

Addressing Vaccine Hesitancy through Individualized Patient Vaccination Assessments Conducted in Community Pharmacy Practices within Tennessee

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OBJECTIVES

- Spotlight pharmacists as trusted messengers in areas with low vaccination rates to build vaccine confidence
- Describe APhA Foundation's Project IMPACT: Vaccine Confidence Model and how its implementation guided consistent communication between pharmacist and patient
- Demonstrate how pharmacists can utilize actionable point-of-care data to effectively engage and educate patients on vaccination needs

INTRODUCTION

In 2021, Tennessee fell behind most of the nation with COVID-19 vaccination rates, ranking in the bottom for utilization and vaccine uptake.

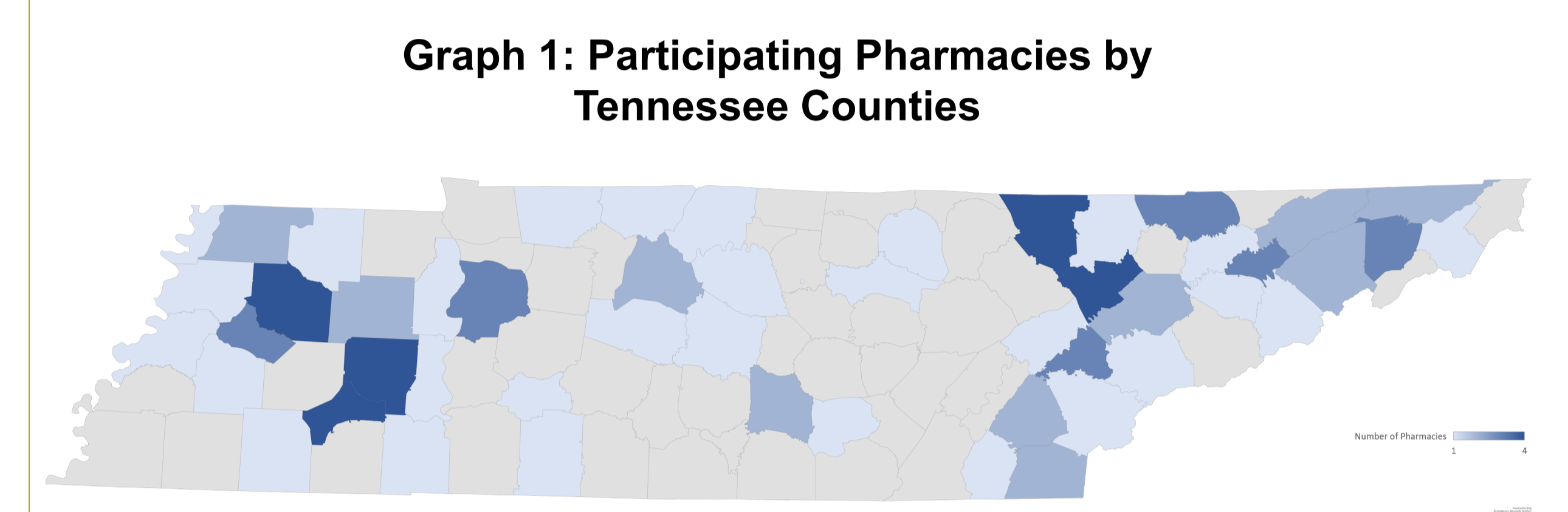
- 48th in the percentage of adults fully vaccinated.
- 48th in the percentage of adults who've received at least one dose.
- 47th in the number of doses administered per 100,000 residents.
- 45th in the percentage of seniors 65 and up vaccinated.

To address vaccine hesitancy and increase vaccination rates in Tennessee, the TPREF partnered with APhA Foundation to introduce the *Project Impact: Vaccine Confidence* model to community pharmacists in Tennessee. This innovative care model equips pharmacies with the patient's vaccine history at the point-of-care allowing pharmacists to perform thorough assessments of each patient's vaccine status, identify gaps, and address unmet vaccine needs.

This project utilizes the APhA Foundation's "Vaccine Seasons" model for patients and pharmacists with the goal of continuing efforts to advance more patient-pharmacist conversations about vaccines year-round. This segmentation of vaccines offered across seasons allows pharmacists to spark ongoing, consistent conversations with diverse populations of patients about vaccines, create a regular cadence of efforts to increase vaccine awareness, provide opportunities to identify and overcome vaccine hesitancy, improve consumer confidence in vaccines, and demonstrate improvement in vaccination.

METHODS

- TPREF recruited and enrolled 95 pharmacies from November 2022 – July 2023 from primarily rural counties in Tennessee.



