Eau Claire Cooperative Health Centers
Columbia, SC

The staff at the Eau Claire Cooperative Health Centers (ECCHC) in Columbia, SC, takes health care very seriously. So seriously, in fact, that when ECCHC started recruiting patients for the I Am Woman program, a community health program aimed at African American women and sponsored by the Columbia Urban League and General Mills, the staff took part as well, carrying pedometers to track their exercise.

One of the staff members taking part—despite not being a woman himself—was Dean Slade, Director of Grants and Planning. "I realized that if I was going to be talking about these things, then I needed to take this seriously myself," he said. "Now I tell people, I lost 20 pounds on the I Am Woman program!"

That same commitment is seen in ECCHC’s participation in Project IMPACT: Diabetes. The system’s Community Champions, Slade and Valencia Gray-Williams, PharmD, also one of ECCHC’s two pharmacists, are part of a team that works tirelessly to provide the best possible care to low-income and underserved patients with diabetes.

The Perfect Opportunity

When Slade and Gray-Williams heard about Project IMPACT, an APhA Foundation program offering grants to provide care to patients with diabetes, they wasted no time in applying.

"Valencia and I had been following these projects back from the Asheville Project and the [Diabetes] Ten City Challenge, so we’ve been basing a lot of the things that we were doing on this," Slade said. "When we had the opportunity to partner, we just jumped at it. … It’s what we’ve been trying to do for the last 10 years.”

These kinds of grant programs are perfect opportunities for ECCHC. As Gray-Williams explained to Pharmacy Today, ECCHC is a federally qualified health center that provides discounted or free medications to a medically underserved population. When a pharmaceutical company offers a patient assistance program, she said, ECCHC will fill out the paperwork for the patient to help him or her get the discount. On top of that, ECCHC uses donations from local hospitals, the United Way, and other groups to provide free medications when needed.

“If you just show up and you don’t have any money [or] you just lost your job, we have means to get you the medications anyway until you can get back on your feet," Gray-Williams said. In any one year, Slade noted, ECCHC sees about 40,000 unique patients from both rural and urban areas.

ECCHC’s services go beyond pharmacy, too. “[We have] a complete scope and we are growing by leaps and bounds,” Gray-Williams said. ECCHC also includes internal medicine, pediatrics, obstetrics/gynecology, and family practices, as well as dental care—something you don’t often find in rural areas, she added. “Our mission is to provide high-quality, compassionate health care in the spirit of the Good Samaritan," Slade said.
Diabetes Care, Head to Toe

The first step of Project IMPACT is the APhA Foundation’s diabetes knowledge assessment tool, part of the Patient Self-Management Credentialing Program. Gray-Williams said that ECCHC partnered with laboratory colleagues to help identify qualifying patients and inform them about the project and used small incentives to encourage patients to take the time complete this questionnaire. She noted that the results were very helpful. “We were able to find out the weaknesses and strengths of each individual patient,” Gray-Williams explained. “The assessment is a nice way to engage patients in their care.”

Right now, ECCHC has identified a patient population of about 200 individuals and completed their baseline lab work, Gray-Williams said. “We know where they are and we’re tracking them; we’re educating them on each visit,” she added. “We’ve already removed all the barriers to care … so we’re tweaking their diets and we’re encouraging all the aspects of wellness.”

When Gray-Williams says “all the aspects,” she means all of them. “We’re going through the patient with diabetes from head to toe,” she explained. “[We] have their eyes checked [and] we go on down the line until we get to their feet.” ECCHC brought a podiatrist on board to promote foot health in patients with diabetes.

‘The Pharmacist at the Center’

A key part of ECCHC’s work in Project IMPACT is the integration of electronic health records at its facilities. “We’ve got to put all this information in the right box” so that ECCHC’s pharmacists and other health professionals can use it, Slade explained. “There are things that all of us can share with each other that will … help change people’s lives.”

Project IMPACT also inverts the traditional care model to some degree, Gray-Williams added. “We design it as a pharmacy-centered model,” she said. “The pharmacist is at the center with the patient, and all the players—the nurses, doctors, social workers—support us in what we’re doing to help the patients self-manage their care.”

This model of care is helpful to patients, Gray-Williams said. “We see patients every month and [physicians] see them two or three times a year,” she explained. “We’re able to closely monitor and track the patients, share information with providers, and address problems right away. … Through time spent in clinical visits, we’re able to share a little bit more intimately with patients to understand their challenges and support them.”

No Slowing Down

The diabetes care ECCHC offers through Project IMPACT wouldn’t be possible without the pharmacy team, Gray-Williams said. She praised her colleague Chenise Nu, PharmD, as well as ECCHC’s technician team of Bernnett Geiger, Tomeaka Murray, and Latoya Bronson. Slade added that ECCHC’s AmeriCorps VISTA (Volunteers in Service to America) intern Alexandra Lane has also been essential. “It really is a team effort,” he concluded.

ECCHC plans to continue with Project IMPACT even after the program is officially finished, Gray-Williams said. “We’ll still be out there, working and educating … changing the lives of not only patients with diabetes, but basically all of us,” she told Today. “[We’ll] have a healthy lifestyle so we can all live to 100,” Gray-Williams added, laughing.

This article was published in the April 2012 issue of the American Pharmacists Association’s “Pharmacy Today”