

Rx Response Report:

Spring 2012 Update

Pharmacy Status Reporting Tool Enhanced for 2012

Rx Response has made important enhancements to its online *Pharmacy Status Reporting Tool* (PSRT). The PSRT shows pharmacies that have resumed serving the public following a major disaster and displays these pharmacies on a map available on the RxResponse.org website. Following the extensive winter ice storms in 2011, the tool was slowed down by the high number of pharmacies it was reporting on across thirty states.

In response, Rx Response modified the reporting function to provide additional information on the overall access to pharmacy services in the disaster impacted areas, by displaying county-by-county status as well as individual pharmacy status. A second enhancement to the PSRT enables emergency managers, public health officials and pharmacy staff to provide status updates about open pharmacies in their location or submit questions to Rx Response staff. However, there could be instances in which pharmacies are open but have limited capabilities due to the impact of the disaster. The ability of personnel on the ground to provide first hand information about a pharmacy through the new feedback tool will enable Rx Response to provide more accurate information about the status of individual pharmacies.



“We are excited about the enhancements to the *Pharmacy Status Reporting Tool*,” said Alex Adams, Director of Pharmacy Program for the National Association of Chain Drug Stores (NACDS), a key member of Rx Response. “We encourage emergency managers and public health officials to use the tool as a resource when their community has been impacted by a disaster. We also encourage pharmacy employees to use the new feedback option to share first hand information with Rx Response about the status of their pharmacy.”

New Technology Makes Rx Response A More Powerful Tool for 2012 Hurricane Season

As the 2012 Atlantic hurricane season gets underway, Rx Response has launched two technology enhancements that will make Rx Response an even more powerful resource in helping to ensure the continued flow of medicine following a major disaster.



The enhancements include a smartphone friendly version of the RxResponse.org website and important upgrades to the *Pharmacy Status Reporting Tool* (PSRT). (See separate story in sidebar).

The new smartphone friendly website will provide access to critical online Rx Response resources including the PSRT, activation status for emergencies, emergency situation reports and the downloadable prescription medication wallet card.

“As more and more emergency managers and public health officials rely on smartphones, we want to be sure the Rx Response website and its emergency response resources are still readily accessible whether someone is working in an emergency operations center or out in the field responding to a disaster,” said Rx Response Director Erin Mullen.

Another important benefit of the smartphone friendly version of the website is the wider availability of the [Rx Response Prescription Medication Wallet Card](#). The card enables citizens to fill in the names of their medications and other key information, including phone numbers for doctors and pharmacies, and then print out the card which can be kept in a person's wallet or purse.

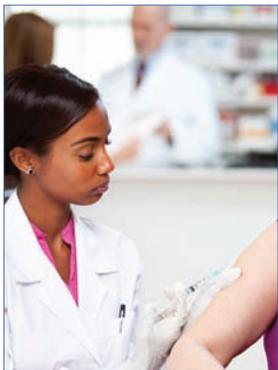
Oftentimes people forced from an area due to a disaster forget to bring important medical information with them,



including the names and dosages of critical medicines. Filling out the prescription medication card before a disaster strikes enables people to be better prepared if disaster forces them to refill prescriptions in an unfamiliar location where they are unknown by pharmacists.

“One of the problems we’ve seen following major disasters is the challenge people face in taking daily medications to treat chronic illness,” said Rx Response Director Erin Mullen, who is also a pharmacist. “Most patients can get by for a couple of days without some medicines but there are certain medicines that a patient must have each day to remain stable, including insulin, asthma medication and blood pressure pills.

Mullen urged her colleagues in public health and emergency management to encourage citizens to go to [RxResponse.org](https://www.rxresponse.org) and fill out the prescription medication card before a disaster strikes.



CDC to Consider a Broader Role for Community Pharmacies in Future Pandemics

At the height of the H1N1 pandemic in 2009, the U.S. Department of Health and Human Services’ Centers for Disease Control and

Prevention (CDC) eagerly embraced America’s community pharmacies as an additional dispensing resource in the largest vaccination campaign in human history. By the end of 2009, over 14 million seasonal and H1N1 influenza vaccinations were administered by pharmacists across the U.S.

This success did not go unnoticed. It led the CDC’s Lisa Koonin to propose a research initiative to further test the capabilities of America’s community pharmacies to provide a surge capacity in future pandemics. Koonin serves as the CDC’s Lead for Pandemic Medical Care and Countermeasures Planning and Response in the CDC’s Influenza Coordination Unit. Koonin, and her colleague Dr. Anita Patel, the scientist in the CDC’s Strategic National Stockpile Program, enlisted ASTHO, NACCHO, Rx Response Director Erin Mullen and many other stakeholders to help design a simulation drill that envisions an even deadlier pandemic than the 2009 outbreak. Mullen is also advising this team on how to enlist the appropriate pharmacy resources for the drill.