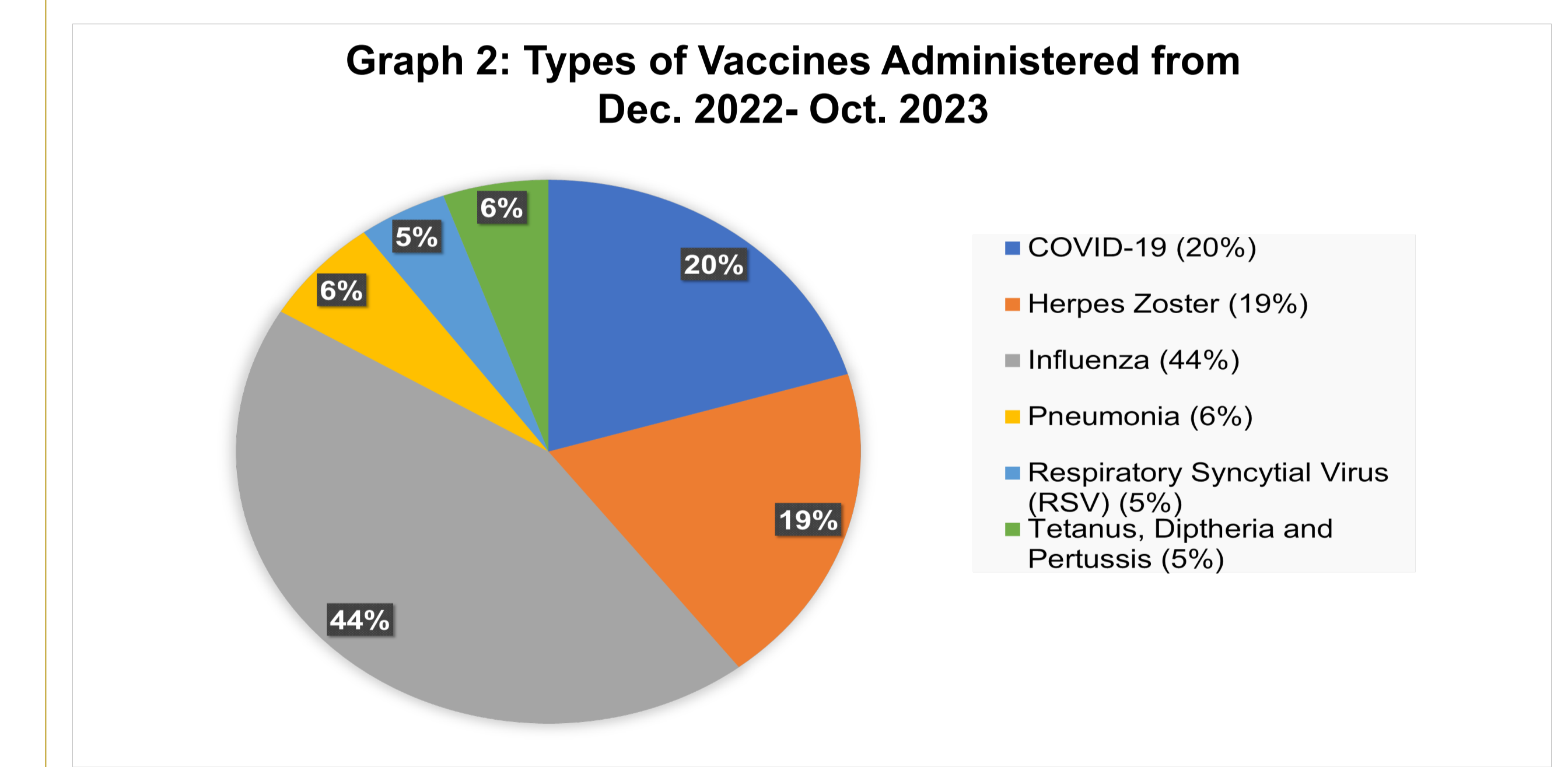
- TPREF provided incentives to pharmacies for enrolling into the project and for each patient vaccination assessment documented.
- TPREF requested the Pharmacist-in-Charge (PIC) and lead Pharmacy Technician to be identified and be main points of contact at each pharmacy.
- TPREF and Community Pharmacy Enhanced Services Network of Tennessee (CPESN TN) provided virtual and on-site technical assistance to enrolled pharmacies to assist with integration into workflows.
- TPREF provided quarterly education sessions focused on the following:
 - COVID-19 updates
 - Vaccines of the season/ quarter
 - Other topics such as motivational interviewing, media training, vaccine hesitancy, etc.
- APhA Foundation trained pharmacy personnel on the Innovative Practice Model (Table 1) and provided access to the IMPACT database for documentation.

