

PATIENT / CUSTOMER SATISFACTION WITH PHARMACEUTICAL CARE IN COMMUNITY PHARMACIES

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Summary. The work is a pilot study at the local level that deals with the evaluation of patient / customer satisfaction with pharmaceutical care provided in community pharmacies. Expectations and opinions of patients are also confronted with the assumptions of pharmacists. Up to 82.0% of patients confirmed their satisfaction with the care given to them by the pharmacist. A key factor of patient satisfaction has proved particularly professional and human approach of pharmacist. 73.6% of patients in the survey accepted pharmacist as an expert on medicines. Pharmacist self-evaluation was more negative. Monitoring and evaluation of patient / customer satisfactory with pharmaceutical care is not only essential for improvement the quality of the health system and the implementation of pharmaceutical care focussed on the patient, but it may influence the economic and financial position of entities providing pharmaceutical care in community pharmacies.

Keywords: pharmaceutical care, patient / customer satisfaction, community pharmacy, pharmacist.

INTRODUCTION

Pharmaceutical care in Slovakia is legislative defined as one of the forms of provided health care, and is explained as a set of work activities performed by health care workers, and includes the provision of medicines, medical devices and dietary foods in order to prolong life of an individual, raise the quality of his/her life and healthy development of the future generations (1). It is provided under permission in health facilities of pharmaceutical care, such as community pharmacy, a branch of community pharmacy, a hospital pharmacy, a dispensary of medical devices (2). The content of pharmaceutical care is defined by law. It includes quality assurance, storage, preparation, control and supply of medicines, medical devices and dietary

foods including internet dispensing and also involves providing professional information and supervision of medicines and medical devices. In 2006 the new concept of health care in Slovakia came in the field of community pharmacy and clinical pharmacy (3). The attention of both concepts is focused on clinical pharmacy activities in Slovakia according to European and global orientation, in the meaning of „pharmaceutical care (4-6). The pharmaceutical care slightly deviates from orientation on the traditional dispensing and sale of medicines. It begins to concentrate on the patient, although there are various barriers that hamper to implement it in Slovakia, similarly as in other countries (7-8).

Slovakia is an independent country and a member of the European Union with a total population of around 5 415 459 inhabitants and 1711 community pharmacies. The pharmacy to population ratio in Slovakia is approximately 1:2915. The entities providing pharmaceutical care in Slovakia are regulated by legal norms, allowing them to choose the legal form of business - either sole proprietorships or partnerships (9).

The success and survival of entities in the market environment depends on many factors. Entities are providing pharmaceutical care business in strict and restrictive legislative and economic environment. This creates an increasingly important space to „fight for customers." The current offer of pharmaceutical care in community pharmacies exceeds demand, the customer has a choice, and customer's satisfaction begins to play an important role in pharmaceutical care. It should be taken into account that patient / customer satisfaction with the community pharmacy is subjective and reflects the care provided, as well as his preferences and expectations (11). Studies have shown that the patient is more satisfy if the aim of pharmaceutical care is focused on a patient. That results in improvement of patients' compliance and the quality of life is rising (12-14). We believe that patient / customer satisfaction can significantly contribute and influence the economic and financial situation of the community pharmacies.

The evaluation of care provided in community pharmacies in relation to the satisfaction of patients / customers in Slovakia are rare. The work has the character of

a pilot study carried out at the local level to monitor patient / customer satisfaction in community pharmacy with the provided pharmaceutical care. The same objective was the confrontation with the views of pharmacists.

EXPERIMENTAL PART

MATERIALS AND METHODS

Patient / customer satisfaction was monitored by voluntary anonymous questionnaire survey in community pharmacies in Slovak town Ružomberok in the time span from November to December 2012. In this period there were 13 community pharmacies where worked 32 pharmacists. The survey was conducted in two parallel lines – patients' / customers' line and pharmacists' line. The questionnaire was designed by the authors of this publication and relies on published work (15-16). The content of the questionnaire was identical for both lines for the purpose of comparing. The results were processed by Microsoft Windows and Excel.

RESULTS

The socio-demographic profile of respondents is shown in Table 1 (patients / customers) and Table 2 (pharmacists). In the community pharmacies there were 134 patients randomly surveyed. The total number of fully completed questionnaires was 129; five questionnaires were incomplete and therefore not included in the final analysis. The respondents were from all 13 pharmacies in Ružomberok, the survey involved a total of 20 pharmacists (62.5%) and all questionnaires were further evaluated.

