



# Health Report Card: Evaluating health outcomes through student-driven comprehensive service-based health fairs targeting Medicare beneficiaries

David G. Carranza, PharmD Candidate; Donna J. Cruz, PharmD Candidate; Sheel M. Patel, PharmD Candidate; Amandeep S. Raikhy, PharmD Candidate; Bradley F. Ramos, PharmD Candidate; Kristina M. Hoh, PharmD Candidate; Olivia Page, PharmD Candidate; Carly A. Ranson, PharmD, BCGP; Cynthia S. Valle-Oseguera, PharmD, APH, BCACP, BCPG; Edward L. Rogan, PharmD, BCACP; Rajul A. Patel, PharmD, PhD  
University of the Pacific, Thomas J. Long School of Pharmacy and Health Sciences, Stockton, CA



## BACKGROUND

- The presence of chronic conditions (e.g., hypertension [HTN], hyperlipidemia, and type 2 diabetes mellitus [T2DM]) can have a major impact on patient outcomes.
  - In 2017, the American College of Cardiology and American Heart Association (ACC/AHA) issued stricter blood pressure targets, resulting in an increased prevalence of HTN from 32% to 46%.<sup>1</sup>
    - In 2015, <50% of adults diagnosed with HTN were considered controlled.<sup>2</sup>
  - It was reported that 36.7% of U.S. adults (≥21 years of age) were eligible for cholesterol-lowering therapy based on the 2013 ACC/AHA Guidelines.<sup>3</sup>
    - Only 55.5% of those eligible were on pharmacologic therapy.<sup>3</sup>
  - In 2015, the prevalence of T2DM in those ≥65 years of age was ~25%.<sup>4</sup>
    - Additionally, 48.5% of those ≥65 years old had prediabetes, however, only 11.6% reported being diagnosed.<sup>4</sup>
- Student pharmacist-driven health fairs can provide health screenings/services, patient education for common chronic conditions, and a platform for prescriber follow-up.<sup>5</sup>
- Medication Therapy Management (MTM) services may:
  - Increase the number of patients who achieve their “goals of therapy”,<sup>6</sup>
  - Identify potential medication-related problems (MRPs),<sup>7</sup> and
  - Assess medication adherence.<sup>5</sup>
- Student pharmacist participation at health fairs can:
  - Fulfill Introductory Pharmacy Practice Experience and Interprofessional Experience requirements set by the Accreditation Council for Pharmacy Education,<sup>8</sup> and
  - Satisfy pharmacy curriculum outcomes developed by the Center for the Advancement of Pharmacy Education.<sup>9</sup>