Table 1: Vaccine Use Process

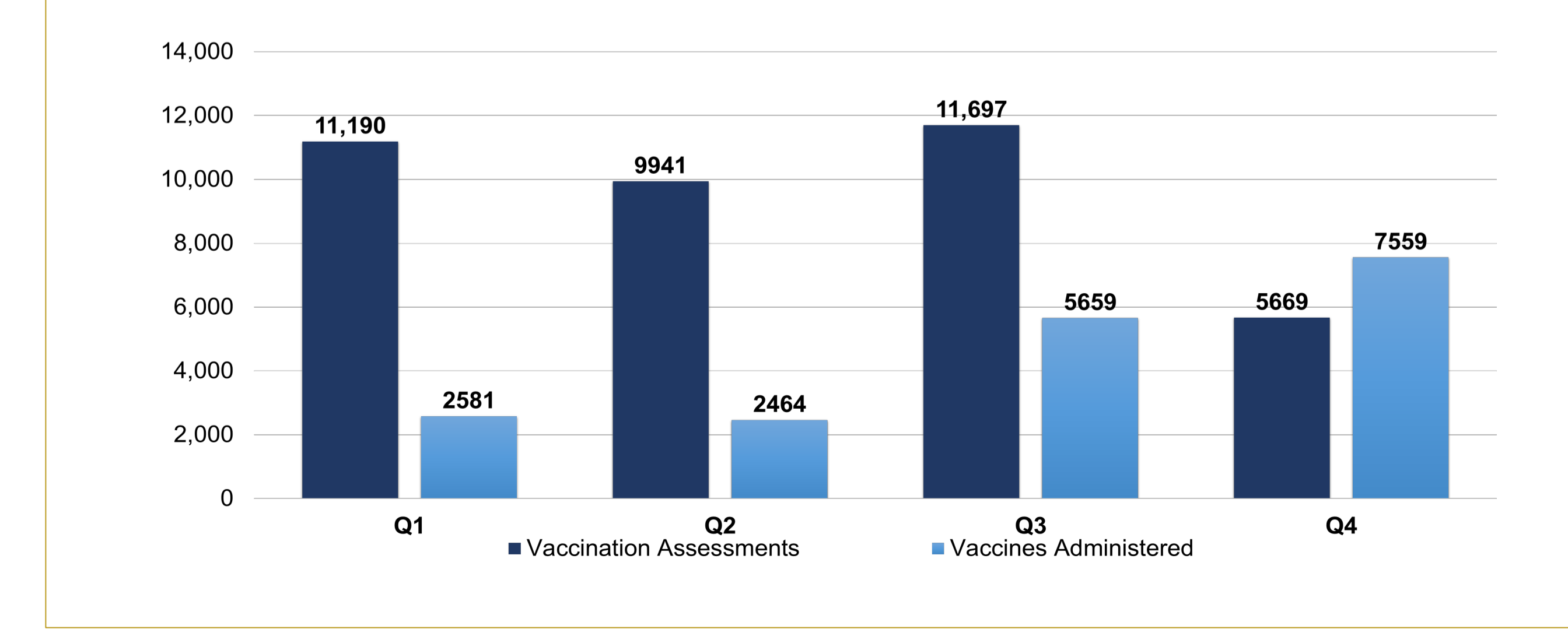
Conduct	A comprehensive vaccination review for patients.
Review	The patient's vaccination history as documented in TennIS.
Identify	The patient's unmet vaccination needs based on the patient's vaccination history.
Assess	The patient's unmet vaccination needs.
Educate	The patient about his/her vaccination needs and administer appropriate vaccine(s), as authorized by the patient.
Document	The patient interaction within the IMPACT database.

RESULTS

- Data collection will be on-going until March 2024.
- Data retrieval period is from December 2022-October 2023.
- Over 200 on-site technical assistance visits to pharmacies.
- Nearly 20 education sessions offered with a total attendance for sessions at 350.
- 24% of patients received comprehensive vaccination reviews while visiting the pharmacy for a prescription refill.
- 153,810 unmet vaccination needs were identified during 61,262 patient encounters.



Graph 3: Documented Patient Assessments and Vaccines Administered



CONCLUSION

The results from the past 11 months demonstrate the impact pharmacists can have on addressing vaccination gaps in communities by consistently engaging patients in communication around vaccination needs. Further exploration is needed to streamline integration into pharmacy workflows and assess increased adherence to recommended adult vaccinations.

Coaching and education to pharmacy staff has been critical during the ever-changing landscape of immunizations over the last year with the commercialization of the COVID-19 vaccine, RSV vaccines coming to market, workflow integration, and community hesitancy. Opportunities to provide timely communications to pharmacy teams has been integral to overall success of this project.

REFERENCES

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ACKNOWLEDGEMENTS

Funding for this project was provided by the Tennessee Department of Health.

We would like to acknowledge the pharmacies enrolled in the project and our partnerships with APhA Foundation, CPESN TN and Pierce PR for providing technical assistance and resources for the project.