

What do patients want from pharmacy?

All community pharmacies will have to conduct patient satisfaction surveys under the new contract. **Clare Bellingham** finds out about one organisation that has already surveyed nearly 1,000 patients at 53 pharmacies in England and Wales

Under the new community pharmacy contract, all pharmacies will have to carry out a patient satisfaction survey. The survey will form one of the clinical governance requirements. Clinical governance is an essential service in the new contract and it is covered in this week's **Contract 2005** (p519).

Clinical governance is something that all health professionals are having to get to grips with. Patient satisfaction surveys are not just a requirement for community pharmacy; GPs faced the same demand in their new contract, implemented in April this year. Many GPs have chosen to use the services of a specialist organisation for this function.

The Department of Health has accredited two organisations' questionnaires for the job. One is the "Improving practice questionnaire" produced by the Client-Focused Evaluations Programme, based at the University of Exeter (further information at www.cfep.net). Its executive director, Michael Greco, is currently talking to the DoH about the possibility of offering a similar service for pharmacists. The other is the General Practice Assessment Questionnaire developed by the National Primary Care Research and Development Centre in Manchester.

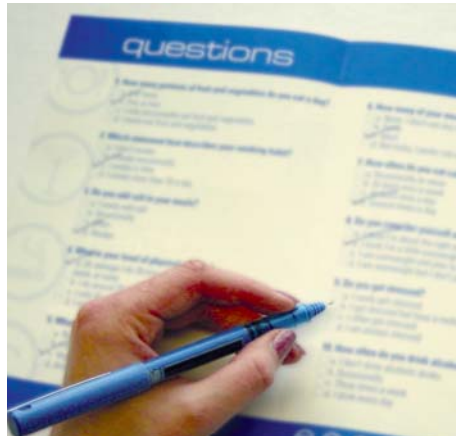
The CFEP already has experience of pharmacy-based patient satisfaction questionnaires. At the request of the Healthcare Commission, it designed a pharmacy questionnaire. At the same time, primary care trusts that had been using the organisation's GP questionnaire started requesting something similar for pharmacies.

The result is an "Improving practice questionnaire" for pharmacy consisting of 27 questions about the pharmacy, the pharmacist and the services the pharmacy provides. So far, it has been used at 25 pharmacies across six PCTs in England and 28 pharmacies in eight local health groups in Wales. A total of 936 questionnaires have been analysed, equating to about 25 forms per pharmacy.

Questionnaire results

The headline result from the 936 questionnaires is that patients are positive about pharmacists, but less positive about pharmacy premises. "What it comes down to is that patients like the product — the pharmacist — but it is getting to it and its surroundings that needs tinkering with," says Dr Greco.

"The lowest scoring items were about access to the pharmacy, availability of privacy, and the comfort and surroundings in the pharmacy," he explains. Patient comments about access included: "Should be open from early morning until 10pm", "Make the door easier to use" and "Improve parking facilities



Patient questionnaires: in the contract

ties". Regarding privacy, patients said: "Address the lack of privacy for consultation", "Consultation area needs to be a little more private" and "Information on the availability of privacy should be made known to patients". A number of patients wanted more chairs in the pharmacy — "Provide three to four seats for customers getting prescriptions who do not feel well" — and some wanted the pharmacy to be bigger.

Dr Greco comments that issues around seating and privacy could probably be addressed relatively easily. "If pharmacists explain to patients where they can talk privately it would help," he suggests.

Another area in which pharmacies scored relatively poorly was in providing information about preventing disease and public health. "Waiting times were a bit of an issue too. But it was more about people wanting to know how long they had to wait rather than the wait itself," he adds.

On the positive side, patients rated pharmacists highly. The highest scoring question was about the respect patients felt pharmacists showed them. This was followed by patients' confidence in pharmacists' knowledge, overall satisfaction and trust in the pharmacist. "All these areas were rated at over 90 per cent compared with 60 to 70 per cent for the lower scoring questions," says Dr Greco. Scoring was based on a percentage of excellence, so for a score of 100 per cent all patients would have rated the pharmacy as excellent.

Patient comments included: "The pharmacist and his assistant are always hospitable, willing to help and very approachable", "I have always received excellent services and this has involved some very serious illnesses" and "An asset to the community".

When CFEP analyses a pharmacy's patient questionnaires, it not only provides the results but also benchmarks them against other pharmacies. "This allows pharmacists to compare

how they are doing with other pharmacies," says Dr Greco. At the moment, the benchmark is the average of all the other pharmacies that have taken part but he plans to provide more precise benchmarking in future with categories such as similar-sized pharmacies or pharmacies in one geographical area.

The CFEP also plans to provide workshops to allow pharmacists to explore how they can act on the questionnaire results. The workshops will cover how to bring a small group of patient together to help advise the pharmacy on taking the results forward and how to think about clinical governance plans.

What happens next

"Seeking patients' views is an essential service in the new pharmacy contract and our survey could be a model for [all] pharmacists," says Dr Greco. He adds that the CFEP has been commissioned to carry out surveys by nearly 5,000 GP practices in over 200 PCTs. "We could do the same for pharmacists. The DoH is currently looking at this and I would recommend that a choice of questionnaires is made available as it has been for GPs."

Dr Greco comments that one of the reasons the CFEP approach has been popular with GPs is that it is an independent organisation, based at the Innovations Centre, University of Exeter, and not part of the NHS. "GPs feel confident that our results are confidential. We do not have to release the results to anyone else," he says.

The question is how much would it cost? Dr Greco says it would be quite cheap. "For a one-pharmacist pharmacy it would be around about £100. The cost would be increased for more than one pharmacist but it would not get above £200 for pharmacy-level results," he explains.

"Pharmacists have done this type of work before on an ad hoc basis. This is about doing it systematically, providing a benchmark and helping the pharmacy to move forward," says Dr Greco. "Although pharmacists are used to getting customer feedback it is usually complaints-driven, not a systematic approach."

Perhaps it is worth noting that in the surveys carried out so far, patients said that they had little opportunity to make complaints or comments about pharmacies. If pharmacy is to move forward to a new quality-based contract, finding out what patients think about and want from pharmacy will be key. Carrying out a patient satisfaction survey and having a complaints procedure are both essential services in the new contract. But it is not just about carrying out these functions because the contract dictates it, it is about gaining information from them and using it to improve the quality of services.