

# SOCIAL DETERMINANTS OF HEALTH **University at Buffalo School of Pharmacy and Pharmaceutical Sciences** and Community Pharmacy Enhanced Services Network NY In recognition of success in integrating a social determinants of health screening and navigation program within community pharmacies.

# BACKGROUND

University at Buffalo (UB) School of Pharmacy and Pharmaceutical Sciences is in Buffalo, NY and offers 18 pharmacy related degree pathways including dual PharmD, MS, and PhD degrees.

**Community Pharmacy Enhanced** Services Network NY (CPESN NY) is a registered healthcare entity and independent practice association with a statewide member network of community pharmacies. Their mission is to empower local, highquality, patient-centered enhanced services. They collaborate with CPESN USA while also having the capability to act independently based on state and local needs.

- Community pharmacies are uniquely positioned with their accessibility and proximity to atrisk groups, making them a prime location for social needs screening and navigation programs.<sup>1</sup>
- Social Determinants of Health (SDoH) programs within community pharmacies have demonstrated positive outlooks across different models, including the integration of community health workers (CHW).<sup>2, 3</sup>
- Additional evidence is needed to better understand the importance of process and quality measures for community pharmacy health-related social needs (HRSN) screening and navigation programs.<sup>4</sup>
- The objective of this project was to evaluate a HRSN screening and navigation program within 15 community pharmacies across New York State.

# APPROACH

This project was a quasi-experimental study between January and December 2023.

### **Inclusion Criteria**

- >18 years old.
- Presented to a CPESN affiliated community
- program.

#### **Data Collection**

- cases among submitted referrals).
- screenings and social needs identified) and areas.
- An adapted version of the Health Leads screening tool was used to screen and network.

#### **Data Analysis**

- Descriptive statistics were used to report quantitative data.
- Geospatial mapping was used to evaluate program reach utilizing Tableau.

# RESULTS

- program within community pharmacies and address social needs.
- The most common social needs identified (13%), and healthcare access (12%).
- The majority of participants were female, rural areas of New York State.
- Developing payment models and financial these programs.

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# **Complex Discharge Planning Team**

pharmacy participating in the SDoH program. Provided consent to participate in the SDoH

Primary: referral uptake (number of resolved) Secondary: intervention fidelity (number of

program reach within NYS urban and rural

identify HRSNs, and an online IT platform was used to submit direct referrals to a social care

Integrating an HRSN screening and navigation successfully engaged participants to identify

were food insecurity (19%), housing instability

white, had Medicare or Medicaid, and lived in

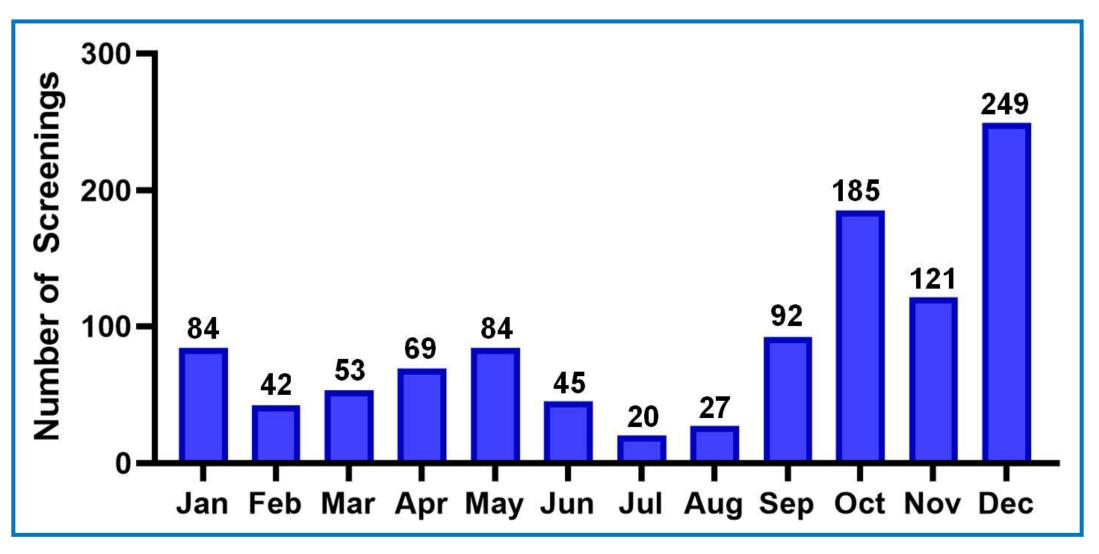
Establishing a referral system in the program was essential to making timely and successful connections to local community resources.

