

Feeding Back Pharmacy Staff on their OTC Dispensing Performance: an Exploratory Study

Paulo Veiga ^{1*}, Luís V. Lapão ², Afonso M. Cavaco ^{1,3}, Mara P. Guerreiro ⁴

¹Instituto de Investigação do Medicamento (iMed.Ulisboa), Faculdade de Farmácia, Universidade de Lisboa, Av. Prof. Gama Pinto, 1649-003 Lisboa, Portugal

² WHO Collaborating Center for Health workforce policy and planning, Instituto de Higiene e Medicina Tropical, Universidade Nova de Lisboa, Portugal

³Faculdade Farmácia Universidade de Lisboa (FFUL), Lisbon, Portugal

⁴Instituto Superior de Ciências da Saúde Egas Moniz (ISCSEM), Monte da Caparica, Portugal | | Escola Superior de Enfermagem de Lisboa (ESEL), Lisbon, Portugal

* Email: paulojcveiga.ff.ul.pt

Introduction

Pharmacies are often the first port of call for consumers with minor illness. However, the literature shows that pharmacies performance in the supply of OTC is suboptimal [1]. Little is known about the reasons underlying suboptimal performance.

Aim

This paper, which is part of a larger study, reports pharmacy staff's perspectives on simulated patient visits involving the supply of OTC medicines.

Design & Methods

Simulated Patient visits:

4 Symptom-based Scenarios:

- Dry Cough;
- Diarrhea;
- Dyspepsia;
- Productive Cough

3 Product-based Scenarios:

- Topical Decongestant;
- Oral Diclofenac;
- Oral Emergency Contraception

Ethical approval granted and informed consent obtained

Performance data were collected by means of a previously tested checklist

Data converted into two composite scores: Interpersonal or Technical Performance Index = (number of complied IP or T criteria / total number of IP or T criteria) x 100

Semi-structured Interviews:

- Interviewees consisted of one pharmacist, one pharmacy-technician and three counter-assistants in one urban pharmacy;
- Participants received general feedback on standards met and scores;
- Analysis of verbatim transcripts using the framework approach [2] with the aid of NVivo® v10. The tripartite model of attitudes was employed to develop the thematic framework [3].

Results

10 validated simulated patients visits

Mean Technical Performance Score = 50.4%

Mean Interpersonal Performance Score = 77.7%

Symptom-based Scenarios = 63.2%

Product-based Scenarios = 31.3%

Semi-structured Interviews:

Inadequate patient evaluation and counselling were found during the simulated patient and results were feedback to participants. Most participants expressed disappointment about unmet standards and provided justifications for their suboptimal performance.

Reasons included:

- Perceiving some questions as irrelevant;
- Believing the person was already informed;
- Considering counselling for cold medicines unnecessary (as they are commonly used);
- Believing written instructions are unnecessary if the consumer had been informed orally;
- Discomfort in questioning and counselling consumers seeking emergency contraception.

Data analysis indicated that staff centered their behaviors on beliefs, perceptions and past experiences rather than factual knowledge.

Conclusion

Our study suggests that pharmacy staff needs to be encouraged to engage in effective communication with consumers, to ascertain their needs and wishes pertaining to OTC medicines. A larger study is warranted to confirm our findings.

References:

- [1] Xu T., Neto A.C.A. and Moles R.J. (2012) "A systematic review of simulated-patient methods used in community pharmacy to assess the provision of non-prescription medicines", Int J Pharm Practice, 20, pp. 307-19. [2] Pope C., Ziebland S. and Mays N. (2000) "Analysing qualitative data" BMJ 320(7227), pp. 114-16. [3] Rosenberg M.J. and Hovland C.I. (1960) "Cognitive, affective, and behavioral components of attitudes" in Attitude organization and change: An analysis of consistency among attitude components (pp. 1-14), New Haven, CT: Yale University Press.