

SUMMARY

Title: The Scope and Quality of Pharmaceutical Services from the Point of View of Patients in Poland and England

Introduction

Pharmaceutical care improves patients' health by monitoring the effects of pharmaceutical treatment and reduces the costs of the treatment through providing pharmaceutical services defined in the catalogue. In Poland, there is currently no pharmaceutical care model tailored to the country's healthcare system. In England, a wide range of pharmaceutical services divided into defined catalogues and covered by private schemes or by the National Health Service are available in community pharmacies.

Aims

The aims of the present study were to survey differences in patient perception of community pharmacies in Poland and England, and to compare the patients' expectations and preferences regarding the pharmaceutical services provided by the two countries.

Methods

The study was carried out between November 2012 and January 2013. A self-administered, anonymous questionnaire consisting of 31 questions was distributed to community pharmacies in various counties in England, and in various voivodeships in Poland. All statistical analyses were performed using StatSoft. Inc.'s (2014) Statistica (data analysis software system), version 12.0 www.statsoft.com and Excel spreadsheet. The study obtained ethical approval in Poland and England.

Results

The response rate of eligible participants was 55.7% ($n = 418/750$) for 36 pharmacies in Poland and 54.0% ($n = 405/750$) for 56 pharmacies in England. A total of 823 patients were enrolled in the study. The majority of the comments were negative with regard to patient satisfaction with pharmacy performance in Poland. By contrast, there was a high level of patient satisfaction in England. In both Poland and England, 75% of the patients expressed high expectations for all the pharmaceutical care services detailed in our survey, including measurement of blood glucose, cholesterol, blood pressure and body weight, training in inhalation techniques and inhaler use for asthmatic patients, provision

of glucometers for diabetic patients and digital blood pressure monitors for individuals with high blood pressure, and guidance on smoking cessation. In both countries, patients considered their knowledge of medicines to be either very good (Poland, 19.9%, n=83; England, 23.0%, n=93) or good (Poland, 48.9%, n=204; England, 46.9%, n=190). Differences between the responses from Poland and England were found regarding the use of the WWHAM OTC sale protocol, with 65.9% (n=275) of Polish patients implying that none of the WWHAM questions had been asked by the pharmacist compared with 10.6% (n=43) of patients in England. We also found that a higher proportion of prescriptions were not filled in Poland (12.2%, n=51) versus England (1.5%, n=6). Every third Polish patient who did not fill a prescription reported that their decision was made because of financial difficulties. The analysis showed that in almost all aspects, the opinions of Polish and British patients were statistically different ($p<0.05$).

Conclusions

Polish patients expressed a high degree of interest in all pharmaceutical services that are currently offered by community pharmacies in England, but not in Poland. The lack of a similar pharmaceutical care plan in Poland may have an impact on patient health. The WWHAM protocol, very important in patient self-treatment, is not followed in Poland. Furthermore, in Poland, patients are required to cover higher costs of filling pharmaceutical prescriptions. Changing the medication reimbursement system and offering new pharmaceutical services in community pharmacies could improve the number of prescriptions filled and the cost-effectiveness of medical treatment. Polish community pharmacies could likely improve patient satisfaction with their services by becoming more involved in patient counselling. Implementing the British pharmaceutical care model in Poland would improve patient perception of the community pharmacy in Poland. Polish community pharmacies should be more involved in patient counselling. The loyalty of patients for pharmacies in the British model, where there is a well-developed catalog of services, is higher comparing with Poland.

Key words: pharmaceutical care, demand for pharmaceutical services, level of patient satisfaction with pharmaceutical services, factors influencing patient choice of a pharmacy, community pharmacy

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