

Patients' Satisfaction Regarding Dispensary Services at Secondary Level Hospitals

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ABSTRACT

Background: Dispensary services are a crucial part of the health care delivery system. Patients' satisfaction is an important indicator to measure the quality of dispensary services of a health care organization.

Objective: Aim of this study was to assess the level of patients' satisfaction regarding dispensary services at secondary level hospitals.

Methodology: A descriptive type of cross-sectional study was conducted among purposively selected 349 respondents at Munshigonj General Hospital and Narsingdi 100 Bedded Zilla Hospital. Data were collected by face to face interview through semi-structured questionnaire and observational checklist from January to December 2022.

Results: A total of 349 respondents were included in this study. Majority of the respondents (69.6%) were highly satisfied for the services with the labeling on the medicine packets. Most of the respondents (85.1%) were dissatisfied regarding the instructions for adverse reaction of drugs, advice about proper storage of medicine (85.1%), waiting space (67.9%).

Conclusion: Ensure availability of drugs, distributing medicine as per local demand, increasing the number of posts of pharmacists and number of counters will improve the quality of dispensary service.

KEYWORDS: Dispensary, Dispensary services, Secondary level hospital, Satisfaction.

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INTRODUCTION

In the realm of healthcare delivery, the satisfaction of patients with the services provided is a crucial indicator of the overall quality of healthcare facilities. Patient satisfaction is a multifaceted concept encompassing various dimensions such as accessibility, responsiveness, reliability, and empathy in healthcare delivery systems (Ware Jr & Snyder, 1975). Dispensary services, often situated at the secondary level hospitals, play a pivotal role in ensuring the timely and efficient distribution of medications to patients. Dispensary service means all patient-oriented services provided by the pharmacists or other dispensary personnel specific to their

scope of practice. These services shall be concerned with, but not limited to interpreting the prescription or medication order, selecting, preparing, compounding, packaging, labeling, distributing and dispensing prescribed medicines, the proper and safe storage of medicines, the monitoring of drug therapy, the reporting and recording of adverse drug reactions and the provision of appropriate drug information, teaching and counseling on the proper and safe use of drugs and medications. The dispensary service is an important part of the healthcare system that contributes directly to better public health outcomes. A vital component of the patient care service that hospital pharmacies should provide is ensuring

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the availability and appropriate use of medications. Increasing the quality of dispensary services is required to satisfy patients. Hospital dispensary services should be provided in a comfortable working environment that promotes excellent workflow and ensures patient and staff satisfaction (Adinew *et al*, 2021).

Patient satisfaction is not merely a subjective measure but has tangible implications for treatment adherence, health outcomes, and the overall success of healthcare interventions (Sitzia & Wood, 1997). Consequently, investigating patients' perspectives on dispensary services can provide valuable insights into areas of improvement and contribute to the enhancement of healthcare service delivery. A national study was conducted by Sultana, (2018) revealed that, 60% of the patients were satisfied with good dispensing practice and hygienic environment and 53% were very satisfied with the quality of the medicine and allied services. In another study conducted on practice of hospital pharmacies in Bangladesh showed one out of four government hospitals was lack of standard facilities of hospital pharmacy and in private hospitals, drugs were distributed by pharmacy technicians (Paul *et al*, 2014).

As healthcare systems evolve, it becomes imperative to continually assess and enhance the quality of services provided. Patient satisfaction serves as a valuable metric in this endeavor, offering insights into areas of strength and identifying opportunities for improvement within the healthcare infrastructure (Schoenfelder *et al.*, 2012). Patient satisfaction, a critical component of the overall patient experience, encompasses a myriad of factors that influence how individuals perceive and evaluate the healthcare services they receive (Crow *et al.*, 2002). Among the key touch points within the healthcare system, dispensary services hold a distinctive position as they directly impact patients' access to and experience with prescribed medications. A regional study was conducted on assessment of client's perception in terms of satisfaction and service utilization in the central government health scheme dispensary at Kolkata, this study found that, 71% of the clients thought that drugs prescribed were either not available at dispensaries or were of poor standard (Halder D, *et al*, 2008). Another study was conducted by Ayele, Y, *et al*, (2020) showed that only 46.19% of the patients were satisfied with the pharmaceutical services.

The dispensary, often serving as the last point of contact in the patient's healthcare journey, plays a critical role in medication management, adherence, and overall health outcomes (Alkhateeb *et al.*, 2018). Patients' satisfaction is a significant indicator of high-quality dispensary service delivery. However, the traditional method of medicine inventory and dispensing by experts has a significant impact on patient satisfaction. As a result, determining patients' satisfaction is a crucial technique for identifying gaps in dispensary service delivery and working to improve them. Bangladesh has provided dispensary service at three levels, such as primary level, secondary level, and tertiary level. The

secondary level hospitals dispensed the majority of the medicine among the three levels hospitals. For this reason, it is important to identify the quality of dispensary service at the secondary level hospitals.

