

The A to Z of FarmaForms

The coronavirus pandemic has definitively put the pharmacist on the healthcare map. In part, thanks to the innovative developments of FarmaFlux, the pharmacist is increasingly positioned as a front line healthcare provider. A little flashback ...

It all started last year when the government asked pharmacists to contribute to increasing vaccination take-up. After all, our network of 4,700 pharmacies is, because of its proximity, accessibility and its 500,000 daily visitors, extremely well adapted to reaching the general public.

Uniformity

The computer experts at FarmaFlux started to create a new tool, just as they have been developing new services for years, based on the three basic principles of: simplicity, added value for the pharmacist and digitalisation. Just think of DPP, Assurpharma and RAOTD. This pandemic thus presented an opportunity to pursue this logic further. As Koen Straetmans, President of APB states: *"We have, for a long time, had the idea of offering uniform pharmaceutical care when launching new services. The coronavirus allowed us to put this project into place more quickly."*

Using the FHIR Form Builder, FarmaFlux developed the tool, a FarmaForm, which appears as a pop-up of the pharmacist's screen. Koen Straetmans notes: *"Usually, we would transmit technical instructions to eight different software houses. But here, by introducing an identical FarmaForm into each software package, we were able to act very quickly. Thanks to this homogeneity we were able to not only guide all pharmacists to deploy this service following a single protocol, but we were also able to demonstrate to authorities the efficacy and agility of our sector."*

Security every step of the way

FarmaFlux guarantees that the flow of information towards the pharmacy is safe and consistent and does not store patient data, which ensures the respect of privacy and confidentiality. During the information campaign on the COVID-19 vaccine, FarmaFlux was, for example, just the facilitator of communication between the pharmacy and the Vaccination Code Database – the original source of vaccination codes which makes it possible to decide whether or not a pop-up should be displayed.

Stepping into the breach

A second opportunity to use FarmaForms presented itself when pharmacists were authorised to carry out rapid tests in the pharmacy. Barbara Verboven, project officer for *Taskforce Testing*, explains: *"It all started in April 2021 with a pilot project testing symptomatic patients in eight Brussels pharmacies. The results spoke for themselves: not only did the Sciensano data show that 16% of the persons tested were positive (compared to 7% to 8% in the testing centres), but moreover, these were primarily people who we would not have been able to reach otherwise. People who did not have a general practitioner and who could not or did not want to go to a doctor and a testing centre."*

In order to relieve doctors and testing centres, pharmacists were implicated in the testing of un-symptomatic travellers and festival goers from 12 July 2021 onwards so as to allow them to travel or take part in events with complete peace of mind. FarmaFlux developed a new electronic form (eForm) with this specifically in mind, facilitating the registration of rapid tests in the pharmacy. FarmaFlux then sends these eForms to Sciensano who processes them and transmits them to *Digitaal Vlaanderen* who creates the

certificates for citizens registering a negative test and makes them available on the CovidSafe app and on MaSante.be.

