To obtain a real-time status of pharmacy resources during the current COVID-19 pandemic, ASHP is periodically surveying members of the Section of Pharmacy Practice Leaders. The surveys are designed to assess the status of pharmacy resources, including personal protective equipment (PPE) and critical drug supplies. The surveys are informal and nonscientific and are not designed for statistical analysis. Questions about other impacted pharmacy resources are added as trends develop.

The following includes results from the sixth survey (Round 6), which included 131 respondents and contained 20 questions that were fielded for three days. When applicable, the data are compared to the previous five surveys that began in mid-March.

KEY FINDINGS

- Two-thirds of the 112 respondents who received remdesivir had enough of the drug to treat all eligible patients under the Food and Drug Administration’s Emergency Use Authorization criteria.
- Ninety-three percent of participants responded that their institution had temporarily stopped elective surgeries but have since resumed.
  - Four percent temporarily stopped elective surgeries, resumed them, and temporarily stopped again
- Supplies of select ICU medications continue to improve with the exception of the neuromuscular blockers cisatracurium and vecuronium.
  - No respondents indicated they were out of dexamethasone
  - Sixteen percent indicated they had a low supply (less than seven days’ supply) on hand
- Availability of most cleanroom supplies have improved from previous surveys:
  - Shoe covers (3%), and gowns used for hazardous-drug (HD) preparation (3%) were the supplies most commonly unavailable from wholesalers
  - Standard gowns and gowns used for HD preparation were the only two supplies with worse availability since Round 5
    - Standard gowns were intermittently available according to 57% of respondents (up from 37% in Round 5)
    - Gowns for HD preparation were intermittently available according to 49% of respondents (up from 30% in Round 5)
- About half of respondents indicated that positive or presumed-positive COVID-19 cases among pharmacy staff or members of their household has affected staff scheduling.
- Eighty-seven percent of respondents indicated their department or health system is assessing employee stress and well-being.
- Seventy-seven percent of respondents reported that their department or health system is taking action to minimize stress and reduce the risk of burnout during the pandemic.

ROUND 6 PARTICIPANTS

- There were 131 respondents representing hospitals of various sizes:
  - Small hospitals (< 200 beds): 22%
  - Medium hospitals (200-500 beds): 30%
  - Large hospitals (> 500 beds): 44%
  - Other (not a hospital setting): 4%
- The highest number of Round 6 respondents were from California (10), North Carolina (8), and Massachusetts (8).
ROUND 6 RESULTS

ICU Census

- Of the 115 respondents with an ICU, 23% indicated greater than half of their ICU census consisted of COVID-19 patients (down from 33% in Round 5 and 40% in Round 4).

Hospital Medication Inventories

- Among respondents with an ICU at least half full of COVID-19 patients, the ICU drugs with the most critical current inventory status were:
  - Cisatracurium (12% with < 1 day supply, 12% with < 7 day supply)
  - Atracurium (4% with < 1 day supply, 8% with < 7 day supply)
  - Vecuronium (8% with < 1 day supply, 20% with < 7 day supply)
  - Fentanyl (no respondents with < 1 day supply, 8% with < 7 day supply)
  - Midazolam (no respondents with < 1 day supply, 12% with < 7 day supply)

- With the exception of vecuronium, the inventory status of each of these medications has improved since the previous survey rounds.

- On June 16, the RECOVERY trial investigators released information demonstrating improved mortality in specific COVID-19 patients receiving dexamethasone. Subsequently, dexamethasone was added to the question assessing inventory status.
  - No respondents indicated < 1 day supply of dexamethasone
  - 16% of respondents indicated a low supply of dexamethasone (less than seven days’ supply)
Sterile Compounding Supplies

- Respondents indicated ongoing challenges with some cleanroom supplies.
  - The availability of some supplies has improved in the number of respondents reporting no availability or intermittent availability
    - Sterile alcohol (2% not available, 35% intermittently available)
    - Sterile gloves (no respondents reporting not available, 30% intermittently available)
    - HD sterile gloves (3% not available, 34% intermittently available)
    - Masks (1% not available, 41% intermittently available)
    - Shoe covers (3% not available, 43% intermittently available)
  - The availability of standard gowns and HD gowns has become more concerning:
    - 57% indicated gowns were only intermittently available (up from 37% in Round 5)
    - 49% indicated HD gowns were only intermittently available (up from 30% in Round 5)
Remdesivir
- 89% of respondents received remdesivir
  - Of those, two-thirds received enough to treat all patients according to the criteria outlined in the remdesivir Emergency Use Authorization
  - Three percent of respondents received remdesivir but exhausted supplies and could not treat some patients

