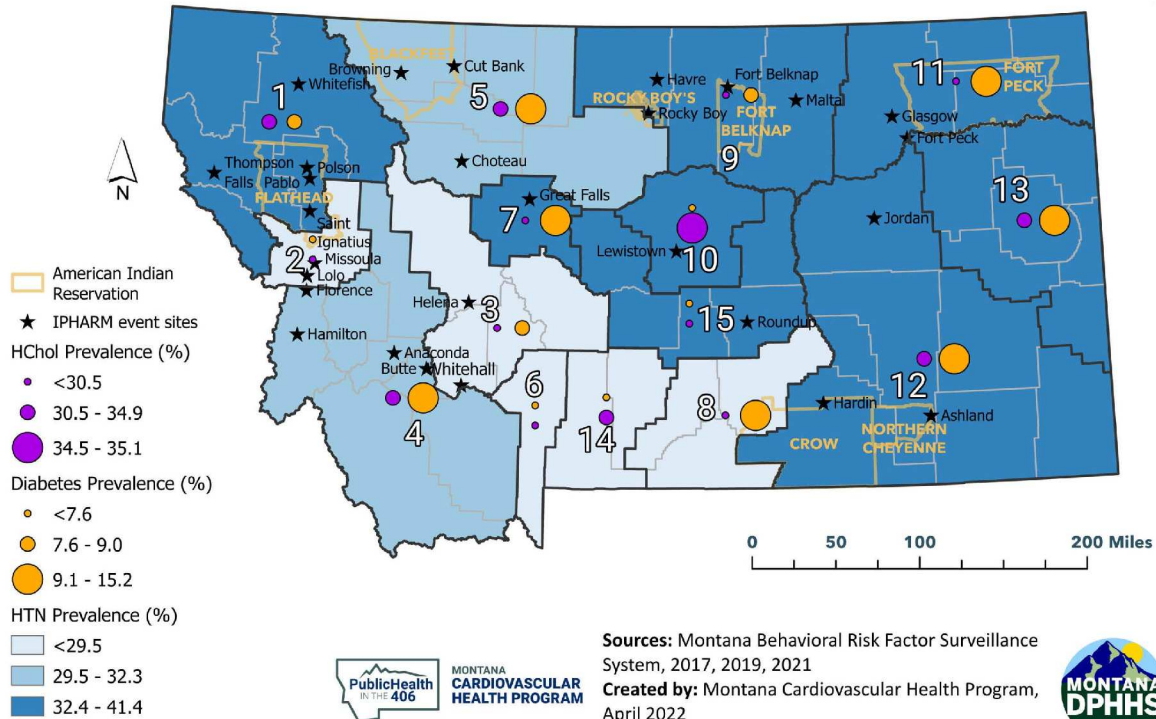


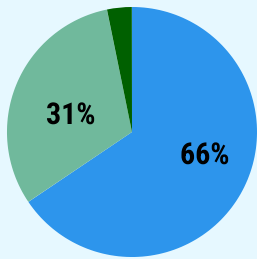
# ImProving Health Among Rural Montanans (IPHARM) Project, Year 1-5



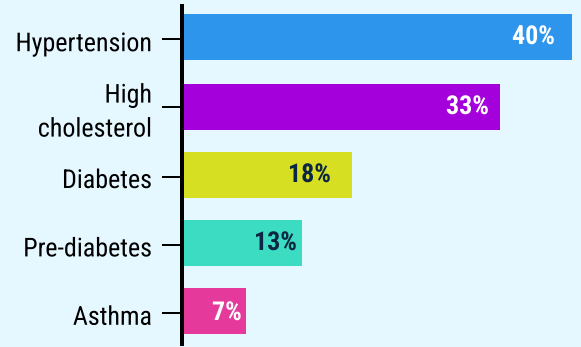
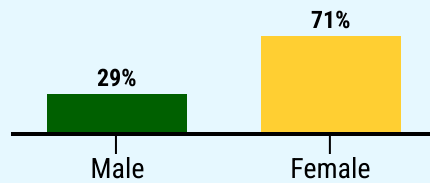
## Prevalence of Hypertension, High Cholesterol, and Diabetes by Chronic Disease Regions and IPHARM Event Sites