The simulated pandemic comes with a frightening twist. No vaccine will be quickly available at the start of this scenario, and

a large number of people will become ill and require treatment with antivirals. This will require U.S. officials to send out the federal stockpile of antiviral medicines. A concerned public seeking medicine for those who are sick will also mean that community pharmacies, a critically important dispensing resource, will once again become a focus in the response to the pandemic.

To assess the readiness of community pharmacies to handle this task, Mullen recommended that Rx Response members National Association of Drug Chain Stores (NACDS) and National Community Pharmacy Association (NCPA) join the drill. Both organizations enthusiastically agreed and have each recruited a member pharmacy to participate. The drill simulates large numbers of patients into each pharmacy seeking antiviral medications. This will allow CDC and its partners to test the surge capacity of community pharmacies’ staff and the systems needed to fill the anticipated unusually high volume of prescriptions. The NCPA member, an independent pharmacy in Missouri, already hosted the drill with interesting and helpful results.

“I think much of the learning that the community pharmacy and the CDC hoped to achieve in this first test happened,” said Lisa Schwartz, PharmD, Director of Management Affairs at NCPA. “There were a lot of small logistical lessons learned. The pharmacy printer went down in the middle of the drill which is not uncommon during normal operations. We also learned that the pharmacy became more efficient at handling the high volume over the course of the drill. The pharmacist brought in some part-time staff to help with the surge and that was very effective. Perhaps one of the most critical lessons was the importance of having extra staff available when needed. This could be a significantly greater challenge for an independent pharmacy than for a chain pharmacy which has a much greater ability to bring in additional resources from other stores.”

To help understand how a chain pharmacy might function differently in handling a surge of customers, a Walgreens Pharmacy in Chicago has been selected as the second test location for the drill. This simulation will take place in late June. NACDS’s Alex Adams, PharmD, Director of Pharmacy Programs at NACDS, has been working with the CDC and other drill partners. “The chain pharmacy industry has been active in addressing disaster preparedness across the nation and we are excited to participate in this drill,” said Adams.

Another key player in the drill is the Association of State and Territorial Health Officials (ASTHO), which the CDC tapped to help manage the overall initiative. Ericka McGowan, ASTHO’s Director of Countermeasure Management and Evaluation, has been working closely with the CDC, NACCHO, Rx Response and others to develop and implement the drill.

“State health agencies will be on the front lines of managing response to a pandemic so this drill is a great opportunity for ASTHO to help our members understand how they may be able to work alongside community pharmacies in addressing their population’s urgent need for antiviral medications,” said McGowan.

In addition to the two drills at community pharmacies, the initiative also includes focus group research with consumers and front line pharmacists to assess how both groups feel about the expanded role of community pharmacies in a pandemic.

Rx Response Partnership with Washington, D.C. Department of Health Advances Private Sector Engagement in Responding to Anthrax Attack

An unexpected but welcome outcome of a recent meeting between Rx Response officials and the D.C. Department of Health (DOH) was the involvement of Rx Response in an exercise designed to enlist private employers in dispensing emergency medications to employees and their families following a release of aerosolized anthrax.



Rx Response Director Erin Mullen oversees PhRMA staff preparing to distribute antibiotics during the recent exercise with the District of Columbia Department of Health.

The exercise was focused on creating private Point of Dispensing (POD) sites that would reduce pressure on public distribution points for large scale dispensing of ciprofloxacin and doxycycline following an anthrax attack.

Rx Response Director Erin Mullen offered to participate in the exercise after being briefed about it during her recent meeting with D.C. officials. Given her background as a pharmacist and an emergency manager, Mullen helped set up and run the exercise for Rx Response member PhRMA, who was the designated private sector participant in the exercise.

“The exercise was a great opportunity to test the concept that with some minor training, private sector organizations could dispense ciprofloxacin or doxycycline to employees and provide employees with the medicine needed for immediate family members in the event of an anthrax attack,” said Mullen. “The ideal next step would be for more large employers to become equipped to meet this need in a real emergency. Success on this front could help employers keep their workers (and their families) safe as well as divert thousands of people from relying on public distribution

points which would be severely taxed in an actual anthrax attack.”

Employers interested in becoming a Point of Dispensing organization can learn about the process from the Closed POD Toolkit at <http://charmec.org/mecklenburg/county/HealthDepartment/Preparedness/Pages/ClosedPOD.aspx>.