Table 1: The demographic profile of respondents – patients / customers (n = 129)

Gender		Together (%)	Women	Men
	Women	86 (66.6%)		
	Men	43 (33.4%)		
Age (years)	≤ 35	48 (37.2%)	29	19
	36 – 55	53 (41.1%)	40	13

	> 55	28 (21.7%)	17	11
Education	Basic	12 (9.3%)	9	3
	Secondary education	71 (55.0%)	46	25
	Higher education	46 (35.7%)	31	15
Taking medication	Regular, long-term	49 (38.0%)	33	16
	Occasionally	29 (22.5%)	22	7
	Rarely	51 (39.5%)	31	20
Number of attending pharmacies	1	25 (19.4%)	19	6
	2 – 3	46 (35.7%)	33	13
	> 3	58 (44.9%)	34	24

Table 2: The demographic profile of respondents – pharmacists (n = 20)

Gender		Together (%)	Women	Men
	Women	17 (85.0%)		
	Men	3 (15.0%)		
Age (years)	≤ 35	9 (45.0%)	9	0
	36 – 55	7 (35.0%)	5	2
	> 55	4 (20.0%)	3	1
Location of pharmacies	Near medical equipment	14 (70.0%)		
	Other	6 (30.0%)		
The average number of visitors per day in community pharmacy	< 100	3 (15.0%)		
	101 – 200	8 (40.0%)		
	>200	9 (45.0%)		

To evaluate the overall patient / customer satisfaction with the visit of community pharmacies, it was used a four-speed range of responses (“*always completely satisfied*”, “*mostly satisfied*”, “*dissatisfied sometimes*” and “*often dissatisfied*”). Nearly 71.0% of patients are mostly satisfied, 11.0% always completely satisfied and only 18.0% were dissatisfied when assessing overall satisfaction with provision of pharmaceutical care in pharmacy.

Expressed satisfaction was further analyzed according to gender of respondents, their age, education and number of pharmacies visited (Table 3). Greater degree of satisfaction (answers “*always satisfied*” or “*mostly satisfied*”) showed men (90.5% versus 77.6% for women), respondents under 35 years (83.3%) and over 55 (89.3%). The highest satisfaction showed respondents with a university degree (91.1%). Overall satisfaction insignificantly decreased with respect to the number of pharmacies visited. It can thus be concluded that in our group of patients, gender, age, education and number of pharmacies visited had no significant effect on the expression of overall satisfaction with the visit. A higher level of satisfaction showed men, older respondents (over 55 years), respondents with higher education and visiting one pharmacy.

Table 3: Patient/ customer satisfaction with treatment provided in a community pharmacy

Patient satisfaction with treatment provided in a community pharmacy n (%)	Always satisfied	Mostly satisfied	Sometimes dissatisfied	Often dissatisfied
Men	14.3	76.2	20.0	2.4
Women	9.4	68.2	7.1	2.4
Age up to 35 years	12.5	70.8	14.6	2.1
Age 36-55 years	7.8	68.6	19.6	3.9
Age over 55 years	14.3	75.0	10.7	0.0
Primary education	25.0	58.3	16.7	0.0
Secondary education	8.7	66.7	20.3	4.3
Higher education	8.9	82.2	8.9	0.0
Regular visit of one pharmacy	16.0	75.0	8.3	4.2
Visiting 2-3 pharmacies	8.5	70.2	19.2	2.1
Visiting different pharmacies	10.9	69.6	16.1	1.8

In the next section of the questionnaire, patients had to mark a degree of their satisfaction ("very satisfied", "average satisfied", "dissatisfied") with 12 selected characteristics of provided pharmaceutical care in community pharmacies (Table 4). The most significant satisfaction ("very satisfied") expressed patients with the time given to them directly by the pharmacist (61.4%), with a professional manners of pharmacist (54.3%), with supply and availability of supplementary products in the pharmacy attended (50.4%) and space in which patient / customer communicate directly with pharmacist (49.2%). The most obvious dissatisfaction patients expressed with the offer of generic substitution by the pharmacist (18.0%) and with the offer of discounts and loyalty schemes (23.9 %).