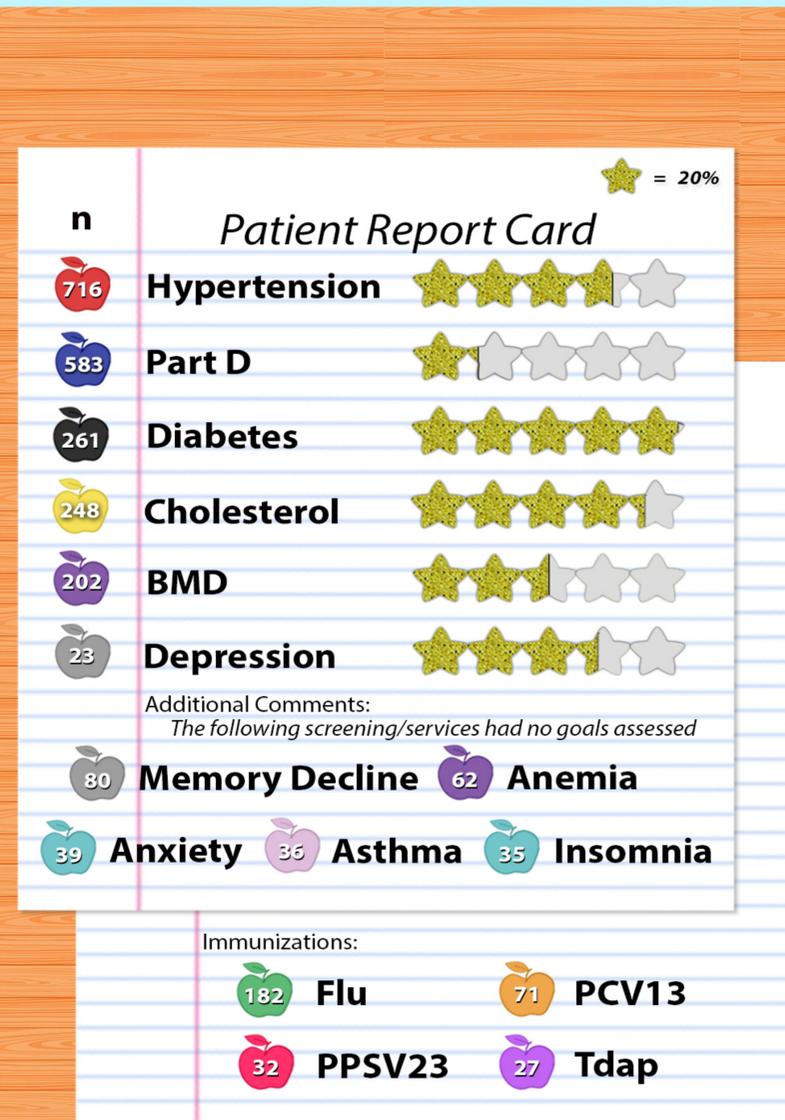
## OBJECTIVES

- To create a patient-centric model for a comprehensive service-based health fair that optimizes patient care, assesses patient outcomes, and enhances student learning.
- To evaluate chronic condition control, identify medication-related problems, and provide relevant recommendations to prescribers.

## METHODS

- In total, 14 health fairs targeting Medicare beneficiaries were held in 10 cities throughout Northern/Central California during the fall of 2017.
- At each health fair, 13 individual health screenings/services were available for attendees.
  - When applicable, chronic condition control was assessed by comparing a patient’s clinical values against corresponding practice guidelines.
- Medicare Part D & MTM services.
  - Medicare Part D interventions included evaluation of potential out-of-pocket cost savings opportunities through plan optimization.
  - The provision of MTM services typically utilized an interdisciplinary approach in which pharmacy students worked with nurse practitioner and/or physician assistant students.
  - A systematic process was utilized to guide each MTM intervention.
    - MRPs were identified and reviewed with the patient.
    - Severe MRPs, as determined in consultation with the pharmacist preceptor, were communicated to the patient’s prescriber(s).
- All screenings/services were conducted by trained student pharmacists under the direct supervision of licensed pharmacists.
- Student pharmacists’ confidence was assessed using a 10-point Likert scale (1 = strongly disagree, 10 = strongly agree) both before didactic education and after experiential practice (health fairs). Parameters evaluated included:
  - Explaining the Medicare Part D benefit,
  - Performing MTM-related services, and
  - Top 200 drug-related knowledge.
- Statistical Analyses.
  - Descriptive statistics were performed to:
    - Summarize patient uptake at each screening/service station,
    - Assess patients’ achievement of disease/condition control, and
    - Summarize the change in student confidence.
  - All statistics were performed via IBM SPSS Statistics for Windows, Version 25.0 (Armonk, NY).

Figure 1: Screening/Service Report Card



## RESULTS

Figure 2: Medication Therapy Management Outcomes

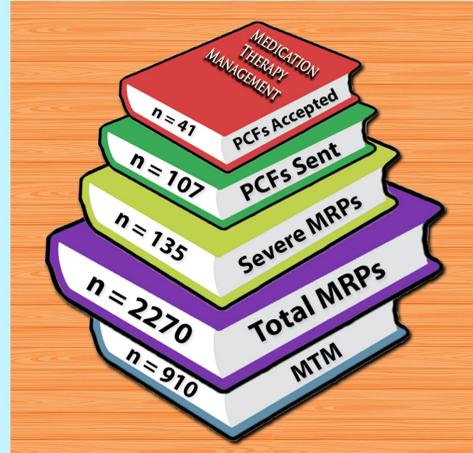
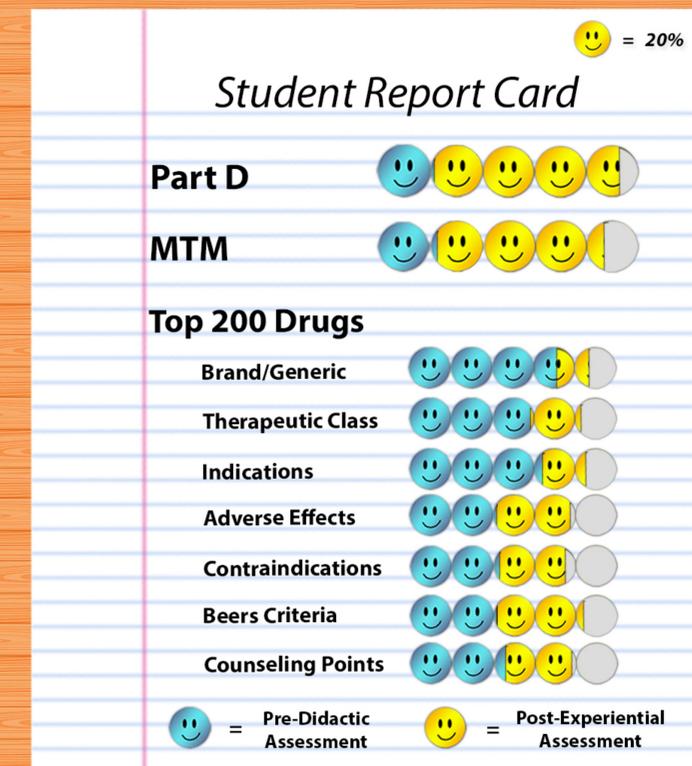
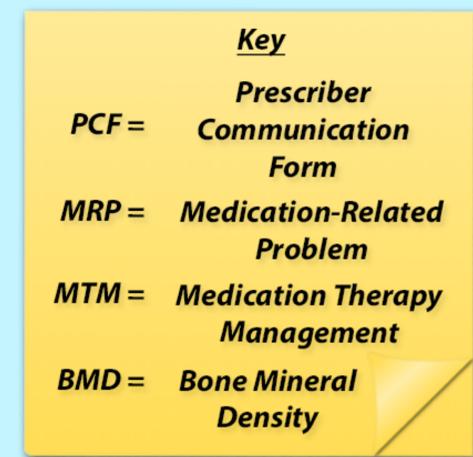


