be included in a year-round immunization program are shown in Table 1. To expand opportunities on a year-round basis, pharmacists should consider promoting vaccine awareness in their practice sites during public health campaigns, such as National Infant Immunization Week (the last full week in April) and National Adult Immunization Week (the second week in October). Other opportunities for expanding a year-round immunization program can be identified through consulting with travel advisors (who can provide information on the need for travel vaccinations), pediatricians, sporting clubs or stores, and employer groups.

Pharmacists who wish to offer year-round immunization services must confront a number of challenges, including legal and regulatory issues and competition from other health care providers who offer immunizations. Pharmacists may also need to address a lack of information or misinformation among patients about the health benefits of vaccination and among other health care providers about the value of pharmaceutical care in this area. However, with appropriate planning, implementation, marketing, and coordination with other health care providers, pharmacists can implement a successful year-round immunization program to reduce the morbidity and mortality from vaccine-preventable infections.

Summary

- Each year, an estimated 55,000 to 80,000 people die from vaccine-preventable diseases.
- More pharmacists are needed to advocate, facilitate, and deliver immunizations throughout the year.
- Pharmacists who want to develop a year-round immunization program should begin by developing a comprehensive business plan.
- By implementing a successful year-round immunization program, pharmacists can reduce morbidity and mortality from a range of vaccine-preventable infections.

Vol. 48, No. 5, Suppl. 1 September/October 2010
Building a Year-Round Immunization Program

As the nation’s most accessible health care providers, pharmacists are well positioned to advocate, facilitate, and deliver immunizations throughout the year.

Although immunization administered by community pharmacists is a relatively new concept, this form of pharmaceutical care is rapidly being integrated into practices nationwide. Most pharmacist-led immunization services focus primarily on the influenza vaccine, but increased delivery of all vaccines is needed to aver thousands of preventable deaths each year in the United States. This session addressed strategies for developing a business model for a year-round immunization program—one that enhances patient access and collaborative opportunities with other health care professionals.

Role of the Pharmacist in Immunization

More pharmacists are needed to become advocates for immunization and to vaccinate against a spectrum of preventable diseases on a year-round basis. Each year, an estimated 55,000 to 80,000 people die from such vaccine-preventable diseases as influenza, pneumococcal disease, and hepatitis B infection. Through their involvement in immunization delivery, pharmacists can substantially reduce the morbidity and mortality that results from vaccine-preventable infections.

As of January 2000, 30 states explicitly permit pharmacists to administer drugs under certain circumstances. Pharmacy-based immunization centers offer many advantages, including excellent access and convenience, extended hours of availability, and the pharmacist’s knowledge of patients who may be in need of immunizations. Even in states where pharmacists are not allowed to administer vaccines, they have an important role in immunization advocacy and facilitation.

The pharmacist’s role in increasing adult immunization rates can be categorized into three levels of service:

- Advocacy. By providing education and promoting awareness of the health benefits of vaccination, pharmacists can motivate more people to obtain appropriate vaccinations.

- Facilitation. Pharmacists can serve as hosts in their practice sites for other health care professionals who are qualified to provide immunizations, such as nurses.

- Immunization. Pharmacists who have appropriate training, preparation, and equipment can administer vaccines in many states.

Developing a Year-Round Immunization Program

The best way to start a year-round immunization program is to develop a carefully considered business plan. Research has shown that pharmacists who enter the immunization market do not take market share from other health care providers but rather expand the total market. Immunization is an under-utilized means of disease prevention for many infectious disorders. For example, pneumococcal disease causes more than 40,000 deaths annually, yet only 20% to 30% of high-risk individuals are vaccinated against this infection.

Before implementing an immunization program, pharmacists should develop a business plan that includes these steps:

1. Perform a needs assessment and gather information. A needs assessment helps to define unmet needs for immunization in the community and to identify target populations for vaccinations. An analysis also should be conducted of the organization’s strengths and weaknesses and environmental opportunities and threats. Other important information includes practice requirements for immunizations, liability insurance needs, and immunization resources.

