Evaluating the Impact of an Immunization Check-Up at a Pharmacist-Provided Employee Health Screening

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Background: Each year eligible, non-represented Kroger employees and covered spouses undergo health screenings for the ability to choose their insurance plan. At a typical employee health screening, four main markers are assessed—blood pressure, blood glucose, cholesterol, and body mass index. At employee health screenings completed at the 15 pharmacies in District B of the Mid-Atlantic Division in 2015, pharmacists added an immunization check-up based on guidance from the Advisory Committee on Immunization Practices and the Centers for Disease Control and Prevention. The immunization check-up was added to incorporate vaccination needs assessment and recommendations to improve vaccination coverage and reduce the risk of vaccine-preventable diseases.

Research Objectives: To determine which type of vaccine recommendations are accepted and acted upon by patients after an immunization check-up at a pharmacist-provided employee health screening and to evaluate if there is a difference between influenza and non-influenza vaccines

Methods: This retrospective, observational study evaluated the impact of the immunization check-up in an effort to get employees up-to-date on immunizations. All employees and spouses who participated in one of the 252 health screenings in central Virginia in 2015 were included in the study.

Screening forms were analyzed to collect the number and type of vaccines recommended during the immunization check-up. Each eligible participant’s profile was evaluated to determine if he or she received the vaccines at any Kroger pharmacy within a six-month time frame. Patient identifiers were not collected; however, demographics including age, disease state history of consequence for recommendations, and smoking status were collected with immunization recommendations and uptake. Data was analyzed using descriptive statistics and chi-square tests to determine the acceptance of vaccine recommendations and to differentiate the acceptance of influenza and non-influenza vaccine recommendations, respectively.

Results: A total of 349 immunization recommendations were made at the employee health screenings. Influenza comprised 248 of the recommendations along with 42 pneumococcal polysaccharide (PPSV23), 40 tetanus/diptheria/pertussis (Tdap), 12 herpes zoster, 4 pneumococcal conjugate (PCV13), and 3 hepatitis B recommendations made. Both influenza and PCV13 had acceptance rates of 50%, while herpes zoster, Tdap, hepatitis B, and PPSV23 each had 42%, 35%, 33%, and 24% acceptance rates, respectively. When comparing the 32% acceptance rate of non-influenza recommendations to the 50% acceptance rate of influenza recommendations, a statistically significant difference was found between the types of recommendations accepted and acted upon by patients (p=0.002).

Conclusion: An immunization check-up performed at a pharmacist-led employee health screening can lead to patient acceptance of recommendations and receipt of needed immunizations.