PHARMACY PANDEMIC PLANNING INNOVATIONS

PANDEMIC PLANNING TEAM

☐ Logistics: Bryan Alexander, Scott Bergman, Amber Johnston, Angela Loftus, Kelly Marinan, Lori Peters, Katie Reisbig, John Schoen  Team Leader: Melissa Welch

☐ Operations: Jayme Anderson, Krsty Baack, Kelly Marinan, Katie Reisbig, Brian Trevarrow, Nikki Yost  Team Leader: Colleen Malashock

☐ Communications: Kristin Daniel, Patrick Fuller, Jon Knezevich, Emilie Langenhan, Kelly Marinan  Team Leader: Nikki Yost

LOGISTICS

☒ Enhanced process for monitoring/trending of weekly utilization trends for essential medications
  • Real time utilization reports have prevented us from running short on products that we are turning rapidly and to back off on ordering additional supply when utilization falls off
  • Direct cost savings would be difficult to quantify with current systems; however, anticipate savings due to our ability to predict needs and order from primary suppliers during standard business hours rather than scrambling and paying more from alternate distributors and utilizing additional resources to locate product and order during off hours

☒ Coordination with Nebraska DHHS for remdesivir allocation process
  • Contacts and processes developed in collaboration with the state will be useful if we are called upon to assist with vaccine distribution in the future

☐ Distribution/tracking of state remdesivir supply

☐ Rapid deployment of eye protection to pharmacy staff

☐ Hand sanitizer production project

OPERATIONS

☒ One Chart build to ensure documentation of EUA remdesivir patient education
  • Method for satisfying the education requirement through a Smart Phrase note element was novel and can likely be translated in the future to meet similar needs

☒ Development of decontamination process, associated validation study, and educational materials
  • Goal of the project is to allow us to confidently recycle product that has entered COVID+ patient rooms after it has been disinfected by pharmacy staff – would avoid waste, assist in managing medications that are in short supply, and enhance the confidence of the pharmacy staff in the safety of a decontamination process
  • Currently attempting to quantify IV waste on 7UT
• Anticipate publication of results

☒ Development of common canister process and educational materials
  • Currently gathering data on cost savings of this initiative

☒ Development of alternative strategies for medication delivery during code/intubation emergency response
  • Strategy translates to all isolation patients moving forward
  • Validating as a component of the decontamination study above

☒ Development/modification of dual check processes for high risk medications/PPE conservation
  • Strategy translates to all isolation patients moving forward

☒ Enhanced collaboration between pharmacy and clinical nutrition for TPN management
  • Afford clinical nutrition therapists additional opportunity to practice at the top of their license

☒ Enhanced processes for cleaning of high touch areas in the central pharmacy

☒ Improved utilization of mobile tools (Perfect Serve and VoalteMe) to promote work from home – social distancing

☒ TNKase protocol work for patients ineligible for PCI

☐ Preparation work for tents in the ER, drip calculations, IV push medication administration

☐ Residency training innovations to collaborate and ensure a balance between their educational experience and enhanced staffing

☒ Opportunity to explore utilization of Continuous Glucose Monitors in inpatients
  • Protocols under development but this technology has the potential to greatly enhance our ability to detect early hypoglycemia and treat before the patient experiences an adverse event

COMMUNICATIONS

☐ ED Pharmacists calling Covid+ patients in the community

☐ Telepharmacists assisting with the patient information line for the United Way

☐ Triage assistance provided by the Drug Policy/Drug Information pharmacists

☐ Daily What You Need to Know COVID emails

☒ Increased communication regarding shortages to the staff

☐ National presentations and podcast

☒ Enhanced utilization of shared workspace platforms like Microsoft teams

☐ COVID treatment guidance document with review of current literature and infectious disease professionals input on available treatment modalities

☐ Novel staff check-in system to monitor staffing levels and streamline communications

NOTE: Items with an “X” will be continued post pandemic due to their positive impact on our communications or operations

Questions or additional information requests please contact: Colleen Malashock, PharmD, BCPS
cmalashock@nebraskamed.com 402.559.8804