STATEWIDE INITIATIVE TO IMPROVE CARE & OUTCOMES FOR PATIENTS WITH DIABETES & CARDIOVASCULAR DISEASE (CVD)

DR. SHARREL PINTO
DEPT HEAD | DEPT OF ALLIED & POPULATION HEALTH
HOCH ENDOWED CHAIR & PROFESSOR FOR COMMUNITY PRACTICE

OBJECTIVES

- Provide context for project
- Review of 5-year plan to improve care for patients with diabetes & CVD
- Highlight Year One results and findings
- Discuss Year Two plans
Diabetes is the 5th leading cause of death in SD

Approximately 2/3rd of adults are at risk for prediabetes

Heart disease is the 2nd leading cause of death in SD

1/3rd of SD adults have been told they have high cholesterol

Drugs don’t work in patients who don’t take them!

-C. Everett Kopp
CDC 1815: THE PLAN
YEAR ONE: LANDSCAPE ANALYSIS
YEAR ONE STRATEGY

Three Stakeholder Groups

Elicitation Interview (90 minutes)  Focus Group (3 hours)

Data Collection

Goal
To assess needs and community assets.

YEAR ONE: RESULTS
PATIENT GROUP: HEALTH CHARACTERISTICS

<table>
<thead>
<tr>
<th>Diagnosis/Condition</th>
<th>n</th>
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</thead>
<tbody>
<tr>
<td>Reported diagnosis of diabetes</td>
<td>40</td>
</tr>
<tr>
<td>- Reported diagnosis of Type 2 Diabetes</td>
<td>34</td>
</tr>
<tr>
<td>- Reported diagnosis of Type 1 Diabetes</td>
<td>3</td>
</tr>
<tr>
<td>- Reported diagnosis of diabetes of unknown type</td>
<td>3</td>
</tr>
<tr>
<td>Taking medications for diabetes</td>
<td>40</td>
</tr>
<tr>
<td>Diagnosed with high blood pressure</td>
<td>35</td>
</tr>
<tr>
<td>Taking medications for high blood pressure</td>
<td>32</td>
</tr>
<tr>
<td>Diagnosed with high cholesterol</td>
<td>22</td>
</tr>
<tr>
<td>Taking medications for high cholesterol</td>
<td>20</td>
</tr>
<tr>
<td>Reported history of stroke(s)</td>
<td>2</td>
</tr>
<tr>
<td>Reported history of heart attack(s)</td>
<td>5</td>
</tr>
</tbody>
</table>

PATIENT GROUP: HEALTHCARE JOURNEY

Coping

Screening

- Warning Signs & Symptoms
- Care Seeking
- Diagnosis
- Treatment Plan
- Initiate Treatment
- Medication & Treatment Adherence
- Behavior & Lifestyle Mod.
- Recovery/Maintenance/Stabilized
"I just think that I could have been more educated on the medicine that I was on since it was a completely new situation."

-Patient

"The doctor tells you to do something, well if it costs me any money I’m not really interested."

-Patient
“[Doctor] told me hardly anything. Just told me that I needed medication. My blood pressure was too high and I didn’t get any education on it.”

-Patient

PRACTITIONER GROUP

- Pharmacists | $n=34$
- Advanced practice providers (APPs) | $n=15$
  - Physician Assistants, Nurse Practitioners, Nurses, Dietitians
- Diabetes educators | $n=5$
- Physicians | $n=1$
**PRACTITIONER GROUP: CHALLENGES**

<table>
<thead>
<tr>
<th>Understanding of MTM</th>
<th>Lack of facility space</th>
<th>Patients don’t see value in diabetes education</th>
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</thead>
<tbody>
<tr>
<td>Using practitioners to schedule appointments</td>
<td>Staff turnover</td>
<td>Patient transportation</td>
</tr>
<tr>
<td>Financial barriers for patients</td>
<td>Lack of time</td>
<td>Proximity to other providers</td>
</tr>
<tr>
<td>Attempt to improve provider referrals to MTM pharmacy services</td>
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“Um people have larger deductibles, not all of them understand that, um but it seems like they have larger deductibles and they’re just not willing to do out of pocket.”

-Certified Diabetes Educator
“They are very time consuming, so you’d have to have at least two pharmacists working that day in order to perform it, so that’s what we’d always—you know, it’d be if we schedule one, always try to schedule it at a time where you know there’s always going to be another staff member there—or another pharmacist, otherwise you—it’s too much. Yeah, you can’t dedicate the time you need to do with the patient.”

-Pharmacist
One time I didn’t have money to get my blood pressure pills so I was waiting a week until I could get my check I went to [name of pharmacy] and the guy told me I should go to the hospital because my blood pressure was so high.

-Patient

"
“I think it would be great in the beginning of any diagnosis. If you were told how to manage [diabetes] and to help you manage.”

-Patient

“Like, what does Metformin do? What does Glipizide do? Which one should I be cutting back or, you know, I don’t really know they act, you know what I mean? I could be much more educated on that.”

-Patient
PAYER/OTHERS GROUP (N=8)

Two Regional Health Plans
SD DOH Organization

PAYER/OTHERS GROUP: INCORPORATING PHARMACISTS

"Traditionally, this has been the role of only the physician. This isn’t working. Pharmacists could take the burden off of providers, allowing them more time to provide valuable patient visits."
PAYER/OTHERS GROUP: THEMES

- Education
- Communication
- Holistic Wellness

HOW CAN THIS HELP?
EMPOWERING PATIENTS

ENHANCING PRACTITIONER WELL-BEING

ENGAGING PAYERS

DECREASED STAFF TURNOVER

IMPROVED PATIENT HEALTH OUTCOMES

INCREASED PRACTITIONER JOB SATISFACTION
The secret of change is to focus all of your energy, not on fighting the old, but on building the new.

-Socrates

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- Kayla Magee, RN | Diabetes Program Coordinator | SD Department of Health
- SDSU Research Team
SDSU RESEARCH TEAM: FACULTY & STAFF

- Michaela Seiber, MPH | Research Coordinator
- Aaron Hunt, PhD, MPH | Assistant Professor/MPH Coordinator
- Yen-Ming Huang, PhD, MS, BPharm | Assistant Professor

SDSU RESEARCH TEAM: SDSU PHARMACY STUDENTS

- Mya Baker¹
- Samantha Boeck¹
- Hannah Brokmeier¹
- Amanda Dickinson¹
- Sarah Gee¹
- Ellen Hulterstrum²
- Chris Kotschevar¹
- Bailey Lear¹
- Zachary Muller¹
- Brandon Nigg¹
- Alexis Nyberg¹
- Molly Schrempp¹
- Abigail Sirek²
- Trevor Treglia¹

¹PharmD Candidate 2020
²PharmD Candidate 2021

REFERENCES