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## Research Article

# Patient's Satisfaction Towards Outpatient Pharmacy Services At Tertiary Health Care Centre

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## ABSTRACT

**Introduction:** Patient satisfaction is a goal to be achieved by health-care services and therefore researched to incorporate improvements in the health-care system. The pharmacy service is an essential element of the health-care system having direct contribution to improve the public health and positive health outcomes. Various factors affect the patient satisfaction in pharmacy service including the socio-demographic variables, waiting time, health status and the patient's expectations, pharmacy location, availabilities of medication and cost. Hence, the present study was aimed at assessing as well as analysing the patient's satisfaction and the variables of outpatient pharmacy services affecting their view at tertiary health care centre.

**Materials and methodology:** Present study was conducted for a period of three months, May 2022 to July 2022. We had included 250 patients of either gender, aged more than 18 years attending the OPD pharmacy at Hassan Institute of Medical Sciences (HIMS) teaching hospital. A pre-formatted, Public Health Clinic Patient Satisfaction Questionnaire (PHC-PSQ) towards pharmacy services, including the demographic details of the patients and the 22 questions related to the pharmacy services will be given to the patients.

### Results:

98% of the patients whereas their main concern was the availability of seating area at the OPD service. Major unsatisfactory components were pharmacist being able to solve all the doubts. female gender and elderly age were negatively correlated with the satisfaction about OPD facilities whereas the satisfaction of OPD services among urban population were found to be positively correlated.

### Conclusion:

Regular studies on patient's satisfaction about various components of the health care

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system will be are crucial which could help in improving and enhancing the quality of particular clinical services.

## **INTRODUCTION**

Patient satisfaction is considered a goal to be achieved by health-care services and, therefore, should be researched to incorporate improvements in the health-care system.<sup>1</sup> The satisfaction of patients is an emotion, a feeling, and a matter of perception. It arises from the patients' appraisal of experience in hospital services; it involves likes and dislikes which are internal and external to the patients.<sup>2,3</sup> The pharmacy service is an essential element of the health-care system that has a direct contribution to improve the public health and positive health outcomes.<sup>4</sup> The availability of pharmacy service and satisfied patients are essential to increase the quality of pharmacy service provided. Many evidences have suggested that wide range of factors affect the patient satisfaction in pharmacy service including the socio-demographic variables such as age, sex, marital status, and race, waiting time, health status and the patient's expectations, pharmacy location, availabilities of medication and cost. Also, this component has been one of the important factors for National Accreditation Board for Hospitals & Healthcare Providers <sup>4,5</sup> Many studies have been conducted to assess patient satisfaction with medical services and associated factors towards satisfaction, but only a few of them have specifically investigated on the outpatient pharmacy services. Hence, we are conducting the present study to analyse the patient satisfaction toward the outpatient pharmacy services in the tertiary healthcare centre, Hassan Institute of medical sciences medical college teaching hospital, Hassan.

## **MATERIALS AND METHEDOLOGY**

Present study was conducted at Hassan Institute of Medical Sciences teaching hospital, Hassan, Karnataka by the department of Pharmacology. We had included all the patients aged more than 18

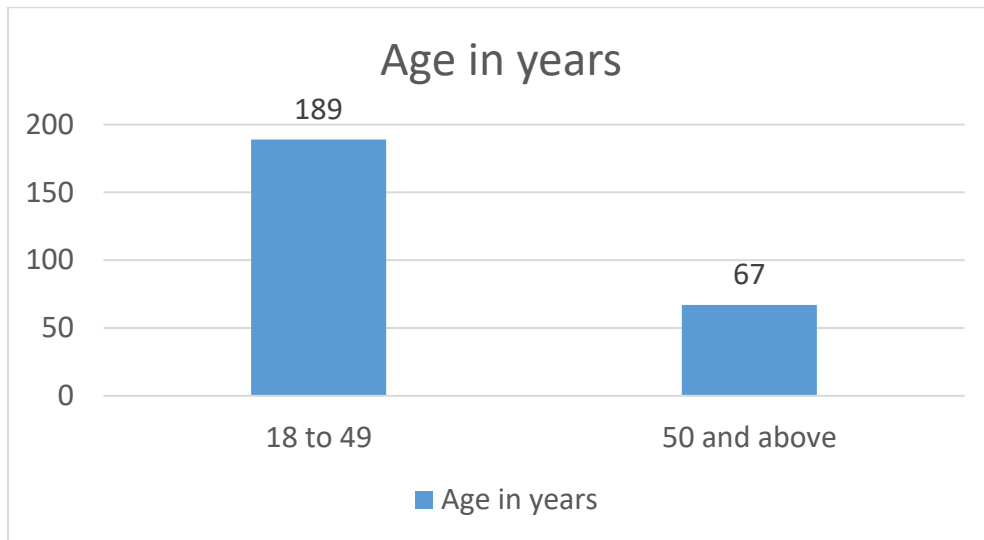
years of either gender, attending OPD Pharmacy at HIMS teaching hospital. Oral consent was taken. If any of the patients not willing to fill the questionnaire were excluded from the study. Also, the inpatients were not being part of this study. Sample size was calculated using the formula,  $4pq/d^2$ . At our institutional hospital OPD, 80 to 85% of the patients attending OPD will be required the OPD pharmacy services at our hospital. Hence the prevalence (p) if taken as 80% and the 5% allowable error (d) is considered for our study.  $q = (100-q)$ . So, the sample size of our study is 256.