Transparency

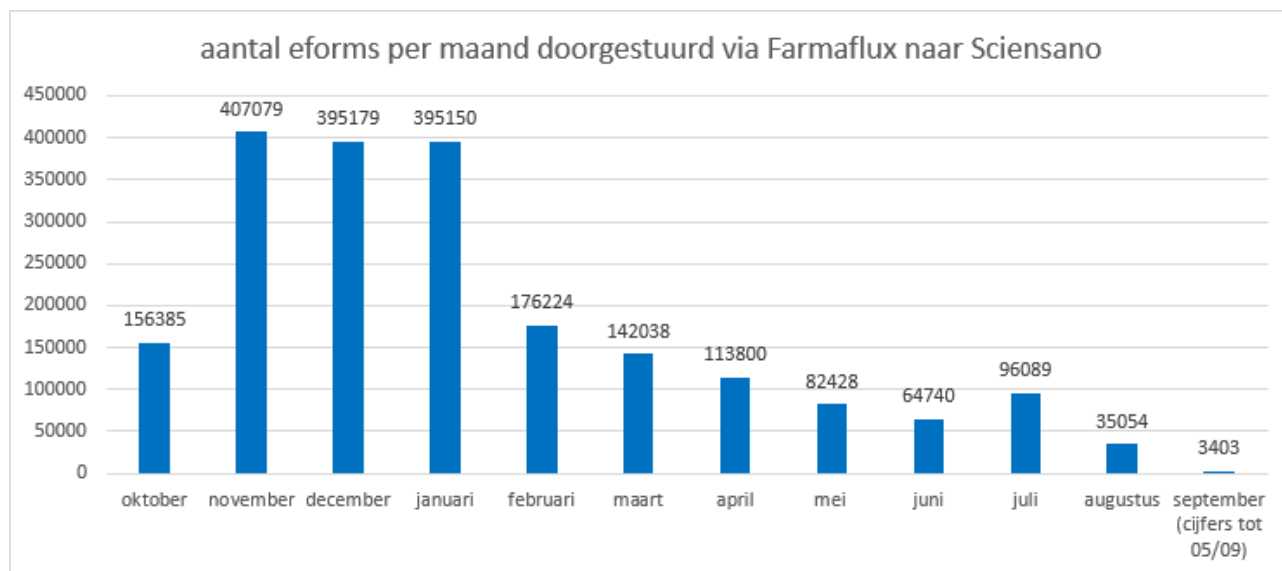
What does FarmaFlux do with the FarmaForms filled in by the pharmacist?

Boris Ideler, data engineer Flux : *“We analyse the metadata and transform them into a dashboard able to detect any technical anomaly. We also verify constantly if there are any problems with the deployment of this service or with the software providers. We also work as closely as possible with the latter to detect and resolve any problem rapidly, so that it does not impact on the daily functioning of the pharmacy. On the basis of the metadata coming out of the FarmaForms, we also provide reports for the development and protection of the profession, and this with regard to the authorities, the regions, the provinces, the frontline sectors and the individual pharmacy.”*

Crucial reports

Koen Straetmans : *“Without these reports we would never have been able to defend the idea of getting pharmacists involved in the testing strategy, and then to move on to symptomatic patients and to everything that we now do. On a daily or weekly basis, we communicate how many rapid tests have been carried out, with a breakdown between the sub-groups (travellers and (un)symptomatic patients or between regions. For the authorities, it is important to know how the allocated budget is being spent and how the entrusted service is being deployed. In addition to this quantitative report, we also want to include more qualitative parameters in the future.”*

Total number of eForms sent per month via FarmaFlux to Sciensano



FarmaForm not linked to the coronavirus

Monitoring of the flu has become the next example of harmonised pharmaceutical care. Manon Buyl, expert pharmacist at the APB, remembers: *“When it was decided, following the summer of 2021, that pharmacists could prescribe a flu vaccine, we immediately asked ourselves how we could provide maximum*

support. In order to offer a ready-to-use solution to all the software houses, we combined the years of knowledge of the KOVAG on flu education with the technology of our FarmaForms.”

Boris Ideler : “Thanks to the patient’s NISS number, the pharmacist can see if the person belongs to the identified target group (50+, diabetic, heart, kidney or respiratory problems). If this is the case, a personalised and secure URL opens and a form appears on the screen, in which the patient information has already been completed. After having administered the vaccine, the pharmacist completes the form and sends it to FarmaFlux, who controls the total number of vaccines given in order to highlight the role of the pharmacist in this campaign against the flu.”

Future proof

*Koen Straetmans : “For the future, we have also positioned these FarmaForms with the authorities for upcoming projects because it is a win-win system for all those involved: for the pharmacist, there is a uniform way of working, a protocol and support; for the government, the homogeneity and the reporting are a plus. I also see another advantage, which is that we can record the result of the pharmaceutical care intervention on the PCDH ** and, further down the line, share it with the doctor and the patient. In any case, we are prepared for this although we are not there yet.”*

Wiki-data

**FHIR : Fast Healthcare Interoperability Resources, an international coding standard, that FarmaFlux is one of the first to use in Belgium.*

***PCDH : Pharmaceutical Care Data Hub, server currently hosting the encrypted DPP.*