Influenza Immunization Program: 2014/2015 Update for Pharmacists

Influenza immunization remains the most effective way to reduce the morbidity and mortality associated with this disease. As one of the early adopters in Canada of a universal program for influenza immunization and the first province to include pharmacists in the delivery of our program, Alberta is recognized as a leader in this area. To continue to make strides in protecting Albertans, we know there are still gains to be made in increasing the levels of immunization in the general public, and especially among those delivering services in health care settings.

This year, several activities are underway to enhance our provincial program. Our objectives are to increase the availability of vaccines, improve the management of inventory, streamline distribution to providers, enhance uptake by the public and especially by health care workers, rationalize the collection of data, and report back on the success of the program in a timely manner.

This update is the first in a series of monthly communiqués that will be provided to keep you informed of changes being made.

Vaccine Procurement

Alberta Health has ordered sufficient vaccine to immunize 45 percent of the population (2,100,000 doses). Last season 27 percent of Albertans were immunized. Agriflu® and FluMist® (for 9 – 17 year old children) will be the influenza vaccines distributed to pharmacies. Delivery dates will be confirmed once the shipment details are finalized. It is anticipated that the vaccine will be at Alberta Health’s Provincial Vaccine Depot by mid-September. Although the public program will begin October 20th 2014, pharmacists may administer publicly-funded vaccine to Albertans who will be leaving the province prior to that date.

Pharmacists’ Scope of Practice

As pharmacists assume a larger role in the Influenza Immunization Program (IIP), there is increased interest in assuming more responsibility for the administration of the influenza vaccine to additional groups. Scope of practice is an important issue that will continue to be discussed. Minor modifications have been made this year, and details are outlined in Appendix A of this document.
Informed Consent

Application of the Standard of Practice for Pharmacists respecting administration of a drug, blood product or vaccine (Standard 17) indicates that an informed consent is required, but does not specify that it must be written. Therefore, informed consent is required, but not a signed consent.

Pharmacy Wholesale Distribution

Pharmacy wholesalers will be distributing vaccine directly to Alberta pharmacies. This will allow vaccine to be provided to pharmacies through their usual ‘just in time’ ordering processes. Alberta Health Services (AHS) will no longer require pharmacies to complete individual service agreements with pharmacists. Ministerial Order 23-2014, The Compensation Plan for Pharmacy Services, will replace the use of individual service agreements for pharmacists. However, AHS will continue to require Adverse Event Following Immunization and Cold Chain Break Reporting from pharmacists for follow-up.

Communication Strategy

With sufficient vaccine to provide coverage for 45 percent of the population, a coordinated communication strategy is crucial. Further details will be provided when developed.

Communication to the public is important to ensure they know why they need to be immunized, where they can be immunized, and that the vaccine is safe. Mechanisms to include pharmacy organizations in the conversation are underway, so that common communication themes can be supported, and clear content is provided by all partners in Alberta’s Influenza Immunization Program.

Communication with partners in the program is also important. Alberta Health will provide real time program information and updates to all partners in the IIP. Further details will be provided in future communiqués.
Alberta Health’s Influenza Immunization Policy (IIP) will be updated by June/July, 2014 and will be posted on Alberta Health Services website.

The Universal Influenza Immunization Program objectives are to:

- Immunize as many Albertans as possible, up to 45% of the population;
- Immunize at least 80 percent of healthcare workers;
- Reduce the incidence of influenza in Alberta; and
- Reduce the impact on the healthcare system.

**Principle:** Minimize duplication of services between existing public health programs and pharmacy programs. Each pharmacy should work with their local public health clinics to ensure they are aware of services provided and clinics offered by public health in their community prior to setting up contracts or making appointments with clients/sites.

**Process Clarification** for Publicly Funded Vaccines:

- Alberta Health Services (AHS) will no longer require pharmacies to complete individual service agreements with pharmacists – Ministerial Order 23-2014 has been updated and will replace vaccine agreements, however, AHS will continue to require Adverse Event Following Immunization and Cold Chain Break Reporting from pharmacists for follow-up.
- Alberta Health will require, at minimum, monthly reporting by all community providers. Pharmacy reporting is provided to Alberta Health via Alberta Blue Cross. The goal is to receive individual immunization events on everyone receiving influenza vaccine provided by pharmacists. For those services that do not qualify for IIP payment through Alberta Blue Cross, e.g., worksite immunizations, a PIN with a $0 eligible amount can be used for such claims to capture these immunizations.
- AHS will continue to offer influenza education and post clinical influenza resources on the AHS website for pharmacists to access as needed.
- Once the large public clinics have ended at a particular site and immunization services are no longer offered by public health, pharmacies may set up additional clinics at that site as required, until March 31st.

**Pharmacists’ services** that can be billed via Alberta Blue Cross include immunization services provided at:

- Pharmacies
- Shopping malls
• Community centers
• Home visits to clients not seen by public health or homecare nurses
• Mobile clinics
• Institutional settings where public health or other health care providers are not providing services
• Physicians’ offices, and other health care settings to immunize clients, as long as they are not in institutional settings.

Pharmacists’ services that CAN NOT be billed via Alberta Blue Cross include immunization services provided to:

• People in any setting where the fee-for-service is being paid by the employer,
• People at the following ‘on site’ settings with worksite contracts:
  o Staff at post-secondary institutions,
  o Staff at schools/other child care settings
  o Workers and staff at camps where public health or occupational services are not provided
  o Staff at physician offices and other health care settings

Out-of-scope services for pharmacists include:

• Immunization of children under nine years of age (includes injectable and non-injectable vaccines).
• Institutional Settings (long term care, lodges, group homes, assisted living) that receive services from public health or home care
• Post-Secondary students where immunization clinics are being offered. However, if the clinic is no longer offering immunization, pharmacists may offer this service.
• Schools/ Child Care Settings
• Homebound clients seen by public health or home care