incentives is needed to expand and sustain

#### Table 1. Participant Demographics

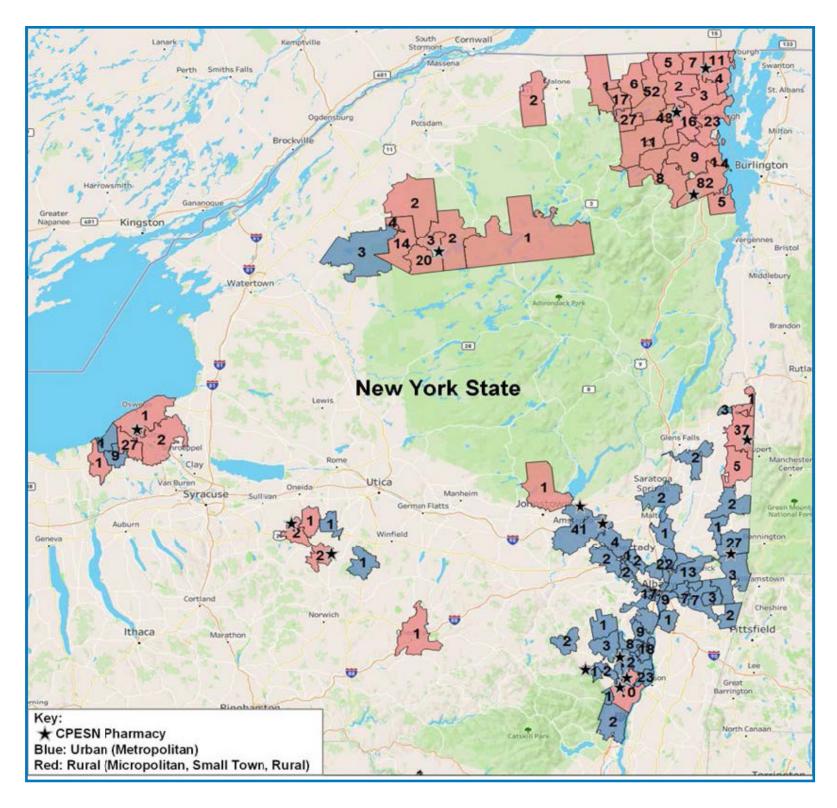
Demographic Participants n=1034 (%)	Sociodemographic Participants n=1034 (%)		
<b>Age</b> 62.3 ± 16.8	<b>Geographical Area</b>		
Gender	Rural: 623 (60)		
Female:	Urban: 355 (34)		
Male:	Insurance		
Unknown:	Medicare: 373 (36)		
Race	Medicaid: 206 (20)		
White:	Commercial: 116 (11)		
Other:	Marital Status		
Unknown:	Married/partner: 192 (19)		
Ethnicity	Single: 69 (7)		
Not Hispanic or Latino:.656 (63)	Widowed: 28 (3)		
Hispanic or Latino:40 (4)	Divorced/separated: 18 (2)		
Undisclosed:	Unknown: 727 (70)		

### **Figure 1. Screenings per Month**



## CONCLUSIONS

- Community pharmacies have the opportunity to reduce health inequities by addressing upstream factors through innovative SDoH models, leveraging accessibility and local connections with organizations.
- Further research is underway to evaluate the program's impact on healthcare utilization and medical expenditures.



#### Figure 3. Social Needs Identified, Referrals Entered into Navigation, and Outcomes Resolution

Social Needs Screened &Identified	Healthy People 2030 SDoH Domain	Primary Service Type	Referrals Entered into Navigation	Referral Uptake	Final Resolution
Social Needs Identified: 890	Economic Stability: 283	Food Assistance: 158 Utilities: 76		Completed: 352	Resolved: 138
	NBHD and Built Envir: 170	Benefits Navigation: 39	Referrals: 525		Unresolved: 212
	Health Access and Quality: 50 Social and Comm Context: 20 Self-Resolved: 136	Housing & Shelter: 104 Transportation: 66		In-process: 173	
	Unknown*: 230	Physical Health: 45 Mental/Behavioral: 5 Individual & Family Support: 20			

# ACKNOWLEDGEMENTS

- **UB Project members/awardees:**
- Christopher J. Daly, PharmD, MBA
- Durdana Iqbal, PharmD
- David M. Jacobs, PharmD, PhD
- Walter Gibson, Data Analyst

## REFERENCES

- models within community pharmacy. J Am Pharm Assoc (2003). 2022;62(4):1407-16.
- health-related social needs. J Am Pharm Assoc (2003). 2023;63(3):799-806 e3.
- needs: A pilot study. J Am Pharm Assoc (2003). 2023;63(4S):S83-S87.

#### Figure 2.

**Program Reach Across New York State Based on Urban and Rural Status.** 

Numbers represent participants screened based on zip code.

#### **CPESN NY Project members/awardees:**

- John L. Croce, BS, RPh
- Jessica Anderson, PharmD, MPH
- Alec Gilles, BS, RPh

1. Foster AA, Daly CJ, Logan T et al. Implementation and evaluation of social determinants of health practice

2. Foster AA, Daly CJ, Logan T et al. Addressing social determinants of health in community pharmacy: Innovative opportunities and practice models. J Am Pharm Assoc (2003). 2021;61(5):e48-e54.

3. Foster AA, Daly CJ, Leong R et al. Integrating community health workers within a pharmacy to address

4. Kiles TM, Chen C, Leibold C et al. Pharmacy personnel comfort and confidence in screening for social