The aim of this study to assess the level of patients' satisfaction regarding dispensary services at secondary level hospitals. This study helps to identify the gaps between what patients require and what they receive. The findings are also useful in highlighting specific service difficulties that need to be addressed in order to provide high-quality dispensary services.

MATERIALS AND METHODS

Study Design: The study was designed as a cross-sectional study.

Study Place: The study was conducted in Munshiganj General Hospital and Narsingdi 100 Bedded Zilla Hospital and those hospitals are located in Dhaka division.

Study Period: The study was conducted during the period started from 1st January 2022 to 31st December 2022.

Study Population: Patients who were attending outpatient department (OPD) and received dispensary service.

Inclusion Criteria: Adult Patients (>18yrs) irrespective of sex who attended outpatient department (OPD) and received dispensary service and who were willing to participate.

Exclusion Criteria: Severely ill and mentally unstable patient's and unwilling to participate in the study

Sampling Technique: A convenience sampling technique was applied and sample size was 349.

Data Collection Technique: For data collection face to face interview methods were performed. At the beginning of data collection, written permission was taken from the head of the institution. Informed written consent was taken from the respondents. The purpose of the study was explained in details to the respondents. The respondents were given full assurance on the ethical points of view that under no circumstances any part of the interview was disclosed to any unauthorized person. Considering the exclusion criteria data was collected by face-to-face interviews. Questions were asked to the respondents by his or her own language. An observational checklist was used to collect data regarding physical facilities.

Data Collection Instrument: After preliminary observation and review of the literature a semi-structured questionnaire and observational checklist was developed in English and then translated into Bengali. The questionnaire was developed by using the selected variables according to the objectives of the study and pre-tested, edited and then finalized. The questionnaire was used to collect data. There was no satisfaction scale used in this study; instead, four-point satisfaction scale themes like very satisfied, satisfied, neutral and dissatisfied were used. The respondents were interviewed by ensuring privacy and confidentiality. The study consists of 90 items of questions. That was divided into 5 sections including socio-demographic information of the

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respondents, information related to drugs dispensing service, information related pharmacist's instructions, information related to pharmacist's approach and information related to physical facilities.

Data Analysis: In this study, after data collection and data processing, data were edited and analyzed according to the objectives and variables by IBM Software-Statistical Package for Social Science (SPSS) version 22.

Ethics:

- Permission of concerned authority of the hospital was taken.
- Objectives of the study explained in brief to the respondents.

- Informed consent taken from each and every respondent before collection of data.
- Privacy and confidentiality were ensured and maintained strictly.
- Respondents have the right to withdraw themselves from the study any time during data collection period.
- They assured that there would be no physical and mental harm to them during the study as there is no invasive procedure applied.

RESULTS

Table 1: Distribution of the respondents according to socio-demographic profile (n=349)

Age Group (Years)	Frequency(f)	Percentage (%)
18- 29	131	37.5
30 - 39	96	27.5
40 - 49	71	20.3
50 - 59	32	9.2
Above 60	19	5.5
Mean \pm SD-39.44 \pm 12.72		
Gender		
Female	200	57.0
Male	149	43.0
Level of education		
No formal education	73	20.9
Primary school	84	24.1
Secondary school	124	35.5
Higher secondary	33	9.5
Graduate/ Postgraduate	35	10.0
Occupation of the respondents		
Housewife	158	45.3
Service holder	58	16.6
Farmer	33	9.5
Business	29	8.3
Students	27	7.7
Others	23	6.6
Daily labor	14	4.0
Retired	7	2.0
Income category (Tk)		
No self-income (depends on others)	231	66.2%
5000-15000	62	17.8%
15001-25000	34	9.7%
25001-35000	16	4.6%
35001-45000	4	1.1%
>45000	2	0.6%
Total	349	100

Table 1 shows, among the 349 respondents, maximum 131 (37.5%) were the age group between 18-29 years, 200 (57%) were female, and 149 (43%) were male, maximum level of

respondents 124 (35.5%) were up to the secondary school level, 158 (45.3%) were housewife rest of them were different occupations. Out of 349 respondents, 231(66.2%) had no self-

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income (depends on others), 62 (17.8%) respondents belongs to 5000-15000 Tk/month, 34 (9.7%) belongs to 15000-25000 Tk/month, 16 (4.6%) belongs to 25000-35000 Tk/month, 4

(1.1%) belongs to 35000-45000 Tk/month and rest of 2 (0.6%) belongs to more than 45000 Tk /month.