2. Plan the new program. Forming a development and planning committee may facilitate planning for the immuniza-
ion program. The plan should include a clearly worded mission statement and the program’s goals and objectives. A management plan should be developed that describes the structure of the program, its policies and procedures, staff training and responsibilities, job descriptions, and a performance appraisal system. A budget also should be developed that includes initial expenses, such as training, new furniture, and a refrigerator, and ongoing costs, such as the vaccine inventory, syringes and needles, emergency supplies, and marketing expenses.

3. Train the staff. Staff preparation and training are essential components of a successful program. Pharmacists will require specific training about vaccines and vaccine-preventable infections, administration technique, emergency procedures, storage and handling, billing, and marketing. Support staff require training on vaccine storage and handling, ordering, temperature monitoring, billing, and marketing.

4. Prepare the pharmacy. The pharmacist’s practice site may need to be modified to facilitate vaccine delivery. Adequate space is needed to provide patient privacy and make room for a refrigerator with freezer, supplies, and biohazardous waste disposal. Work-flow options, such as appointment-based vaccinations or walk-in appointments, also need to be considered.

5. Market the program. Marketing is an important tool to inform potential customers about the immunization program. Ideas include media and storefront advertisements, flyers, posters, direct mail, buttons, bag stuffers, networking, and business cards. Pharmacists can use their prescription database to notify patients who are at high risk for vaccine-preventable diseases.

6. Implement the program. A timeline should be developed for program implementation. A resource manual for pharmacists also should be developed that includes the program’s policy and procedures, documentation forms, patient and therapeutic information, fingerstick procedure, emergency protocols, and adverse event reporting.

7. Seek compensation for services. Compensation for vaccine prescriptions and administration is available from several sources, including self-pay, private employers, and third-party payers. For example, if a customer pays $12.00 out of pocket for the influenza vaccine, the pharmacist might receive a net profit of $6.50, with expenses of $5.50 for the vaccine, supplies, and the professional time.

8. Evaluate the program. The program should be evaluated periodically for quality assurance, outcomes, patient satisfaction, and compensation. The goal is to continuously make changes to improve the program.

### Expanding Opportunities for Immunization

Seasonal immunization activity usually focuses on the influenza vaccine. The optimal time for vaccination against influenza is in the fall (October and November), well before the height of the flu season in the winter months. High-risk patients should be targeted for this form of immunization, along with local employers who wish to reduce flu-related absenteeism.

Vaccines that can be included in a year-round immunization program are shown in Table 1. To expand opportunities on a year-round basis, pharmacists should consider promoting vaccine awareness in their practice sites during public health campaigns, such as National Infant Immunization Week (the last full week in April) and National Adult Immunization Week (the second week in October). Other opportunities for expanding a year-round immunization program can be identified through consulting with travel advisors (who can provide information on the need for travel vaccinations), pediatricians, sporting clubs or stores, and employer groups.

Pharmacists who wish to offer year-round immunization services must confront a number of challenges, including legal and regulatory issues and competition from other health care providers who offer immunizations. Pharmacists may also need to address a lack of information or misinformation among patients about the health benefits of vaccination and among other health care providers about the value of pharmaceutical care in this area. However, with appropriate planning, implementation, marketing, and coordination with other health care providers, pharmacists can implement a successful year-round immunization program to reduce the morbidity and mortality from vaccine-preventable infections.

### Summary

- Each year, an estimated 55,000 to 80,000 people die from vaccine-preventable diseases.
- More pharmacists are needed to advocate, facilitate, and deliver immunizations throughout the year.
- Pharmacists who want to develop a year-round immunization program should begin by developing a comprehensive business plan.
- By implementing a successful year-round immunization program, pharmacists can reduce morbidity and mortality from a range of vaccine-preventable infections.