Physician Assistant Perspective: Policy, Practice, & Promotion

Bob McNellis, MPH, PA
Vice President, Science and Public Health
AMA/CDC Influenza Vaccine Summit
June 30, 2009

It’s good to be back!
Introduction to AAPA

AAPA Mission
• To ensure the professional growth, personal excellence, and recognition of physician assistants, and to support their efforts to enable them to improve the quality, accessibility, and cost-effectiveness of patient-centered health care.

AAPA Vision
• The American Academy of Physician Assistants is the leader in providing support and advocacy for physician assistants, the primary organization advancing the profession, a premier participant in health care transformation, and a passionate champion of patient-centered care.

PA Fast Facts
• 85,345 PAs eligible to practice
• 73,893 PAs in clinical practice
• 142 training programs (medical model)
  – 4600 new graduates in 2007
• In 2008 PAs reported:
  - More than 257 million patient visits
  - More than 332 million prescriptions/recommendations

PAs Practice Specialty


PAs Practice Setting

Current PA role model?

Royal Pains (on USA network)
Physician Assistant Divya Katdare on right

Policies
AAPA Policy

Immunizations in Children and Adults
(Adopted 1994 and amended 2006)

- AAPA recognizes the importance of child and adult immunization programs and the need to educate individual PAs and the public about these programs.
  - PAs should be aware of current medical guidelines for immunization of children and adults.
  - Individual PAs and their practices, in cooperation with public health agencies, should promote public information campaigns to increase awareness of the importance of immunizations and allay fears and doubts about potential side effects.
  - PAs should be immunized against vaccine-preventable diseases for which health providers are at high risk. This not only protects PAs, but also protects patients by preventing provider-to-patient transmission.

Immunization CME Sessions
AAPA’s Annual Conference
May 2009, San Diego, CA

**Immunization Objectives**
- Increase the proportion of young children who receive all vaccines that have been recommended for universal administration for at least five years.
- Increase the proportion of non-institutionalized adults who are vaccinated annually against influenza and ever vaccinated against pneumococcal disease.

| CME 9041 | Pneumonia |
| CME 9132 | Herpes Zoster: Awakening a Sleeping Giant |
| CME 9253 | Adult and Health Care Provider Immunization: An Update from the CDC |
ADULT IMMUNIZATION

The 2009 vaccine schedules

WHO SHOULD BE SCREneD FOR VACCINATION STATUS?

Bylaw 10.3.5.2 mandates that all eligible adults in the United States be offered a panel of vaccines to prevent common and serious diseases. The panel includes inactivated influenza vaccine, pneumococcal polysaccharide vaccine, and tetanus and diphtheria toxoids. The panel of vaccines is updated annually to reflect changes in the vaccine market and to provide the most effective protection against vaccine-preventable diseases.

WHAT VACCINATIONS ARE CURRENTLY RECOMMENDED FOR ADULTS?

The recommendations for adult vaccination are based on the ongoing evaluation of the safety and efficacy of vaccines, as well as the recommendation of the Advisory Committee on Immunization Practices (ACIP). The ACIP provides evidence-based recommendations for the prevention and control of vaccine-preventable diseases. The ACIP recommendations are updated annually to reflect changes in the vaccine market and to provide the most effective protection against vaccine-preventable diseases.

FOR ADULTS:

• Influenza vaccine is recommended for all adults to prevent influenza, a common and serious disease that can result in hospitalization, severe illness, and death.

• Pneumococcal polysaccharide vaccine is recommended for adults age 65 years and older to prevent invasive pneumococcal disease, a serious and often fatal infection.

• Tetanus and diphtheria toxoids are recommended for all adults to prevent tetanus and diphtheria, which can be life-threatening.

TAKING CARE OF YOURSELF:

• Get vaccinated against influenza, pneumococcal, and tetanus and diphtheria.

• Practice good hygiene to prevent the spread of disease.

• Get regular check-ups to monitor your health.

• Eat a healthy diet and exercise regularly to maintain a healthy weight.

• Avoid tobacco and excessive alcohol intake.

• Maintain social support and stay connected with loved ones.

• Stay informed about health news and updates.

• Practice safe sex and use condoms to prevent sexually transmitted infections.

• Stay up-to-date on the latest medical research and breakthroughs.

• Seek medical attention for any symptoms that concern you.

• Use public transportation, avoid crowds, and maintain social distancing to reduce the spread of disease.

• Stay active and engage in regular physical activity.

• Stay up-to-date on the latest guidelines and recommendations for vaccination.
Do PAs provide or ensure that children and adults have received the recommended vaccinations?

Percent of PAs who have implemented Healthy People 2010 LHI objectives into their practices

Patient Visits to PAs for Select Disorders/Conditions in 2008

In 2008 there were 6,303,579 pediatric immunization visits and 5,490,868 adult immunization visits to PAs.

Source: Information Update: Number of Visits to Physician Assistants for Select Disorders in 2008.
Percent of PAs Receiving Annual Influenza Vaccine, By Specialty

Overall, 67% of PAs reported receiving an influenza vaccine in 2008.

PAs Receiving Training for Influenza Pandemic
Are PAs prepared for an Influenza Pandemic?

• 22% of PAs have been trained to deal with an influenza pandemic
• 3% say they have responded to an influenza pandemic!

<table>
<thead>
<tr>
<th>Threat</th>
<th>Trained</th>
<th>Responded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biological threats</td>
<td>31%</td>
<td>4%</td>
</tr>
<tr>
<td>Chemical threats</td>
<td>29%</td>
<td>5%</td>
</tr>
<tr>
<td>Radiation threats</td>
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<tr>
<td>Nuclear threats</td>
<td>19%</td>
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<tr>
<td>Natural disasters</td>
<td>27%</td>
<td>14%</td>
</tr>
<tr>
<td>Mass casualty events</td>
<td>37%</td>
<td>18%</td>
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</tbody>
</table>
New product promotion ideas

1918

1930’s

Partnerships

• National Influenza Vaccine Summit
• National Influenza Vaccine Week
• Childhood Influenza Immunization Coalition
• Attend ACIP, NVAC, NIC
• Immunize Now!
• Report these activities to our membership
Promotion

• PA Professional, monthly news magazine
• Immunization Web page
• Monthly electronic news blast to members
• Daily medical news e-mail
• Social media efforts – Facebook, Twitter, YouTube

As an employer

• Offer free, on-site influenza vaccination to employees in October each year
• Certificates for vaccination given to those not on-site on vaccination day
• Last year, of 78 staff, 39 received vaccination, and 4 received certificates
• Provide occasional informational presentations
Bioterrorism: What do we need to know?

Bob McNellis, MPH, PA-C
Assistant Professor, Epidemiology and Biostatistics, GWU School of Public Health and Health Services

Marie-Michele Leger, MPH, PA-C
Manager, Hospital Epidemiology and Infection Control
Children's National Medical Center
October 30, 2001

Influenza Season, 2004-05

PA-STAFF-AGAINST-THE-FLU
October 29, 2004
Swine Flu and You

May 5, 2009
Bob McNellis, MPH, PA
Vice President, Science and Public Health

In Conclusion

• AAPA believes in the importance of immunization, especially for influenza
• PAs see millions of patients for immunization visits, more opportunities
• Many PAs get vaccinated, many still do not
• In partnership, we are prepared to ratchet up the message and interventions
Thank you!