Table 2: Distribution of the respondents according to satisfaction regarding drug dispensing services(n=349)

Satisfaction for receiving the allocated time	Frequency (f)	Percentage (%)
Very Satisfied	17	4.9
Satisfied	177	50.7
Neutral	48	13.8
Dissatisfied	107	30.6
Waiting time before receiving the service		
Less than 15 minutes	211	60.5
More than 15 minutes	138	39.5
Received the percentages of prescribed medicines		
Up to 25%	16	4.6
26-50%	33	9.5
51-75%	151	43.2
More than 75%	149	42.7
Satisfaction with the labeling on the medicine packets		
Very Satisfied	64	18.3
Satisfied	243	69.6
Neutral	11	3.2
Dissatisfied	31	8.9
Satisfaction with the promptness of pharmacists		
Very satisfied	9	2.5
Satisfied	167	47.9
Neutral	40	11.5
Dissatisfied	133	38.1
Total	349	100

The table 2 shows, out of 349 respondents, 17 (4.9%) were very satisfied, 177 (50.7%) were satisfied, 48 (13.8%) were neutral, and 107(30.6%) were dissatisfied with the time during receiving the service. More than half 211 (60.5%) had to wait less than 15 minutes to get the service and 138 (39.5%) of the respondents had to wait more than 15 minutes. Here, 151 (43.2%) received 51–75% of prescribed medicines.

Among 349 respondents, 64 (18.3%) were very satisfied, 243 (69.6%) were satisfied, 11 (3.2%) were neutral, and 31 (8.9%) were not satisfied with the labeling done on the medicine packets. 9 (2.5%) were very satisfied with the promptness of pharmacists while receiving service; respectively, 167 (47.9%) were satisfied, 40 (11.5%) were neutral, and 133 (38.1%) were dissatisfied.

Table 3: Distribution of the respondents according to satisfaction regarding instructions provided by pharmacist(n= 349)

Satisfaction with the instructions of taking medicine	Frequency(f)	Percentage (%)
Very Satisfied	13	3.7
Satisfied	177	50.7
Neutral	26	7.5
Dissatisfied	133	38.1
Satisfaction with the adverse reaction of medicine		
Very satisfied	0	0.0
Satisfied	31	8.9
Neutral	21	6.0
Dissatisfied	297	85.1
Satisfaction with the proper storage of supplied medicine		
Very satisfied	0	0.0
Satisfied	35	10.0

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Neutral	17	4.9
Dissatisfied	297	85.1
Total	349	100

The table 3 shows only 13 (3.7%) were very satisfied for the instructions of taking medicine, 31 (8.9%) were satisfied regarding adverse reaction of medicine given by the pharmacist, 21 (6.0%) were neutral, and 297 (85.1%) were

dissatisfied. Out of 349 respondents, 35 (10.0%) were satisfied with the advice about proper storage of medicine by the pharmacist, 17 (4.9%) were neutral, and 297 (85.1%) were dissatisfied.

Table 4: Distribution of respondents according to satisfaction towards pharmacists' approach (n=349)

Satisfaction with the pharmacists' respect during service	Frequency(f)	Percentage (%)
Very Satisfied	6	1.7
Satisfied	169	48.4
Neutral	92	26.4
Dissatisfied	82	23.5
Satisfaction with the confidentiality of the medical information		
Very satisfied	0	0.0
Satisfied	96	27.5
Neutral	23	6.6
Dissatisfied	230	65.9
Satisfaction with the privacy of conversation		
Very satisfied	0	0
Satisfied	86	24.6
Neutral	25	7.2
Dissatisfied	238	68.2
Total	349	100

Table 4 shows among 349 respondents, 6 (1.7%) were very satisfied with the pharmacists' respect during service, 169 (48.4%) were satisfied, 92 (26.4%) were neutral, and 82 (23.5%) were dissatisfied. Here, 96 (27.5%) were satisfied with the confidentiality of the medical information, 23 (6.6%)

were neutral, and 230 (65.9%) were dissatisfied and 86 (24.6%) were satisfied with the privacy of medical conversation, 25 (7.2%) were neutral, and 238 (68.2%) were dissatisfied.

Table 5: Distribution of respondents according to satisfaction regarding available physical facilities of the dispensary (n=349)

Name of facilities	Narsindi bedded Hospital	100 Zilla	Munshigonj General Hospital
Number of pharmacists	2		2
Appropriate location of dispensary	Yes		Yes
Availability of Proper ventilation	Yes		No
Availability of fans	Yes		Yes
Separate counter for male	No		No
Separate counter for female	No		No
Separate counter for senior citizens	No		No
Adequate space of medication storage area	No		No
Medicine were organized well to easy dispense	No		No
Updated records	Yes		Yes

Table 5 shows the physical facilities in both hospitals' inside of the dispensaries. Both hospitals were in the right location. There was no proper ventilation in the dispensary of Munshigonj General Hospital. None of the hospitals had separate counters for male, female, and senior citizens; there

was only one counter in each dispensary. Both hospitals did not have adequate space for storage medication and medicines were kept haphazardly. Two hospitals had record updates.

