Improving the Health of South Dakotans through the Prevention and Management of Diabetes, Heart Disease, and Stroke

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This project was completed in collaboration with the South Dakota Department of Health, supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services under cooperative agreement # 1 NU58DP006526-01-11. The contents are those of the author(s) and do not necessarily represent the views of CDC or the U.S. Government.
Year Three of the five-year project to improve the prevention and management of patients with diabetes and cardiovascular disease (CVD) was a year of implementation of programs. Several programs were initiated, launched, and expanded throughout the year. Despite the challenges that continued to be encountered due to the COVID-19 pandemic, the team not only met the goals of implementation but also started data collection and preparation for analysis. Additionally, the project reached 340,000 South Dakotans through the patient awareness campaign, “Your Pharmacist Knows,” developed and presented four webinars, worked with students to create and present four posters digitally displayed during the national American Pharmacist Association 2021 Annual Conference, and is in the process of developing several papers and an additional poster accepted for the national American Public Health Association 2021 Annual Meeting.

During Year Three, the SDSU team continued to work in three primary workgroups, the Patient Workgroup, the Practitioner Workgroup, and the Payer Workgroup. Figure 1 demonstrates the project’s workgroup structure. Though each of the workgroups took lead on different responsibilities, all of the groups worked together for successful implementation of programs. All of the workgroups and stakeholders represented in each workgroup are dependent on one another; the patients need to be aware of their local pharmacy services, pharmacies need to be able to offer those services, and payers need to reimburse services so patients can receive and pharmacies can offer those services. As such, the patient awareness campaign, led by the Patient Workgroup, was launched to increase patient knowledge and awareness of pharmacy services as this was a gap found in the Year One landscape analysis. Additionally, the Practitioner Workgroup worked with pharmacies to establish, advance, and expand services offered through training sessions, assistance with service set-up, and helping collaborating sites have the resources needed for initial and continued service provision. Simultaneously, the Payer Workgroup worked with local health plans to provide information and feedback on the pharmacy services being offered, as well as, working to provide the documentation needed to demonstrate the impact and value of these services.

Figure 1. Project workgroup structure