## 28 Event Sites



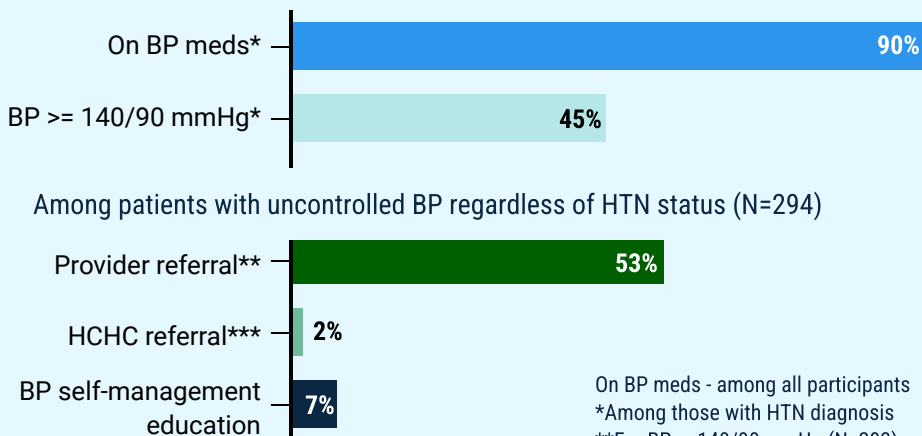
**1120** participants



\*Two races (13), Black (2), Other (17), Prefer not to say (4)  
 Excludes 17 missing race documentation

### Chronic Diseases & Risk Factors

### High Blood Pressure



On BP meds - among all participants  
 \*Among those with HTN diagnosis  
 \*\*For BP >=140/90 mmHg (N=283)  
 \*\*\*For BP >=140/90 mmHg (N=199)

HCHC: Health Coaches for Hypertension Control

### Facilitators

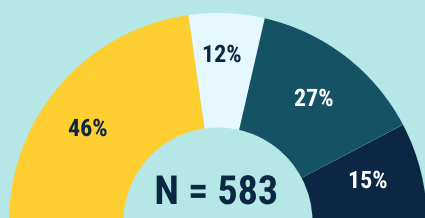
- State health department support - timely communication, guidance on the project, contacts, CONNECT training and troubleshooting system
- Blue Cross Blue Shield Care Van support
- American Indian Tobacco Specialists - facilitated seamless screening events
- Additional equipment allowed more sites to screen simultaneously

# IPHARM Results, continued

## ASCVD\* Risk Score

\*ASCVD: Atherosclerotic Cardiovascular Disease

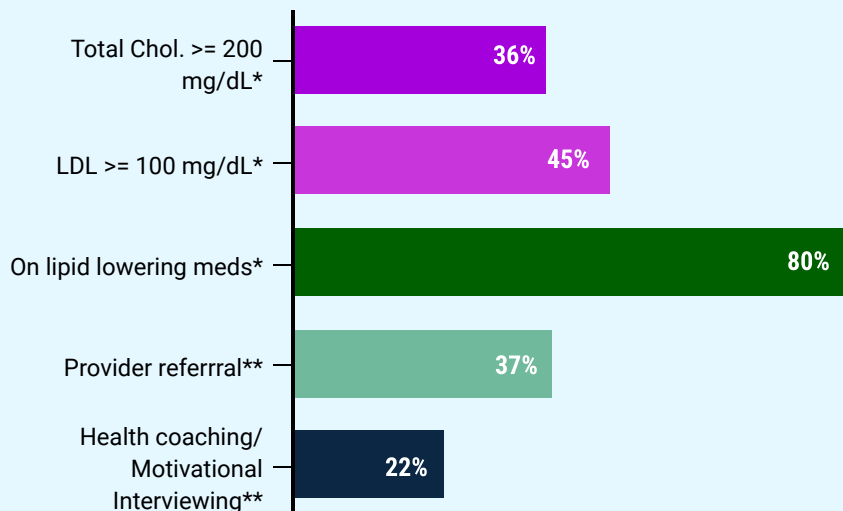
- Low-risk (< 5.0)
- Borderline risk (5.0-7.4)
- Intermediate risk (7.5-20.0)
- High-risk (> 20.0)



