ADVANCING INTEGRATED HEALTHCARE

CTC-RI WELCOMES PRACTICES TO THE 2026–2028 DIABETES, KIDNEY HEALTH, AND TOBACCO QI COLLABORATIVE

A new cohort builds on two years of pharmacy-driven quality improvement, now expanding to include tobacco screening and cessation support.

CTC-RI is pleased to announce the practices selected for our next pharmacy-driven quality improvement collaborative, focused on chronic kidney disease (CKD), diabetes management, and tobacco screening and cessation. This 21-month initiative runs from October 2026 through June 2028, in partnership with the URI College of Pharmacy and with funding from UnitedHealthcare, the Rhode Island Department of Health, and a CDC Tobacco Control Program grant.

When our inaugural cohort wrapped up this June, the results made the case for this approach. *Cohort-wide, glycemic control improved from 67.5% to 73.6%*, pushing past the national 90th percentile benchmark. At the practice level, gains were even sharper: *one practice moved kidney health evaluation rates from 28% to 61%, and another took eye exam completion from 9.3% to 62%* with a low-cost retinal imaging tool. Four sites saw kidney health evaluation climb more than 20 percentage points. Practices starting from the lowest baselines saw the steepest gains, exactly what targeted quality improvement is meant to produce.

Why it matters: CKD, diabetes, and tobacco use compound one another, yet tobacco screening is too often handled separately from chronic disease care. The first cohort also showed that meaningful work was already happening at practices, it just wasn't always being captured. A dedicated pharmacist provided the additional team resource to find and fix the small gaps, like a dropped referral fax or a missed outreach channel, that standard workflows overlook.

How it works: Each practice partners with a dedicated pharmacist facilitator, joins a peer learning community, and receives infrastructure funding plus the chance to earn additional incentive payments. The project centers on making measurable gains in retinopathy screening, kidney health evaluation, and diabetes screening and control, with tobacco and nicotine screening and referral to treatment built directly into that same care workflow. The next cohort runs 21 months (October 2026 to June 2028), funded by UnitedHealthcare and RIDOH, with URI College of Pharmacy as academic partner.

Looking ahead: Four Rhode Island primary care practices join this cohort this fall with project kick-off taking place September 23rd. Dr. Kelley Sanzen returns as practice facilitator.

MEET THE 2026-2028 COHORT

Four Rhode Island primary care practices join the collaborative this fall:

- Arches Medical – Brookside
- Arches Medical – Coventry
- University Internal Medicine
- Southcoast Health – Middletown Family Medicine

MEET OUR PRACTICE FACILITATOR

Kelley Doherty Sanzen, PharmD, PAHM, CDOE

Returns as practice facilitator, leading the collaborative's clinical content and working directly with each care team. Kelley brings continuity from the prior cohort, where her facilitation helped primary care, safety-net and FQHC-serving practices make measurable gains in retinopathycontrol, kidney health and diabetes screening. Practices in this new cohort will work with Kelley through structured facilitation, peer learning sessions, and practical support integrating pharmacist-led workflows into their existing care teams.