Figure 3: Student Report Card



## RESULTS

- Provided screenings/services can be found within the “Patient Report Card” (Figure 1).
  - A total of 1928 screenings/services were provided to the 910 patients who received MTM services.
  - The # inside each apple corresponds to the uptake of that screening/service.
  - The shading of stars next to each screening/service represents the % of patients at “goal” for that screening.
- The “Student Report Card” displays parameters on which student confidence was assessed (Figure 3).
  - The relative shading of the “happy faces” represents the average confidence on that parameter before didactics (blue) and after experiential practice (yellow).
- Change in student confidence is represented by the “growth” in the two plants (Figure 3).

## DISCUSSION/CONCLUSION

- Student pharmacist-driven comprehensive service-based health fairs have the potential to benefit patients and students alike.
  - Patient benefits include:
    - Receiving necessary health screenings and education,
    - Receiving indicated vaccines,
    - Assessing their current health and disease control, and
    - Increasing their level of confidence in managing their own health.
  - Student benefits include:
    - Improving their patient communication skills,
    - Improving interprofessional communication skills by alerting providers of identified MRPs, and
    - Increasing their own confidence in knowledge and skills.
- Student pharmacist-driven patient-centric health fairs improve patient care while enhancing students’ preparation for Advance Pharmacy Practice Experiences and, ultimately, the pharmacy work force.

## REFERENCES

- Whelton PK. 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APHA/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. 2017.
- Fryar CD, Osthega Y, Hales CM, Zhang G, Kruszon-Moran D. Hypertension prevalence and control among adults: United states, 2015–2016. *NCHS Data Brief*. 2017;(289):1-8.
- Mercado C, DeSimone AK, Odum E, Gillespie C, Ayala C, Loustalot F. Prevalence of cholesterol treatment eligibility and medication use among adults—United states, 2005–2012. *MMWR Morb Mortal Wkly Rep*. 2015;64(47):1305-1311. doi: 10.15585/mmwr.mm6447a1.
- Centers for Disease Control and Prevention. National diabetes statistics report. 2017.
- Hess K, Gabrielian C, Schwartzman E, Law A. The impact of student pharmacists at health fair events. *American Journal of Pharmaceutical Education*. 2012;76(8).
- Isett BJ, Schondelmeyer SW, Artz MB, et al. Clinical and economic outcomes of medication therapy management services: The minnesota experience. *Journal of the American Pharmacists Association*. 2008;48(2):203.
- Hata M, Klotz R, Sylvies R, et al. Medication therapy management services provided by student pharmacists. *American Journal of Pharmaceutical Education*. 2012;76(3):51.
- Accreditation Council for Pharmacy Education. Accreditation standards and key elements for the professional program in pharmacy leading to the doctor of pharmacy degree. 2015.
- Nagge JJ, Lee-Poy MF, Richard CL. Evaluation of a unique interprofessional education program involving medical and pharmacy students. *American Journal of Pharmaceutical Education*. 2017;81(10):6140.