Table 4: Patient satisfaction with some parameters of provided pharmaceutical care

Patient satisfaction with some parameters of pharmaceutical health care n (%)	Very satisfied	Average satisfied	Dissatisfied
Spatial arrangement and appearance of pharmacy	44.2	55.8	0.0
Information from the pharmacist about medicines and other product range	45.3	51.6	3.1
Information from the pharmacist about your illness and its treatment	31.2	64.0	4.8
Availability of products in the pharmacy attended	38.3	56.3	5.4
Supply and availability of supplementary products in the pharmacy attended	50.4	46.5	3.1
The time that you have to spend waiting until you get to the pharmacist	42.6	48.8	8.5
The time that pharmacist serves and communicate only with you	61.4	36.2	2.4
The space in which you communicate directly with the pharmacist	49.2	46.0	4.8
Professional manners of pharmacist	54.3	42.6	3.1
Interest and empathy of pharmacist about your health needs	42.5	52.0	5.5
Offer of generic substitution by the pharmacist	29.5	52.5	18.0
Offer various discounts and loyalty schemes	33.7	42.4	23.9

There were also assessed factors that are essential and non-essential for patient / customer satisfaction with providing pharmaceutical care (respondents had to mark three proposed options). Patients' responses were compared with responses from pharmacists (Table 5 and 6). As the essential factors of patients' satisfaction patients tagged human approach (83.5%) and professional approach of the pharmacist (78.7%). For patient satisfaction was further important time (short waiting time 37.8%), pharmacists regarded this as only important for 10% of patients. Important factor identified by pharmacists was availability of medicines (75.0%), the patients didn't considered it as important (27.6%). As irrelevant factors of patient satisfaction were identified promotional materials (63.6% versus 50.0% pharmacists) and from the view of the pharmacists it was self-service area (72.2% versus 27.1% patients).

Table 5: Significant factors affecting patient satisfaction (n=129 patients / customers, n=20 pharmacists)

Significant factors affecting patient's satisfaction n (%)	Pharmacists	Patients
Professional approach	85.0	78.7
Human approach towards patients	85.0	83.5
More privacy for discussion between pharmacist and patient	10.0	7.9
Self-service space in community pharmacy	0.0	6.3
Short waiting time	10.0	37.8
Provision of discounts	5.0	15.0
Generic substitution	20.0	30.7
Availability of drugs	75.0	27.6
The possibility to order products	0.0	2.4
Promotion materials	0.0	0.0
Opening hours	0.0	3.1
Other services	10.0	7.9

Table 6: Insignificant factors influencing patient satisfaction (n=129 patients / customers, n=20 pharmacists)

Insignificant factors influencing patient satisfaction n (%)	Pharmacist	Patient
Professional approach	5.6	0.0
Human approach towards patients	0.0	0.0
More privacy for discussion between	5.6	22.0

pharmacist and patient		
Self-service space in community pharmacy	72.2	27.1
Short waiting time	0.0	3.4
Provision of discounts	16.7	8.5
Generic substitution	0.0	6.8
Availability of drugs	0.0	3.4
Possibility to order products	27.8	40.7
Promotion materials	50.0	63.6
Opening hours	16.7	11.9
Other services	11.1	11.0

The barriers that prevent pharmacists to satisfy patients (Table 7), interviewed pharmacists identified major changes in the prices of medicines (75.0%), high co-payments for drugs (70.0%), storage policy in the pharmacy (45.0%).

Table 7: Limitations in terms of preventing pharmacist to satisfy (n=20)

Limitations in terms of preventing pharmacist to satisfy patient	n (%)
Frequent changes in the prices of medicines	75.0
High co-payments of patients for drugs	70.0
Store policy of pharmacy	45.0
Administrative work in the pharmacy	15.0
Lack of professional information about the products	0.0
Lack of time, space and privacy	30.0
Lack of comprehensive information for patient	15.0
Inability to apply financial benefits to patients	15.0
Dissatisfaction with working conditions	0.0
Other	5.0

The last part of the survey investigated opinion and perception of the pharmacist by patients / customers (Table 8). Evaluation of the patients was **positive**, opposed to opinion of the pharmacists. 73.6 % of patients accept pharmacist as a professional expert on medicines, medical devices and other stock available at the pharmacy, 65.1 % as a consultant and an expert on issues of health, disease, treatment and prevention, 50.4 % accepts pharmacist together with a doctor to achieve patient's health. On the other hand, 21.7 % of patients / customers said that the pharmacists are only sellers of medicines and 10.9 % of patients / customers think that the pharmacist's main aim is to make a profit and not the good of the patient.

