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Community-based Value-driven Care Initiative (CVCI)
Driving quality through innovative community pharmacy care delivery

The University of North Carolina's Eshelman School of Pharmacy is working to explore and evaluate the feasibility and effectiveness of four patient-centered, quality-driven care interventions delivered in community pharmacies. These clinical interventions are designed to improve patient care and advance population health. Funding for this project was awarded by the National Association of Chain Drug Stores (NACDS) Foundation in December 2019, with a formal project start date of February 2020.

PROJECT AIMS:

Aim 1: *Systematically identify four clinical interventions that could be implemented in community pharmacies and have the potential to improve patient care and population health.* The process to identify these clinical interventions includes defining selection criteria, conducting an environmental scan, gathering additional data through stakeholder interviews, selecting the final four clinical interventions, and preparing intervention toolkits for use by the participating community pharmacies.

Aim 2: *Implement and evaluate the feasibility and potential impact of the four identified interventions.* Each of the interventions will be implemented within one pharmacy network, with each network consisting of three to five individual pharmacies. A diverse set of community pharmacies across the United States are being recruited for this project. In the first three months, pharmacies will engage in a planning process designed to facilitate readiness for implementation. The next twelve months will involve recruiting patients, implementing the clinical interventions as outlined in the intervention toolkits, and evaluating both implementation and intervention effectiveness.

Aim 3: *Work to develop and disseminate resources for the purposes of educating other healthcare providers.* Experts with knowledge of value-based care delivery and population health management will contribute insights on how the implemented clinical intervention models can be adapted to serve patients in local and diverse healthcare ecosystems around the country.

FOUR CLINICAL CARE INTERVENTIONS:

Behavioral Health Support for Depression and Anxiety
- Screening for depression and anxiety
- Referrals
- Behavioral health medication management
- Patient health education
- Pharmacists follow-up with patient and other healthcare providers

Comprehensive Program for Cardiovascular Disease
- Screening and testing for cardiovascular disease
- Referrals
- Disease-specific medication management
- Patient health education
- Patient self-monitoring
- Pharmacists follow-up with patient and other healthcare providers

Comprehensive Program for Diabetes
- Screening and testing for diabetes
- Referrals
- Disease-specific medication management
- Patient health education
- Patient self-monitoring
- Pharmacists follow-up with patient and other healthcare providers

HIV Testing, Prevention, and Referrals
- Testing for HIV and STDs
- Risk reduction counseling
- Initiation of PrEP and PEP medications
- Referrals to STD and HIV support services
- Pharmacists follow-up with patient and other healthcare providers