

# PHARMACEUTICAL HOME DELIVERY DURING COVID-19

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**Background** During the COVID19 pandemic, the Spanish community pharmacy (CP) has provided pharmaceutical home delivery (PHD) services to vulnerable patients. In fact, some regional health administrations have expressly regulated the home delivery of drugs dispensed in pharmacies, that was not allowed until that moment. Spanish Community Pharmacy Society (SEFAC) has provided a PHD protocol and a digital platform to register (SEFAC eXPERT) which has guided CP in their approach to this new way to work with patients.

**Purpose** 1- Describe the actions related to the pharmaceutical home delivery during the state of alarm and confinement. 2- Know the care needs of patients during confinement. 3- Identify the profile of the vulnerable patients treated

**Method** Observational, descriptive, cross-sectional, retrospective and multicenter study of the records made by CP of the activities related to (PHD) to the vulnerable population. Within the SEFAC expert service platform, an area was set up to record the services demanded by the patient, the vulnerability and status of the patient making the request, as well as the interventions carried out by the pharmacist.

**Findings** Fifty-six CP participated and received 1307 patient's requests.: Women (59.9%) mean age 69.5 years (SD = 17.24). 36.8% had never made requests before. 2.8% were covid +, 55.1% were not in isolation, 2.5% had symptoms compatible with COVID + and 39.6% neither had symptoms, nor was COVID +, nor was isolated. 88.5% were patients vulnerable to COVID + and 33.5% lived alone and without a caregiver. 26.8% did not know the process of using the medications. The requests were in most cases by telephone (79%,) and in person in CP (7.4%). The services provided: dispensing with home delivery (52.5%,), dose administration aids with home delivery (11.1%), consultations (8.9%), dose administration aids (8,4%), Minor Ailment Service (4.8%) and others (14.3%). 5.1% of the drugs were Hospital Drugs (HD). The interventions were: Personalized Drug Information (PDI) (17.5%), health education (15.8%), health education + dose administration aids (14.9%), pharmacovigilance + dose administration aids (8, 6%), dose administration aids (8.4), others (14.5%), 20.3% were not recorded.

**Conclusion** The confinement has allowed PHD to be carried out by those vulnerable patients, who have sued the CP mainly for the dispensing service with drug delivery, with a direct relationship between the vulnerability of suffering from COVID-19 with the number of requests. In the other hand, the PHD registration tool within the SEFAC e\_XPERT® program has shown its usefulness in registering patients during the COVID19.