

Final Progress Report - Responsive

Program Information and Status

Instructions

Thank you for complying with the reporting requirements under your grant contract. The Foundation recommends that you save information regularly when filling out this report. To prevent data loss, you may wish to type responses into a word processing format first, copy them to the online report, and then save the word processing file. Some fields can expand to accommodate the information typed by the applicant. To expand these fields, click and drag the shaded triangle in the lower right corner of each field.

This report is due no later than: Friday, July 20, 2018 at 12 p.m. (noon).

Program Information

Organization Name
Olde Towne Medical & Dental Center

Program Title
Generic Fill Support (GFS) Program

Grant Amount
24000.0000

Grant Number
2017024

Project Start Date
7/1/2017

Project End Date
6/30/2018

Program Status

Describe the program goals for the grant period.
(Response from Grant Application).

The goal is to increase our patients' access to free generic medications, and to document their use of these medications to allow our providers a better means of assessing patient compliance to recommended medication treatments, and to provide this service in a financially viable manner.

Were these goals for the grant period met?
Yes

If any of these goals for the grant period went unmet, please explain the reason(s) why.
(Please limit responses to 200 words or less).

Did your organization exceed program expectations by making progress greater than what was outlined in its short-term goals?
Yes

If your organization did exceed program expectations, please describe in what ways it surpassed the short-term goals and what factors contributed to those achievements.
We received our Board of Pharmacy approval to become an alternative delivery site literally overnight, when we had anticipated having to wait approximately eight weeks. As a result, we were actually able to begin providing free generic medications in advance of receiving funding for the program. This allowed us to order 223 medications for 140 patients prior to the grant period beginning July 1st, 2017, and as a result when the grant period began we had already worked all of the "bugs" associated with starting a new program out of the system, and our program got off to a very smooth start. We also discovered early on that we would be able to provide patients with three month prescriptions rather than the one month prescriptions we had anticipated. This not only provided the patients with longer periods between their need to seek refills, but also meant our staff time spent dispensing drugs was reduced.

The data summarized on page 4 of this report reflects our in house data set on generic prescriptions which were picked up by our patients. Prescriptions which were not picked up in 60 days were returned, and our return rate is ~5%.

Describe the long-term goals of the program.
(Response from Grant Application).

Our long term goals are to improve our patients access to generic medications, to improve our providers' ability to confirm that patients are following medication recommendations and to provide this service at a cost which is not prohibitive. If this model, of OTMDC being an alternate delivery site for medications, collaborating with a central dispensing pharmacy is successful, then I would also share this information with other safety net clinics and the Chronic Care Collaborative, as it may be a model which can be applied to other centers with limited financial resources.

Describe the progress made on each of these long-term goals during this grant period.
(Please limit responses to 150 words or less).

RxPartners used our experience at Olde Towne as a model on which to build programs at other safety net clinics which did not have pharmacies. At Olde Towne, we found dispensing free generic medications to our patients facilitated their medical management. We also were able to involve Hampton University School of Pharmacy PharmD students in medication dispensing, which contributed to their learning experience and improved our patients' medication literacy.

We have also found having HUSP pharmD students available to distribute medications and to speak with patients has been quite helpful and well received by patients.

Has the program progressed as anticipated in the last six months?

Yes

If the program has not progressed as anticipated in the last six months, please explain what has changed and why.

(Please limit responses to 150 words or less).

If the program has not progressed as anticipated in the last six months, please explain how the organization plans to proceed.

(Please limit responses to 150 words or less).

Sustainability and Collaboration

Sustainability

Will the program continue after this grant period?

Yes

If the program will not continue after the grant period, please explain.

(Please limit responses to 200 words or less).

Have any additional sources of funding been identified in the last six months?

No

If yes, list the source(s) of funding, the amount(s), and whether they are anticipated or committed.

Collaboration

The Foundation seeks to facilitate health-related improvements through partnerships and increased collaboration with community organizations. Please identify partners or collaborating agencies contributing to this program.

(Response from Grant Application)

Collaborating with Rx Partners (RxP), OTMDC will become Alternative Delivery Site (ADS) for prescription medications for our uninsured patients at or below 250% of the federal poverty level. RxP will establish a central fill pharmacy, and OTMDC will transmit patient prescription requests to them. See attachment "2-17-17 letter..." The prescriptions will then be filled, and delivered in bulk to OTMDC who will log in the medications, and then provide them to the appropriate patients. This allows our patients access to medications they require, and allows us to track patient compliance. PharmD faculty students from Hampton University School of Pharmacy will be available to consult with patients identified by our providers as having difficulty understanding their treatment regimen as will a pharm tech. The cost of becoming an ADS is markedly less than establishing a dispensing pharmacy, yet meets our patients' needs and will improve our quality of care.

Please explain any changes to this list of collaborating agencies.

We continue to collaborate with RxPartners and to use the Lloyd Moss dispensing pharmacy in Fredricksburg as our central fill pharmacy. All of our health care providers at Olde Towne refer patients internally to our medication assistance staff who enroll patients in the AMP and/or MAP programs.

If applicable, please indicate which of these partners are in the organization's referral network and indicate how many referrals were both made to and received from each partner in the grant period.

We continue to collaborate with the three jurisdictional human services departments, two local hospitals, TPMG, local safety net clinics, CDR, Peninsula Agency on Aging, Literacy for Life, Faith in Action and other community faith based organizations, Sentara Women's Auxiliary, United Way, Avalon, Bacon Street, College of William and Mary, VCU medical school, EVMS, CHKD, Hampton University School of Pharmacy (HUSP), Thomas Nelson Community College, Junior Women's League, Peninsula Food Bank, Virginia Department of Health, Olde Towne Pharmacy, Lawanga and Natasha Houses and Colonial Williamsburg. We do not track the referral sources of our patients, and our patient experience/satisfaction survey indicates that ~97% of our patients say they were referred to us by friends or family.

How has the program or the organization worked to facilitate health related improvements through partnerships and increased collaboration with community organizations? Please be as specific as possible and cite data and descriptive statistics when applicable.

(Please limit responses to 300 words or less).

The program resulted in 559 patients having access to generic medications which they otherwise could not have afforded.

Grant Conditions and Foundation's Mission

Grant Conditions

Grant Conditions (From Grant Contract, if applicable).

Report on the above grant conditions.

Relation to the Foundation's Mission

Please answer question 1(A), or 1(B), or 1(C). While many programs serve many purposes, the Foundation asks that you just answer one question based on your Foundation-assigned category of Wellness, Access, or Advocacy.

This grant is coded as:

Access

1(A) For Wellness Grants:

How has this program promoted healthy lifestyles and informed individual choices for all people who live in our community? Please be as specific as possible and cite data and descriptive statistics when applicable.
 (Please limit responses to 300 words or less).

1(B) For Access Grants:

In what ways has this program met the healthcare needs of our most vulnerable community members? Please be as specific as possible and cite data and descriptive statistics when applicable.
 (Please limit responses to 300 words or less).

This program has benefitted those patients receiving medications, since without this program they would not have been able to follow our recommended medical management.

1(C) For Advocacy Grants:

In what ways has this program advocated for health opportunities to be considered in decisions and policies affecting the Foundation's service area?
 (Please limit responses to 300 words or less).

Program Services Data

Program Services Data

Please provide the following information for the program.

For the purposes of this program the Unit of Service is: (Please contact your Program Officer if you need assistance).

UNIT OF SERVICE
 30-day prescriptions

How many units of service were provided over the grant period?
 5694

How many units of service were provided over the grant period to individuals living in the WHF service area (City of Williamsburg, James City County, York County, and City of Poquoson)?
 5011

How many unduplicated individuals received that service over the grant period?
 559

How many of those unduplicated individuals served live in the WHF service area (City of Williamsburg, James City County, York County, and City of Poquoson)?
 506

Of the unduplicated individuals living in the WHF service area (City of Williamsburg, James City County, York County, and City of Poquoson) who received that service; how many were: (Please contact your program officer if you need assistance).