After obtaining the ethical committee clearance, informed oral consent will be taken by the patients attending OPD pharmacy at HIMS teaching hospital. A pre-formatted, Public Health Clinic Patient Satisfaction Questionnaire (PHC-PSQ)<sup>9</sup>towards pharmacy services, including the demographic details of the patients and the 22 questions related to the pharmacy services will be given to the patients. The filled responses were analysed using appropriate statistical test by using SPSS version 21.

## **RESULTS**

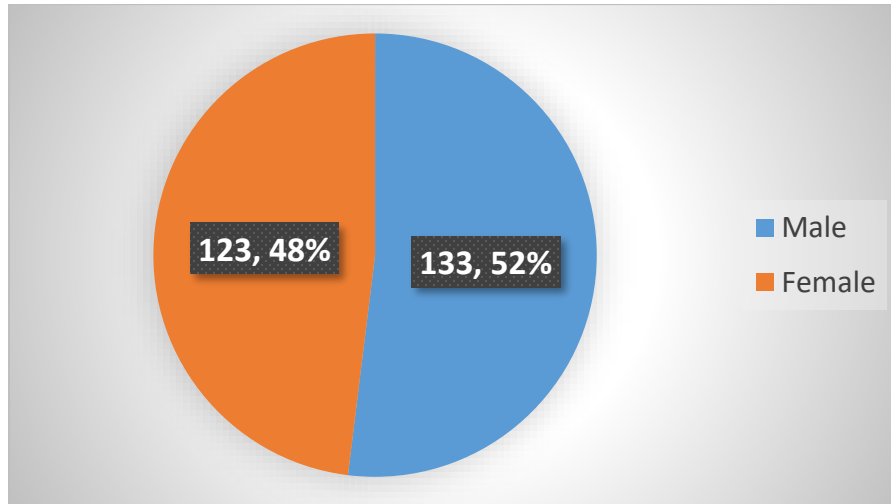
The analysed results are expressed as the tables and graphs below.





**Figure 1: Distribution of age of the study population**

Out of 256 cases included in the study, 189 (73.82%) were aged between 18 to 49 years and the rest were 50 years and above, the same is depicted as bar graph in Figure 1.



**Figure 2: Distribution of the Gender of the study population**

Figure 2 depicts the distribution of gender of study population. On analysing the distribution of Gender, we found that the 133/256 were males and the rest 123/256 were females.

**Table 1: Administrative competency of the Public Health Clinic Patient Satisfaction Questionnaire**

Administrative competency	Yes	%
Directions to the pharmacy are clear?	246	96.1%
Drug dispensing area is clean?	249	97.3%
Sufficient seating is available in waiting area?	198	77.3%
Waiting area is clean?	221	86.3%
Pharmacy counter is comfortable?	198	77.3%
Operative hours are comfortable?	247	96.5%
Were the staffs available at operating hours?	251	98.0%
Waiting hour is the queue is feasible?	198	77.3%

The above table 1 explains one of the major components of public health satisfaction questionnaire, the administrative competency. From the above table, we can analyse that

**Table 2: Technical competency of the Public Health Clinic Patient Satisfaction Questionnaire**

Technical competency	N	%
Pharmacists are polite ?	251	98.0%
The drug label is explained before dispensing?	211	82.4%
Pharmacist explains the frequency of drug administration?	210	82.0%
Pharmacist clarifies all your doubts?	196	76.6%
Do you feel confident with his/her explanation?	201	78.5%
Almost all the prescribed drugs are available?	208	81.25%
<b>Convenience of the pharmacy location</b>		
Is it near the OPD?	256	100.0%
Pharmacy is near to public transport?	243	94.9%
Is pharmacy near your home?	139	54.3%

**Table 3: Correlation between various parameters and the patient satisfaction about OPD services**

	R2 value	P value
Female gender	-0.08	0.0001
Elderly age	-0.3	0.005
Urban	0.11	0.003

Table 3 illustrates the correlation of important demographic details and the overall satisfaction of pharmacy services. We observed that female gender and elderly age was negatively correlated with the satisfaction about OPD facilities whereas the satisfaction of OPD services among urban population were found to be positively correlated. The probable reason behind this has been explained in the discussion section below.