To find state health department contact information in order to inquire about your state’s policies and to see if your company meets the local qualifications for participation, visit the ASTHO website at www.ASTHO.org and click on the ‘Find Your State Agency & State Health Official’ link.

Rx Response Continues to Strengthen State Partnerships

Over the course of 2011 and into 2012, Rx Response has continued its active outreach to state emergency managers and public health officials, holding 36 meetings with state officials and three meetings with major cities. The goal of the outreach is to reintroduce the Rx Response program and its capabilities for both peace time and during emergencies to emergency managers and public health officials.

The conference calls included discussions about the H1N1 pandemic and disaster planning for future pandemics. Several states asked about the potassium iodide needs their communities might face in the event of a radiological event.

Over the past several years since the inception of Rx Response, outreach calls have been made to all 50 states. However, personnel changes at the state level and Rx Response program enhancements create the need for periodic update calls between Rx Response and state officials.

“Rx Response can be the most helpful to a state when there is an existing relationship between Rx Response and state officials,” said Richard Dugas, an official with the state government of Kentucky. “During a tornado outbreak earlier this year, Rx Response was right there when our agency needed assistance, providing critical information about the status of area pharmacies. This was a big help to our disaster response efforts.”

Dugas urged emergency managers and public health officials that have not had a conference call with Rx Response Director Erin Mullen or her staff in the last six months to get in touch and schedule a call.

Mullen and the Rx Response support staff can be reached at ContactUs@rxresponse.org.



Making the Rounds

Rx Response has continued its active outreach throughout the emergency management and public health community with a host of presentations, briefings and panel discussions at key conferences and meetings throughout the U.S.

Recent Rx Response Engagements:

NACCHO Public Health Preparedness Summit

February 2012 – Rx Response Director Erin Mullen and Support Team Lead Emily St. Martin spoke to delegates in Anaheim, CA about public/private partnerships, a critical topic given the Summit’s goal of strengthening and enhancing the capabilities of public health professionals and private sector leaders to plan and prepare for, respond to, and recover from disasters and other public health emergencies.

Michigan Dept. of Community Health Office of Public Health Preparedness Health Care Conference

March 2012 — Erin Mullen was a featured speaker addressing the role of pharmacy preparedness and public private partnerships.

National Hurricane Conference

March 2012 — Rx Response staff was on hand in Orlando, FL to network with emergency managers from across the country and promote Rx Response at key breakout sessions on public health.

AMA Briefing on the Health Security Card

April 2012 — Rx Response senior staff members attended this conference to learn more about the Health Security Card (HSC) project. The HSC is a three-year public health translational research grant awarded to the AMA by the Centers for Disease Control and Prevention (CDC) Office of Public Health Preparedness & Response. The initiative seeks to promote the health, safety, and resilience of populations affected by a disaster or public health emergency. The HSC, if it becomes reality, may serve as a replacement to the ICERx.org program, which had served as a web-based electronic record of a patient’s prescription medicine history that could be used to care for patients dislocated by a disaster.

Bridging Gaps for Catastrophic Disasters: a FEMA public-private partnership workshop

May 2012 — Rx Response was invited to participate in a one-day partnership workshop where participants examined the planning for catastrophic disaster, which in this case was a category 5 hurricane making landfall during an epidemic response.

Rx Response Upcoming Engagements:

Biosecurity Conference

June 2012 — Erin Mullen will moderate a panel titled “Ensuring Local Preparedness and Response: Managing Bioterrorism and Pandemics at the State Level” at the conference – an event co-located with the BIO International Convention being held June 20-21 at the Boston Convention and Exhibition Center.

Florida Pharmacy Association 122nd Annual Meeting

July 2012 — Erin Mullen will be a featured speaker addressing the topic of weapons of mass destruction and what pharmacists should know about their role in such a scenario.

2nd National Building Resilience through Public-Private Partnerships Conference

July 2012 — Rx Response’s Emily St. Martin will be speaking on a panel titled “Partnering to Save Lives” as part of a two-day conference focused on “Whole Community and Strengthening Partnerships” hosted by U.S Northern Command, FEMA and DHS.

Rx Response Exercise to Test Program Readiness

On June 1, 2012, Rx Response will hold an internal disaster exercise to test the program’s readiness to respond to a different type of disaster — one never before experienced in the U.S.

The exercise will provide an opportunity for Rx Response Coordinating Body members to get some hands on experience while also testing the capabilities of Rx Response’s support staff. The exercise scenario is being developed by the Rx Response Support Team, led by Emily St. Martin.

Rx Response Coalition Partners:

