

Community Pharmacy Foundation Grant – Final Report
Weight loss program in the community pharmacy
Grantee: Jean Schreck Cottrell, PharmD, CGP

Background:

The premise of this project originated with the idea of providing a weight loss program in a community pharmacy. The program was to last 40 weeks and would involve an initial assessment of the patient's medical history and body fat analysis. Care would continue through alternating face-to-face and telephonic follow-up visits with the end result of weight loss and better health outcomes (i.e. reductions in mean blood pressure and blood glucose levels).

Execution of the Proposal:

The program was initiated with the purchase of a Tanita body fat analyzer (\$1650). Upon mastering the manual and quality assurance of this instrument, the appropriate forms history and assessment forms were developed as well as some patient education materials for patients to utilize during their weight loss journey. These tasks were all accomplished within the first 2 months of beginning the project. Marketing the service and patient recruitment was the next objective in this project's timeline. Flyers and bag stuffers were developed and placed first in the Eckerd pharmacy where the service will take place. This was followed by placing flyers and detailing pharmacy staff at the surrounding Eckerd Pharmacies, where other patients could be recruited from. After one month of advertising in store, an ad was placed in the Albany Times Union that included a flyer in the Sunday Flyer section. From this advertisement, we obtained 3 interested patients, however, none of them were willing to enroll in the program. Physician detailing regarding the program also failed to result in any patients enrolling. Therefore, after 6 months of advertising and marketing, without any patient enrollments, the strategy was modified to focus on just the initial screening to help patients get started with their weight loss challenge.

Modification of the Focus of the Program:

During the marketing phase, it became apparent that the commitment of 40 weeks and the cost of \$160 was more than what the public was willing to pay for from their pharmacist. This was despite the fact that this rate was less expensive than either the Weight Watchers® and LA Weight Loss ® chains. Instead, patients were much more interested and comfortable in the initial body fat screening with the ability to continue for 40 weeks in the comprehensive program if they choose to continue. The body fat screening was then developed as a 45 minute consultation that included a medication history, body fat analysis, evaluation of typical diet and caloric intake and recommendations on how to lose weight with diet and exercise.

Body Fat Screenings- Results:

In order to attempt to bring attention to this service throughout New York State, a plan was developed to bring a screening day to over 20 pharmacies throughout the state. These pharmacies were chosen based on their prescription volume (>1200 per week), Patient population (moderate socioeconomic level), and pharmacy staff (positive

customer service reports). Marketing supplies were sent to the pharmacies 3-4 weeks in advance of the body fat screenings, which took place from Late January 2005 through February 2005. Pharmacy staff and Front-end Management were responsible for placing the marketing materials in the store and placing bag stuffers onto prescription bags.

Statistics:

of stores visited = 20

of patients screened for a fee of \$25 = 30

of employees screened for free = 35

of consultations with BMI > 25 (overweight) = 10

of consultations with BMI > 30 (obese) = 8

of consultations with BMI > 35 (morbidly obese) = 5

of patients with comorbidities (HTN, Diabetes, Dyslipidemia) = 6

Age range of participants = 18-58 years old

Limitations:

There were several limitations to conducting the screenings in this fashion. First, marketing was dependent upon pharmacy staff at each location. Despite several phone calls to discuss and encourage marketing of the events, there was minimal compliance by the pharmacy staff. Second, the events took place in the winter months, which is usually a good time for New Year's resolutions, however, a bad time in the northeast due to weather. Four of the events took place on days when there were snowstorms preventing patients from coming to the pharmacy. We attempted to reschedule dates whenever possible, but due to the planning required, this was difficult to do. Third, the space allotted to meet the patients in many pharmacies was not ideal. A folding table was set-up in the waiting areas of the pharmacies, therefore, privacy was not significant. However, this did lend to several patient consultations regarding glucose meters, blood pressure readings and over-the-counter medications.

Employee Wellness:

Upon completion of the screenings at the 20 pharmacies, it was noted that the service provided an invaluable benefit to employees regarding discussion of their health. Three Employee Wellness Events were then scheduled; one at corporate headquarters, one at a charity event, and one at a regional distribution center. These events featured the body fat screening, diabetes screening and blood pressures. Each event was staffed by at least 5 pharmacists and some pharmacy students for 8 hours. Results from these events provided over 85 employees with screenings and information on these important health topics. Employees were able to see how weight affects their health and co-morbidities.

Discussion:

Initiating a weight loss program in a community pharmacy was a challenging endeavour. Many patients were not familiar with the knowledge that a pharmacist has on nutrition and weight loss. As such, they were not prepared to be counseled by a pharmacist, but turned to Jenny Craig, or other weight loss centers. In speaking with the patients, the majority did not associate their weight with their health and therefore, did not associate a healthcare provider as knowledgeable about weight loss.

With regards to marketing, the service may have succeeded further if a different name than Body Fat Analysis was used. Several patients who were inquiring about the service stated, "I already know that I am Fat." Further discussion with them resulted in interest, however, the majority of these patients were not ready to change their lifestyles. In addition to utilizing a different name, the marketing was not as effective as originally planned due to poor execution on the parts of the pharmacy staff. Several meetings and phone calls were held to attempt to remind staff to recommend the service to patients, however, staff were still non-compliant with their tasks.

Overall, the patients who were screened were very satisfied with the service and had a understanding of what a pharmacist could provide them. Those who were affected the most were the employees of the corporate headquarters and distribution center. Unfortunately, due to the mechanism of providing the screenings, there was no way to track long-term outcomes of these screenings through either weight loss or better controlled co-morbidities.

Profit and Loss Statement:

Profits:

Community Pharmacy Foundation Grant	\$3000 (first installment only)
Body Fat Screenings 30@\$25	\$750
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Total	\$3750

Costs:

Tanita Body Fat Analyzer + Software	\$1600
Newspaper Advertising	\$750
Marketing Materials	\$500
Brochures, Flyers, Bag Stuffers for comprehensive program	
Pedometers 25 @ \$10	\$250
Travel Costs for Screenings (mileage, hotel)	\$400
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Total	\$3500

When comparing the profit and loss statement, without the grant from the Community Pharmacy Foundation, a profit would not have been established for this service. There are a few other factors that are not mentioned in this statement as well. First, the employee screenings were provided at no charge to them. Given 85 people were seen at a value of \$25 per person, this service would have yielded an additional \$2125 in profit. However, the salary of the pharmacist was not taken into consideration in the cost statement either. To have a pharmacist provide solely this service for 8 hours per day, with 23 screening days would cost an estimated \$8100. However, when combined with other clinical activities, such as blood pressure screenings, over-the-counter consultations and diabetes education, the time and cost allotted may be reasonable.

Overall, clinical services in the community pharmacy need to be integrated into the dispensing processes to allow for a cost-effective care. In addition, other avenues for payment, such as self-insured employers and managed-care companies, must be investigated in order for these services to receive proper payment.