<table>
<thead>
<tr>
<th>Statement</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>We have received enough remdesivir to treat all eligible COVID-19 patients</td>
<td>66%</td>
</tr>
<tr>
<td>We have received remdesivir but only enough to treat some COVID-19 patients who meet strict clinical criteria</td>
<td>31%</td>
</tr>
<tr>
<td>We have received remdesivir but exhausted supplies and could not treat some patients</td>
<td>3%</td>
</tr>
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Elective Surgeries
- 99% of respondents indicated their hospital temporarily halted elective surgeries during the pandemic.
  - 93% have resumed
  - 4% have resumed but have temporarily stopped again
  - Two percent have not yet resumed elective surgeries
We temporarily stopped elective surgeries but have resumed

We temporarily stopped elective surgeries, resumed them, but have stopped them again

We temporarily stopped elective surgeries and have not yet resumed

We did not stop elective surgeries

**Staff Scheduling**

- Respondents were asked what effect positive or presumed-positive COVID-19 cases among pharmacy staff or members of their household has had on pharmacy staff scheduling:
  - About half of respondents indicated staff scheduling has been affected by positive or presumed-positive COVID-19 cases
  - 11% have not had any positive or presumed-positive COVID-19 cases among pharmacy staff or members of their household

<table>
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<tr>
<th>n = 131</th>
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<tbody>
<tr>
<td>Staff scheduling has been affected</td>
<td>51%</td>
</tr>
<tr>
<td>Staff scheduling has been a concern but has not been affected</td>
<td>27%</td>
</tr>
<tr>
<td>Staff scheduling has not been a concern and has not been affected</td>
<td>11%</td>
</tr>
<tr>
<td>Not applicable; we have not had positive or presumed-positive COVID-19 cases among pharmacy staff or members of their household</td>
<td>11%</td>
</tr>
</tbody>
</table>

**Staff Stress and Well-being**

- The pandemic has further threatened the well-being and resilience of the healthcare workforce, exacerbating a problem that existed before COVID-19. Two questions related to stress and well-being were added to this round of the survey to gauge organization or department assessment and mitigation of stress.
  - The American Medical Association (AMA) published a document titled *Creating a Resilient Organization* to help care for healthcare workers during the crisis. Survey questions were modeled after recommendations from this resource.
    - 87% of respondents indicated their department or organization is assessing staff stress levels and well-being during the pandemic through the following activities:

<table>
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<tbody>
<tr>
<td>Leadership rounds</td>
<td>64%</td>
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<tr>
<td>Feedback from supervisors, managers and/or human resources</td>
<td>59%</td>
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<tr>
<td>Town hall meetings</td>
<td>49%</td>
</tr>
<tr>
<td>Feedback from staff surveys and/or face-to-face interviews with staff</td>
<td>48%</td>
</tr>
<tr>
<td>Statistics from employee assistance program</td>
<td>10%</td>
</tr>
<tr>
<td>My department and/or organization is not actively assessing these</td>
<td>13%</td>
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</tbody>
</table>
The AMA document also outlines suggested actions hospitals and departments can take to reduce stress and the risk of burnout during the pandemic.

- 77% of respondents indicated their department or organization has implemented some actions to improve the well-being of their staff, including:

<table>
<thead>
<tr>
<th>Action</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Ensuring staff can take breaks</td>
<td>39%</td>
</tr>
<tr>
<td>Staff celebrations</td>
<td>37%</td>
</tr>
<tr>
<td>Minimizing noncritical tasks and activities</td>
<td>36%</td>
</tr>
<tr>
<td>Offering work schedules that enable adequate sleep</td>
<td>26%</td>
</tr>
<tr>
<td>Providing easy access to water, healthy snacks, and toiletries</td>
<td>21%</td>
</tr>
<tr>
<td>Designating wellness champions</td>
<td>14%</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>16%</td>
</tr>
<tr>
<td>Not applicable</td>
<td>23%</td>
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</table>

Common responses in the “Other” category included:
- Remote work opportunities when feasible
- Encouraging use of paid leave
- Sharing wellness tips or resources

ASHP has developed a collection of webinars, podcasts, and other resources to support staff well-being and resilience during the COVID-19 pandemic.

- The ASHP COVID-19 site has a page dedicated to workplace safety and well-being.
- The ASHP Well-Being site has a page with tips for self-care during COVID-19.
- ASHP is an inaugural sponsor of the National Academy of Medicine Action Collaborative on Clinician Well-Being and Resilience. The Action Collaborative has a web page with resources to support the health and well-being of clinicians during the COVID-19 pandemic.

ABOUT ASHP

ASHP represents pharmacists who serve as patient care providers in acute and ambulatory settings. The organization’s nearly 55,000 members include pharmacists, student pharmacists, and pharmacy technicians. For more than 75 years, ASHP has been at the forefront of efforts to improve medication use and enhance patient safety. Visit ASHP’s COVID-19 Resource Center for helpful information about COVID-19.

For more information about the survey findings, please contact ASHP’s Center for Medication Safety and Quality at quality@ashp.org.