### Objectives

**Goal #1** – A stakeholder group will provide the sites, commitment and support for a pharmacist intervention project.

- **Objective 1A** - Recruit stakeholders to provide a group of sites to launch pharmacist interventions.
- **Objective 1B** - Seek a project champion within the stakeholder administration and a liaison to pharmacists.
- **Objective 1C** - Create a strategic plan that will be sensitive and responsive to the needs of the stakeholder community.

**Goal #2** - A program of brief interventions with coordinating marketing, incentives, pharmacist prompts, and a variety of synonymous educational materials will be utilized.

- **Objective 2A** – Develop a template for 24 monthly brief interventions to 9 pharmacies.
- **Objective 2B** - Design bag tags with coordinated educational materials for distribution. Correlate incentives with monthly asthma-related themes.

**Goal #3** - Data collection should be driven by patient outcomes measurements, and be integrated into the pharmacist/patient encounters as part of the brief intervention.

- **Objective 3A** – Utilize the Asthma Control Test (ACT) in establishing a baseline with monthly follow-up at 6 and 12 month intervals.
- **Objective 3B** – Establish a protocol during brief intervention for monthly data collection for comparison of work/school absenteeism, hospitalizations and ED visits, exacerbations and symptom-free days.

**Goal #4** – A business plan for marketing the brief intervention program will have tiers to address pharmacists, grocery employees, and pharmacy customers.

- **Objective 4A** - Develop and produce 24 monthly themed collateral materials for use in promotion and implementation of the program.
- **Objective 4B** - Familiarize pharmacists within Lincoln with the program details through newsletters and publications by the NPA.
- **Objective 4C** – Create in-store signage to prompt the undiagnosed, and asthmatics who have not attended asthma management clinics.
- **Objective 4D** – Expand World Asthma Day activities to market pharmacist activities to physicians and the general public.

### Methods

**Design**

- Goal 1 - A proposal for brief intervention was prepared and presented to B&R IGA administration. The project was approved by the B&R IGA pharmacy director and champion stores were identified.
- Goal 2 - Each pharmacy was surveyed, soliciting suggestions from the focus group to establish process details that would meet the needs of employees and customers. 24 monthly themed collateral materials developed and produced for use in promotion and implementation of the program. The incentive program, originally designed for patients, was expanded to include a contest among the pharmacies.
- Goal 3 – The epidemiologists who wrote The Lancaster County Asthma Report assisted in the design of a short questionnaire to establish a baseline for absenteeism and ED use and hospitalizations and the Asthma Control Test (ACT) was administered at 6, 12, 18 and 24 months, in addition to a survey.

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instrument for pharmacists to assess their satisfaction with program use and the impact of the program as a value-added service for each pharmacy.

- **Goal 4** - All materials were created with continuity and professionalism, with collaterals that were used to adjust packet inclusions according to the audience and pharmacy needs. Elements of the collateral materials were used for publication in the NPA, to create in-store displays, as part of public outreach events and presentations, as part of World Asthma Day radio and television spots, and within a human interest story on asthma that ran in the Saint Elizabeth Medical Center’s publication which has regional distribution.

| Study endpoints | The qualitative analysis and the phenomenological implications of this study enthusiastically warrant continuation of the project. Support from the alpha sites to remain in the program, while additional pharmacy chains have expressed interest, spurs our coalition on to expand the success of this work. The final analysis of the quantitative data from this study is pending, but The Community Asthma Education Initiative staff is committed to program expansion. |

**Results**

During the course of this study, the participating pharmacists found the program to be so successful that they requested additional materials to extend the program beyond just their employees and began distributing the bag tags and asthma related promotional items to all their patients. In addition, the results of the body of quantitative data collected with each refill, and qualitative data assessed at baseline, 6, 12, 18 and 24 months, along with colloquial asthma surveillance conducted by The Community Asthma Education Initiative, an additional target group was identified. It appears that the geriatric age group suffers from the greatest mortality, along with the pediatric population which has the highest incidence of morbidity from asthma. The latest report from the CDC is that Nebraska ranks #1 in asthma mortality.

**Conclusion**

Thanks to the generosity and foresight of The Community Pharmacy Foundation, the team approach to health care with the pharmacist as a primary participant has been realized with great success and unparalleled service to the community. The groundwork for a new study sprung from the pharmacists’ enthusiasm and vigilant data collection. As discussed above in “Study endpoints”, the identification of the geriatric population who suffer the greatest incidence of mortality along with our state’s unfortunate label of 1st in the nation for asthma deaths, has compelled our coalition to further our efforts in caring for these needs. It is our intent to create a business plan for our next application to The Community Pharmacy Foundation for program propagation. Thank you so much for believing in us and for your faithful support of this innovative collaborative endeavor!

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