Paradoxically, the answers of pharmacists are critical. Up to 50.0 % of pharmacists believe that patients perceive them as sellers of drugs and 30.0 % of pharmacists consider that patients think that they are focused on profit rather than on the patient health. Only 50.0 % of pharmacists believe that patients perceive them as professional experts, and 55.0 % as consultants in health matters.

Table 8: Opinion and perception of pharmacist (n = 129 patients / customers, n = 20 pharmacists)

Opinion and perception of pharmacist - multiple choice answers n (%)	Pharmacist	Patient
Professional expert on drugs	40.0	73.6
Advisor in matters of health, disease and treatment	55.0	65.1
Involved together with a physician on the patient treatment	30.0	50.4
Entrepreneur, priority of profit	30.0	10.9
Salesman than others	50.0	21.7

DISCUSSION

Generally, patient / customer satisfaction is an important measure of how well services are provided (11). Community pharmacists have difficult choice in balancing the commercial and professional aspects of their profession. In Slovakia, like in other countries, community pharmacy runs on a profit basis and is not subsidised by the state; therefore if community pharmacy wants to survive, profit is a must. Community pharmacy has the hard dual role – commercial and professional. As the solution of this duality may be consistent patient / customer-centred orientation which should in turn provide financial stability.

Patient / customer satisfaction with the pharmaceutical care providing in community pharmacies in Slovakia has not been the subject of serious analysis. Some partial conclusions results from the nationwide survey - the project “Excellent pharmacy” (17), which documented 66.0% overall patient satisfaction with the care provided at the pharmacy. Our observed outcome (total satisfaction was 82.0 % and consisted of – 11.0 % „*always completely satisfied*” and 71.0 % “*mostly satisfied*”) is even higher, possibly resulting from incomplete anonymity of respondents, the

survey site (small town) and socio-demographic status of respondents. Similarly, consumer research in the U.S. in 2001 showed high satisfaction (85.0 %) with care in public facilities at the outlay of recipe (18). Overall patient satisfaction was reflected in the assessment of 12 selected parameters with which patients were confronted in the provision of pharmaceutical care. Patients rated very positive professional approach of the pharmacist and the time devoted to them directly. Similarly Ried identified that the greatest impact on overall patient satisfaction had personal attention dedicated by the pharmacist to the patient (19).

The main aim of the presented study was to show, if the pharmacist could fill the patient's satisfaction, they must know his expectations and perceptions. Unless patient's expectations and perceptions are not identified all the activities could be carried out in the wrong direction. Pharmacists very well know what the patient expects to be satisfied with the health care provided in pharmacy. Pharmacists together with patients identified that a crucial moment for patient satisfaction is a professional and human approach. However, the results also showed the differing views of pharmacists and patients - e.g. relation to the waiting time, availability of medicines, generic substitution, offers and discounts, self-service area, opening hours etc..

The survey also showed that pharmacists are perceived to be more critical than they are accepted by the patients. Provision of pharmaceutical care includes elements of the business (for which profit is legitimate and necessary condition), while they provide a highly specialized activity which is carried out in a strictly regulated environment of drugs from the state. Pharmacists should pay more attention to self-assessments, position in society, and while it would be appropriate they have to educate patients about the „background "work of pharmacist. Seamless availability of medicines, medical devices, dietary supplements and various supplementary products in pharmacies and other services in terms of actual pharmaceutical care and not only activities associated with ensuring the product within the legislative definition, bring ever increasing demands on the operation of pharmacies and pharmacist's work. Unfortunately, the environmental conditions are far from being in

line with the further development of care provided in a pharmacy, despite the willingness of pharmacists and patients themselves.

CONCLUSIONS

The primary goals of this pilot study, using a questionnaire survey, was to determine patient satisfaction with care provided in a community pharmacy, compare the opinion of the patient and pharmacist and seek common or different approaches. In the wider context, the paper highlights the importance of patient / customer satisfaction in reconciling professional and commercial role of the community pharmacists. The survey results have brought the following findings and conclusions:

1 The evaluation of patient satisfaction with the provided care carried in community pharmacies in Slovakia is not utilized in practice; however it is proven that it contributes to improving the quality of healthcare provided as well as the financial situation of the community pharmacy.

2 Comparisons of patient expectations and assumptions of pharmacists can help meet patient / customer satisfaction and ultimately affect the functioning of community pharmacy and the health care system.

3 The pharmacist is fully accepted healthcare professional. His ideas about his profession and the public perception coincide in the basic intentions, but the commercialization of the system caused that the intentions diverge from expectations.

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