In July 2019, the Community Pharmacy Enhanced Services Network of South Dakota (CPESN SD) began a partnership with the South Dakota Department of Health Heart Disease and Stroke Prevention Program (HDSPP). Through this partnership, community pharmacists across the state identified individuals with uncontrolled hypertension from their respective pharmacies. Participants were then enrolled in an 8-12 month intensive hypertension monitoring program (HMP) that included blood pressure goal counseling, lifestyle coaching, and training on how to properly obtain a blood pressure (BP) reading using a home BP monitor.

While this provided a meaningful service to their patients, CPESN SD pharmacists speculated other individuals in the community, those that may not fill prescriptions at their store, might also benefit from the HMP. Beginning in Year 2 (July 1, 2020-June 2021), community pharmacists reached out to local physicians to promote the HMP. Physician outreach included phone calls, informational brochures, faxed letters, and in-person clinic visits. Physicians then referred patients with uncontrolled hypertension to the community pharmacy-based HMP at their discretion.

The HMP was delivered at seven sites in Year 2 (July 2020-June 2021), compared to six sites in Year 1 (July 2019-June 2020). Blood pressure value reduction results from Year 2 were on par with work from Year 1 of the HMP. The average initial blood pressure value of participants in Year 1 and Year 2 was virtually identical (152/88 and 155/94, respectively). Post program blood pressure values were also similar (132/78 and 132/79, respectively).

Year 2 of the program occurred during the COVID-19 pandemic. Recruitment for program participants was challenging, as patients were a bit apprehensive about attending in-person HMP sessions. There were slightly more participants in Year 1 compared to Year 2 (57 vs 50, respectively). In Year 2 of the HMP, pharmacists delivered a total of 630 care calls or in-person visits. Community pharmacists performed 75 interventions with other health care team members, not including the initial outreaches.

"One of our clinics has been grateful that we are doing these exercises to take care of people in our community."

A participating pharmacy

Sept 2021
Successes

In addition to the blood pressure value decreases for participants, Year 2 of the HMP improved relationships and increased collaboration between physician and non-physician clinical health care providers.

Additionally, in Year 2, clinical interventions and communications between community pharmacists and other health care team members increased from 47 in Year 1 to 75 interventions in Year 2. It is possible the participants in Year 2 simply required more pharmacist interventions than patients in Year 1. However, an alternative explanation is that relationships between physician and non-physician care teams were facilitated in Year 2 of the HMP and created a more open line of communication regarding patient conditions.

Another exciting result from Year 2 was CPESN SD and the HDSPP assisting pharmacy networks in other states to begin developing similar HMPs in their states. Meaning, the work in SD has become a model for other state pharmacy networks to care for patients across the US.

Future Direction

Through CDC’s 1815 cooperative agreement, the HDSPP will continue supporting CPESN SD programming in 2021-2022. Community pharmacists will implement a total cardiovascular risk reduction program at 7-8 sites across South Dakota. The cardiovascular risk reduction program aims to reduce a patient’s 10 year risk of having a cardiovascular incident, such as a stroke or myocardial infarction, by incorporating blood pressure, lifestyle change, and cholesterol management programming.

Contact

For additional information on this project or to learn more about HDSPP initiatives and funding opportunities:

Rachel Sehr, BSN, RN
Heart Disease and Stroke Prevention Coordinator
South Dakota Department of Health
Rachel.Sehr@state.sd.us
605-367-5356