

# Public Perspectives on the Role of Community Pharmacists in Screening for Social Determinants of Health

Feehan, Anna<sup>1</sup>; Senior, Dorothy<sup>2</sup>; Robinson, Marjeiry<sup>2</sup>; Petten, Noelle<sup>3</sup>; Lee, Tiffany<sup>4</sup>

<sup>1</sup>Department of Psychology, Memorial University; <sup>2</sup>Patient Partner; <sup>3</sup>College of Pharmacy NL; <sup>4</sup>School of Pharmacy, Memorial University

## Background

- Data collection and interventions to address social determinants of health (SDoH) have been identified as key priorities for primary health care.<sup>1</sup>
- The SPARK Tool was developed by the Upstream Lab to assist primary health care providers in collecting data about poverty and related SDoH.<sup>2</sup>
- The role of pharmacists in screening for SDoH has not been clearly defined in the Canadian context.

### Objectives

- To explore public perspectives on the pharmacist's role in screening for SDoH.
- To inform future implementation of the SPARK Tool in community pharmacies.

#### Methods

- This public engagement (PE) project uses an integrated KT approach with knowledge users and patient partners as core team members.
- The project uses the deliberative dialogue method described by McMaster Health Forum.<sup>3</sup>
- Two citizen engagement sessions with a total of 11 participants were hosted virtually, recorded and transcribed using MS Teams.
- Citizens were recruited from across the province to take part in one of two dialogue sessions.
- Qualitative analysis is ongoing, using the rapid and rigorous RADaR technique for applied research.<sup>4</sup>

#### **Partners**







## Results

Preliminary Themes	Illustrative Quote(s)
The accessibility of community pharmacists offers great potential to tackle SDoH.	"[Everyone] is gonna need some medication at some point in their lifetime. So, the most natural place [to implement this] is the pharmacy"
	"We know that most people don't have access to a social worker. But which healthcare professional do most people have access to—a pharmacist"
Social conditioning may limit public acceptance of SDoH screening and interventions by pharmacists.	"I have difficulty imagining pharmacists as someone with whom I can have a conversation about non-medical needs"
	"For us [expatriates] to accept the North American attitude towards the pharmacist [is a big step]like I would never dare trust my dispenser back home."
Expansions to current infrastructure (e.g., MyHealthNL), to support self-reporting, alongside pharmacist involvement may better support data collection.	"We now have the [myHealthNL] appcould be a self-populated questionnaire?"
An inclusive, trauma and disability informed approach to health and social care is necessary.	"It would be immensely helpful if all of the [interventions and information] actually came with a lens of disability processing."
	"I don't know how I would feel if I go to my [health record] and see [information about] some housing crisis that I encountered. How am I going to react to that?"
Improved communication about the role of pharmacist, as well as communication between the pharmacist, other health professionals, and their patients is necessary.	"Communication really is the ground level of going forward"
	"I feel like a lot of what a pharmacist can do, or a pharmacist's role, isn't really very well communicated to the public"

## Discussion & Conclusion

- Generally, citizens who took part in our PE sessions saw value in pharmacists' screening for SDoH.
- Several needs, gaps, and opportunities were identified by citizen representatives which will inform the development of a more holistic approach to implementing the SPARK Tool in pharmacies.
- Leveraging the unique front-line position of community pharmacists may help to improve SDoH data collection and referrals to social care services in the primary care setting.

# Acknowledgements

This project is supported by the Memorial University Public Engagement Accelerator Fund

#### References

- L. Andermann A; CLEAR Collaboration. Taking action on the social determinants of health in clinical practice: a framework for health professionals. CMAJ. 2016;188:E474-E483
- 2. McMaster Health Forum. Stakeholder dialogues [Internet]. 2021 [cited 2024 Jul 22]. Available from: https://www.mcmasterforum.org/spark-action/stakeholder-dialogues
- 3. Adekoya I, Delahunty-Pike A, Howse D. et al. Screening for poverty and related social determinants to improve knowledge of and links t resources (SPARK): development and cognitive testing of a tool for primary care. BMC Prim. Care. 2023;24: 247.
- 4. Watkins DC. Rapid and rigorous qualitative data analysis. IntJ Qual Methods. 2017;16:1-9