Excludes: Patients <40 years old or total chol < 130 mg/dL

- 60% with ASCVD  $\geq 7.5$  received provider referral
- 9% with ASCVD  $\geq 7.5$  received high cholesterol health coaching/motivational interviewing

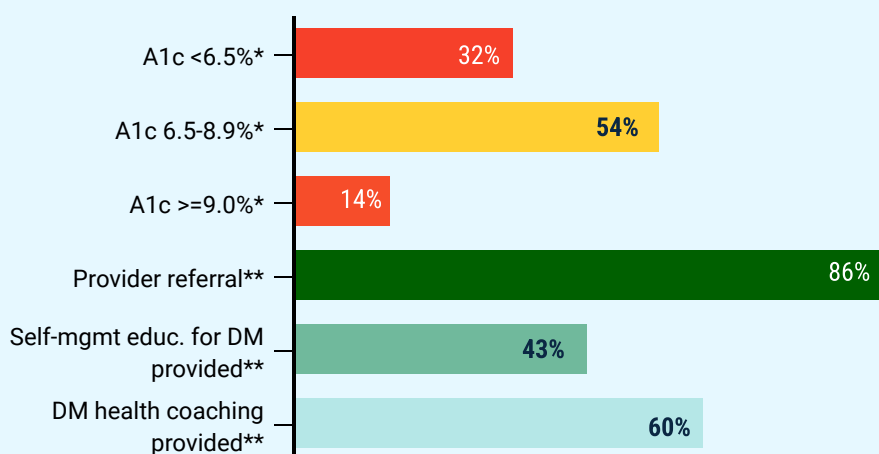
## High Cholesterol



\*Among those with high cholesterol (HChol)

\*\*Any elevated: total chol. or LDL regardless of HChol status

## Diabetes



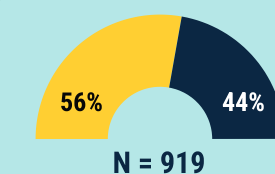
DSMES: Diabetes Self-Management Education and Support

\*Among those with diabetes diagnosis

\*\*For A1c  $\geq 6.5\%$  regardless of diabetes status

## Pre-Diabetes\*

\*Among patients without a diabetes diagnosis



- Pre-DM Risk Test Score 0-4
- Pre-DM Risk Test Score >4

- 43% with Pre-DM Risk Test score >4 received provider referral
- 3% with Pre-DM Risk Test score >4 received pre-DM self-management education
- 10% with Pre-DM Risk Test score >4 received pre-DM health coaching/motivational interviewing

## Barriers

- COVID-19 required rolling evaluation and adaptation of planned events
- Communication issues due to lack of familiarity with local staff to plan events:
- Some events not well advertised
- CONNECT System issues: lack of wifi, lack of referral connections in system
- With retinopathy program, clinical staffing issues made implementation difficult
- Signing up patients for the satellite site program despite pharmacist and pharmacy student eagerness to implement the program

## Lessons Learned

- Where and when to interest patients in screening (e.g., not at Pow Wows, yes indoors during poor weather)
- Thorough marketing to clinic staff and patients for success
- Better techniques and methods for working with local contacts
- Adaptations for providing services during COVID-19
- Regularly checking in with retinopathy sites helped identify challenges sooner
- Better methods for referring patients to local services, when those services are available

## Sustainability

- IPHARM will continue to refer patients to appropriate supports based on screening results and use the satellite site screening program (perhaps adapted), depending on the circumstances.