Male	Female
198	308
Unknown Gender	
0	

Of the unduplicated individuals living in the WHF service area (City of Williamsburg, James City County, York County, and City of Poquoson) who received that service; how many were: (Please contact your program officer if you need assistance).

0 to 17 years old	18 to 29 years old	30 to 44 years old	45 to 64 years old	65 plus years old
0	23	109	347	27
Unknown Age				
0				

Of the unduplicated individuals living in the WHF service area (City of Williamsburg, James City County, York County, and City of Poquoson) who received that service; how many were: (Please contact your program officer if you need assistance).

Asian	Black/African American	Hispanic/Latino	Other	White/Caucasian
17	193	67	16	213
Unknown Race				
0				

Of the unduplicated individuals living in the WHF service area (City of Williamsburg, James City County, York County, and City of Poquoson) who received that service; how many were from households: (Please contact your program officer if you need assistance).

Below 200% of the federal poverty level 489	Above 200% of the federal poverty level 17
Unknown 200% of the federal poverty level 0	

Provide an example of the typical client served by this program.

(Please limit responses to 100 words or less).

An example of a typical patient served by this program would include a single, middle aged female with two children and more than one chronic illness. The patient works two part-time, minimum wage jobs, but has no health insurance. The available cash this patient may have on hand will vary from week to week depending on the tips she is able to secure when working. Having access to free medications generates an opportunity for the patient to maintain her health; allowing her to remain a productive member of her family, community and the work force.

Additional Information

The Foundation would like to know more about this program. Please attach as an addendum on the last page any relevant program data you would like to share in a format convenient to your organization.

Lessons

Lessons

If your organization was beginning this program today, what, if anything, would it do differently?

(Please limit responses to 75 words or less).

We are pleased with the way the program has functioned. If we were able to afford hiring a pharmacist, we would do so. It would also be helpful if we could hold drugs for more than 60 days before returning them to Lloyd Moss. We are attempting to find volunteers willing to deliver prescription medications to our patients, who have significant transportation issues.

What were the major accomplishments of the program over the last year?

(Please limit responses to 75 words or less).

The major accomplishment was providing 559 patients with needed generic medications.

Please share at least one anecdote highlighting the achievements this program.

(Please limit responses to 75 words or less).

Captured in a video production highlighting the success of the AMP program, one of the program participants, a 53 year old male with multiple chronic diseases was interviewed. He commented, "This program is a God send. These medications are saving my life. Having no insurance is hard and being on limited income forces me to make tough decisions. I am so grateful to not have to choose between buying food and buying medicine".

Please share any feedback your organization may have for the Foundation.

In the past we looked into establishing a pharmacy at OTMDC, but found the estimated cost would be ~\$200,000, with most of the expense being the salary of a pharmacist and pharm tech. This generic fill program, which supplements our medication assistance program that provides brand name medications, has moved us towards our goal of providing patients with the medications they need but cannot afford. We also saw a reduction in cost of \$4961 in the formulary we provide to one of our local pharmacies, who fills prescriptions for these medications for our uninsured patients. Voluntary patient contributions over the past year were \$723.

The Williamsburg Health Foundation (WHF) indirectly funds our MAP program through the Virginia Health Foundation, and this AMP program has a natural synergy with that program. The combination of the MAP and AMP programs and Olde Towne's designation as an Alternate Delivery Site for Medications by the Virginia Board of Pharmacy represents a financially sound and viable alternative to having a dispensing pharmacy on site. The two programs MAP and AMP parallel each other in providing our patients with much needed access to medications they cannot afford.

Because of this, we respectfully request that the WHF consider increasing our Basic Operating Support grant by \$24,000 to cover the cost of this very successful and worthwhile AMP initiative.

Attachments

Title	File Name
Final Progress Expenditure Form (online submission required)	Final Progress Report FY 18.xlsx

Files attached to this form may be deleted 120 days after submission.