## DISCUSSION

The pharmacy service has been observed to be an essential element of the health-care system that has a direct contribution to improve the public health

operating hour of the OPD services and the availability of staffs being agreed by 98% of the patients whereas their main concern was the availability of seating area at the OPD service.

and positive health outcomes but has been depending on the many variables. Identifying the variables, its association with the quality of health care facility provided is one of the crucial steps. Hence, the present study was conducted to assess one such healthcare facilities, the outpatient pharmacy services. In our study, majority of the patients were aged between 18 to 49 years with male predominance. The reason behind this was the distribution of young population and the male gender being high in the study area. We observed that elderly and female gender had negative correlation with the correlation coefficient, p value of -0.3,0.05 and 0.08, 0.0001 about the services provided at our outpatient pharmacy. This was consistent with the outcome by Khudair IF et al,<sup>5</sup> in which even they have explained that aged and females being negatively opined irrespective of the availability of the medicines at their pharmacy.

This could be due to the osteoarthritis or the elderly patients been commonly found with comorbidities which would be debilitating them to walk and identify the medicine or even understand the instructions provided by the pharmacists. Female patients being more among dermatological and gynaecological OPDs, few of the topical usage medicines were not been available at our pharmacy during the period of study due to technical issues, which were sorted later. Even Ayele Y et al had observed higher satisfaction level among young patients compared to old.<sup>6</sup> In contrast to our observation, few outpatient pharmacy satisfaction data from Ethiopia have reported no correlation between the satisfaction of the available facilities and sociodemographic data.<sup>7-9</sup> Whereas, Alanazi AS et al and Abebe TB et al<sup>10,11</sup> had observed positive association among male population and the educated patients

like ours. The probable cause they have mentioned is, females might be hesitating in asking about the medication information due to cultural variation. In few regions or countries, females hesitate even in communicating to the male healthcare workers. Hence, the lack of clarification about medication. Also, the educated individual will be having some information and better understanding about the prescribed medication than others, which has reported as increased level of satisfaction towards outpatient pharmacy services.<sup>10</sup> We had also observed that 98% of the study population were satisfied with the politeness of the pharmacy staffs and their availability. This was possible due to the regular tracking of the attendance and the training of our staffs. The explanation about the dispensed drugs and the frequency of administration was >80% satisfied, clearing the doubts was satisfied among 76.6% only. The main reason we found behind this was the patients were most questioned regarding the duration of subsiding the disease they were suffering with, majority of those being common systemic chronic illness, the pharmacy staffs were unable to explain the same. To overcome this, we had instructed them to direct the patient or their attendants to the treating doctors for further discussion. Contrast our study, Alanazi AS et al<sup>10</sup> had reported that only 30% of the patients had satisfied about the availability of pharmacy staffs and just 52% were agreed that the pharmacists provide sufficient information. Whereas 61% were satisfied about them clearing the doubts which is comparatively lesser than present study. This was inconsistent with the observation by Upadhyaya DK et al<sup>12</sup> who had observed that Diabetic kit demonstration by the healthcare professionals had strengthened the satisfaction level among diabetic patients and their any studies, specially from south Indian tertiary care centres in this regard. Hence, this could be one of the reference articles for upcoming quality assessment studies.

attenders. Same way, if we enable our staffs regarding common systemic illness, the duration of drugs and related complications, their outcome, we could increase the satisfaction in this aspect as well. Pertaining to the seating area availability, ours being a district government hospital, the patient input keep increasing exponentially. To overcome this and the waiting time, we have been increasing the number of OPD dispensing counters. On analysis, we found that 54.3% of the population been commented that the OPD pharmacy is not near their residence, this is because of majority of our patients from rural sector. Being a district hospital, it is at equal distance from majority of the villages as well, which could be reached easily by various modes of transport at nominal transport charges. Kebede et al<sup>13</sup> had used pharmacy exit interview, Self-Reporting Questionnaire-17. They found that number of drugs dispensed, medication availability and the reachability were negatively satisfied. Also, the overall satisfaction survey been reported negative in their study. Hence, they had advised that hospitals need to take attention to and consider the identified gaps like improving the availability of drugs, comfortability of waiting area, payment status, and the number of drugs dispensed, and the frequency of visits.<sup>13</sup> Unlike our study, Ismail A et al<sup>14</sup> had assessed that higher education had negative correlation with the outpatient pharmacy services whereas as like ours, even the elderly patients in their study were less satisfied. We would like to mention that Zhang XH et al<sup>15</sup> were the authors who had conducted a study to validate the questionnaire regarding patients' satisfaction and the trust on pharmacists. Many more such studies would enable the medical facilities. Strength of our study is, we hardly found

**CONCLUSION:**

Elderly patients and females have the negative satisfaction level about the pharmacy services. Availability of few medications to be improved.



Seating area and the waiting time need to be addressed. Regular pharmacy service satisfaction studies, which are even part of NABH quality assessment to analyse the patient's expectation are crucial which could help in improving and enhancing the quality of clinical services in healthcare facilities.

Strength of our study is could be one of the reference articles for upcoming quality assessment studies. The major limitation of our study was, the data was collected from three outpatient pharmacy outlets, as we have separate outlets for pediatrics and OBG, psychiatry and one more for rest of departments. Though the infrastructure is almost similar, the seating area differs. This could have been affected the response for administrative component of the pharmacy satisfaction questionnaire.

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