

Customers' expectations and satisfaction with a pharmacy not providing advanced cognitive services

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Abstract

Objective To assess customers' expectations and satisfaction with a community pharmacy which does not provide advanced professional cognitive services (APCS). **Method:** A non-validated questionnaire was designed; the questionnaire included items on expectations with pharmacy services and on satisfaction with the existing services. An independent interviewer was appointed to survey people leaving the pharmacy; the questionnaire was administered on two randomly chosen days.

Results The mean age of respondents ($n = 61$) was 46 years. **Expectations:** The most highly ranked item was "Drug available in the pharmacy" (4.97 on a 5-point Likert scale), followed by "Having queries and questions about health problems answered" (4.84). People found it easy "To seek advice on health problems or about medicines from the pharmacist at the counter" (4.48). The lowest ranked item was "reduced waiting time" (3.13). The overall Satisfaction with pharmacy services was high (4.89).

Conclusions Customers reported a high level of satisfaction in a pharmacy where advanced cognitive

services were not available. However, this should not discourage pharmacists from implementing APCS, because patients' expectations are based only on experiences with current distributive services, which fulfill their perceived needs.

Keywords Cognitive services · Community Pharmacy · Satisfaction · Services · Spain

Introduction

The main activity of community pharmacies throughout the world is dispensing. Compounding is also a service provided by the vast majority of Spanish community pharmacies. In addition, other services such as weight measurement, blood tests for glucose and cholesterol, and blood pressure measurement are frequently provided in Spanish pharmacies. In some regions, a contract exists between pharmacists' associations and local government to provide other services, such as methadone maintenance therapy.

The Research Group on Pharmaceutical Care at the University of Granada is promoting dissemination and implementation of advanced professional cognitive services (APCS) in community pharmacies. In this study we define APCS as any cognitive service focusing primarily on assessing and improving the outcomes of pharmacotherapy. One example is the detection, prevention and resolution of negative clinical outcomes associated with pharmacotherapy [1, 2].

The purpose of this study is to assess customers' expectations and satisfaction with services currently provided in a Spanish community pharmacy, as a

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means of establishing a baseline before implementing APCS.

Method

The study was carried out in a community pharmacy in the city of San Sebastian, in the north of Spain. The pharmacy, which changed ownership in February 2003, can be considered an average Spanish community pharmacy in relation to the services provided. Apart from the owner (a pharmacist), the staff consists of three pharmacists and three technicians.

A survey was carried out in February 2004 to assess customers' expectations and satisfaction with the services provided. The data collection instrument was designed for the purpose of this study, taking into account the literature and inputs from the authors. Given the exploratory nature of this research no validation work was undertaken. The questionnaire had an initial section to collect information on demographics and the pattern of use of community pharmacy; then questions were divided into two domains with three questions each: expectations regarding pharmacy services and patient satisfaction with current services. A five-point Likert scale was used to rate each question. The concept "expectations" was operationalised by measuring variables such as the importance attributed to a number of items and the frequency of advice-seeking in the pharmacy. The questionnaire was piloted with five customers. An independent interviewer was appointed to administer the questionnaire to all pharmacy customers leaving the pharmacy on two randomly chosen days, limited only by time issues.

Results

A total of 61 questionnaires were completed; four individuals refused to participate in the study. The mean age of respondents was 46 years; the majority were women (83.9%). Respondents reported a high degree of loyalty, with 70% stating that they always used this pharmacy.

Expectation domain

The most highly ranked item was "Having the drug available in the pharmacy" (4.97 on a five-point scale), followed by "Having queries and questions about health problems answered" (4.84). People found it easy "To seek advice on health problems or medicines from the pharmacist at the counter" (4.48). The lowest ranked item was "Do not keep me waiting" (3.13).

Some of the respondents (23%) never asked about their health problems in the pharmacy; the majority (70.5%) of those who did asked only about minor ailments. Customers expressed considerable trust in services currently provided by the pharmacy (4.74).

Satisfaction domain

Overall, satisfaction was rated highly (4.88).

Discussion

Our study was merely exploratory and findings reflect the views of a small sample of patients in a single pharmacy. Nevertheless, our results are similar to other studies, which reported high levels of satisfaction with dispensing services [3, 4]. Users' expectations appear to be met with the services currently provided in Spanish community pharmacists [3]. Not surprisingly, in our study supplying of medicines was the main customer expectation, given that "having the drug in the pharmacy" was rated at almost the maximum score (4.97). Privacy was not valued as highly as expected, as respondents considered it was easy to seek advice from the pharmacist at the counter (4.48); whereas the literature recommends a semi-private area for consultations.

Faced with these results the raising question was: "should we continue with the same activity as before the survey, or should we implement new advanced cognitive services, namely pharmacotherapy follow-up?" We favor the latter, as high satisfaction scores in pharmacies not providing advanced cognitive services may be misleading.

In health care we can distinguish between needs, demands, and supplies [5]. Needs have been categorized by others [6] as:

- (a) perceived needs: what a person feels he or she needs; it can be expressed as "what people want". These needs may be deflated by the user's ignorance or rejection of services;
- (b) expressed needs: unmet needs, which are clearly defined as "demands";
- (c) normative needs: what expert opinion based on research defines as a need; they are professionally defined and have a knowledge base.

A perceived need can only be expressed and turned into an expressed need when supply exists [5]: a customer can feel that he needs "a pill for his headache" because he knows that different pain killers exist, or

the need “to be attended by a physician” because physicians are available to care for patients. But, do patients need a pharmacotherapy follow-up service to identify, prevent and resolve negative outcomes from their medication?

Patients are not aware of what a community pharmacy can do for them apart from dispensing. As a result patients’ expectations seem to be confined to the accurate supply of medicines coupled with some form of advice. Hence, it is obvious that patients who are not familiar with APCS cannot have any expectations about their potential benefits. This can explain the high overall satisfaction with pharmacies not providing APCS. Therefore, patient satisfaction surveys should be specific either for distributive or cognitive services [7]; a satisfaction questionnaire designed to assess the former cannot evaluate the latter, and vice-versa.

Satisfaction with APCS can only be assessed using surveys specifically designed to this type of service [8].

Negative pharmacotherapy outcomes are a prevalent public health problem, which can be prevented to some extent. A Spanish study indicates one out of three visits to an emergency department are caused by a negative pharmacotherapy clinical outcome (mainly safety or effectiveness problems), 73% of which could have been prevented with a follow-up [9] of the patient’s pharmacotherapy, provided through the Dáder programme [10], which has proved effective in practice [11].

Low expectations due to a lack of awareness of the existence of this follow-up service should not prevent pharmacists from implementing advance cognitive pharmacy services.

Conclusion

Researchers and practitioners should be careful when designing and interpreting satisfaction surveys, because APCSs are still poorly implemented. Customers’ expectations are based solely on their knowledge of current distributive aspects, and not cognitive services; the fact customers report a high level of satisfaction should not be mislead pharmacists nor should act as a

barrier to implementing advance cognitive services in pharmacies.

Given that there is sufficient evidence of the effectiveness of providing advanced cognitive services, community pharmacists should implement them before they are demanded by patients, and not wait until customers’ needs are felt and expressed.

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