



Original Research

The achievement of public health services in pharmacy practice: A literature review

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Abstract

Background: It is known that pharmacists are currently contributing to public health; however, the extent of this contribution as reported in the literature has not been examined. Investigating the ways that pharmacists are currently participating in public health is critical for the profession of pharmacy, pharmacy educators, and the public health community.

Objectives: The purpose of this study was to determine the reported contributions of pharmacy to each of the ten essential services of public health, and which of the five core competencies of public health were most frequently utilized in those contributions.

Methods: A PubMed search was used to extract references that included both the words *pharmacy* and *services* in the title or abstract, and the words *public health* in any part of the document. A total of 247 references were extracted and categorized into the essential services and core competencies.

Results: The essential services *Inform, Educate, and Empower*, and *Link to/Provide Care* were more frequently represented in the literature, and the core competency of *Health Policy and Administration* was most frequently utilized.

Conclusion: To further contribute to and integrate their contributions within population health, pharmacists must consider ways to strategically contribute to the essential services of public health and seek to increase competency in public health.

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Introduction

The purpose of public health is to improve the health and well-being of a population through disease prevention and health promotion. Attainment of the goal of broader achievement of public health goals depends on a multidisciplinary approach, which includes the profession of pharmacy. Improving population health outcomes in the United States will require reconfiguring how different participants in the health care system contribute to population health.^{1–3} Public health goals would be more completely and effectively achieved by increased contributions from the discipline of pharmacy, but how to make these contributions and in which areas remains a matter of ongoing discussion.⁴

Pharmacists are currently contributing to the health of the public through activities that include delivering immunizations, conducting screenings for various acute and chronic disease states and promoting proper drug use; additionally, pharmacists serve as health and prevention educators in a variety of clinical and community settings.^{5–11} These contributions are, however, made primarily as an extension of pharmacy-based service delivery models and less often in a community-based setting. The extent to which pharmacy and pharmacists deliver public health services as an active participant on an interdisciplinary team dedicated to improved population health outcomes is unclear. However, in the recent decade, the broader health community is drawing pharmacy into public health work to capitalize on the expertise of the profession.^{10,12} The expansion of pharmacists into public health roles has developed inconsistently, in part because the disciplines of pharmacy and public health are quite distinct, both professionally and historically.¹³

One way for pharmacy and public health to partner in a way that achieves significantly improved population health outcomes is for the profession of pharmacy to contribute directly to the ten essential services of public health.^{14–16} Truong and colleagues have previously utilized the ten essential services of public health as a framework with which to evaluate the public health contributions of pharmacy interventions.¹⁶ The prospect of a “public health pharmacist” and some of the policy developments needed to realize a specific role called the “public health pharmacist” are currently being promoted.^{13,17,18} The transition of the profession of pharmacy into the public health realm is evidenced by the increasing

number of special interest groups in the American Association of Colleges of Pharmacy (AACP) that are devoted to public health, as well as the recent inclusion of a pharmacy special interest group in the American Public Health Association (APHA). This research project seeks to build on these developments, by utilizing the ten essential services of public health as a benchmark against which to evaluate the involvement of pharmacists in achieving public health goals.

Materials and methods

Search strategy and selection criteria

A systematic literature review was conducted using the PubMed search engine and according to the 27 guidelines of the PRISMA statement on methodology for systematic reviews.¹⁹ The PubMed database was searched for published references with both the words *pharmacy* and *services* in the Title or Abstract, and the words *public health* in any part of the document. Additional search criteria included *USA address* (USA[ad]) to ensure that references were relevant to the US population. The search was limited to references published in the English language, and ten years retrospective of Oct 22, 2014. The search yielded 552 results, as shown in Fig. 1. The review protocol is available from the authors upon request.

Definitions

Public health was defined by the five core competencies of public health as established by the Association of Schools and Programs of Public Health.²⁰ These core competencies are:

1. Epidemiology
2. Biostatistics
3. Social and behavioral science

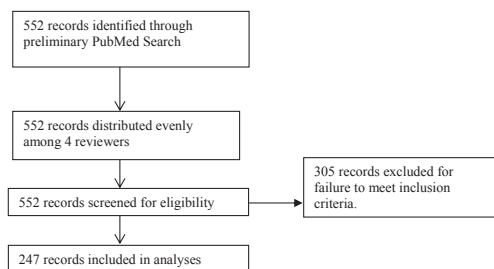


Fig. 1. Flow chart for selection of review references.

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