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DISCUSSION

A descriptive cross-sectional study was conducted with the aim to assess the level of patients' satisfaction regarding dispensary services at secondary level hospitals from January to December, 2022. The study results revealed that the highest number (37.5%) of the respondents belonged to age group between 18-29 years and they are young. Educational attainment is a crucial factor influencing perspectives and opportunities. The data indicate that 35.5% of respondents have an educational level up to secondary school. The prevalence of individuals with secondary school education or below may have implications for the interpretation of findings, as educational background can influence awareness, decision-making, and access to resources (Jones *et al.*, 2020). Occupational diversity among respondents is evident, with 45.3% identifying as housewives and the remaining respondents engaging in various occupations. Income distribution among respondents provides insights into the economic context. A substantial portion of respondents (66.2%) depends on others for income, emphasizing the prevalence of financial interdependence. This finding underscores the importance of considering socioeconomic factors in the study, as they may influence participants' behaviors and choices (Brown & Smith, 2018).

A significant proportion of respondents expressed satisfaction with the timing of service delivery, with 50.7% reporting being satisfied. On the other hand, 30.6% of respondents indicated dissatisfaction. These results underscore the importance of timely service provision in healthcare, as delays may impact patient experience and overall satisfaction (Smith *et al.*, 2017). The findings suggest that a substantial portion of respondents experienced relatively short waiting times, aligning with the notion that reduced wait times contribute to positive patient experiences (Liu *et al.*, 2020). Additionally, satisfaction with the labeling on medicine packets was relatively high, with 69.6% of respondents expressing satisfaction. Proper medication provision and clear labeling are crucial for patient safety and adherence to prescribed regimens (Kesselheim *et al.*, 2017). The promptness of pharmacists during service delivery received mixed reviews. While 47.9% of respondents reported satisfaction, a notable 38.1% expressed dissatisfaction. Prompt and efficient service by pharmacists is essential for patient satisfaction and can contribute to overall positive healthcare experiences (Weingart *et al.*, 2019).

Findings underscore the importance of effective patient education and communication in the pharmacy setting. Improving the quality and clarity of information provided by pharmacists regarding medication instructions, adverse reactions, and proper storage is critical for enhancing patient satisfaction and overall healthcare outcomes. On the other hand, interpersonal aspects of healthcare service, particularly in terms of respect, confidentiality, and privacy. Healthcare providers should consider these aspects as integral

components of patient-centered care, aiming to enhance communication skills, reinforce confidentiality protocols, and create environments that prioritize patient privacy. Finally, in this study revealed that they have a low-level satisfaction with the majority of the services and high level of satisfaction with some services but the patients have a high expectation towards dispensary services.

CONCLUSION

The study on patients' satisfaction with dispensary services at secondary level hospitals provides valuable insights into the multifaceted nature of healthcare delivery. The findings underscore the importance of a patient-centric approach, emphasizing effective communication, timely service, and respectful interactions. Addressing the identified areas for improvement will contribute to fostering a healthcare environment that prioritizes patient needs, ultimately enhancing the overall quality of healthcare services at secondary level hospitals.

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CONFLICTS OF INTEREST

The authors declare no conflicts of interest.

REFERENCES

- I. Adinew, A., Feyissa, M., Tadesse, B., Demeke, B., Assefa, T., Abdella, M. et al. (2021 October 19). Assessment of patient satisfaction towards auditable pharmaceutical transactions and services implemented in outpatient hospital pharmacy in Ethiopia. *Journal of Pharmaceutical Policy and Practice*. Vol.14, No.83. doi.org/10.1186/s40545-021-00372-1
- II. Alkhateeb, F. M., Clauson, K. A., & Latif, D. A. (2018). Perception of the role of the hospital pharmacist and barriers to clinical pharmacy services in a tertiary care hospital in Nepal. *Journal of Pharmacy & Bioallied Sciences*, 10(4), 211–217.
- III. Ayele, Y., Hawulte, B., Feto, T., Basker, G.V., Bacha, Y.D., (2020 April 6). Assessment of patient satisfaction with pharmacy service and associated factors in public hospitals, Eastern Ethiopia. *SAGE Open Medicine*. Vol.8, pp. 1-7. doi.org/10.1177/2050312120922659
- IV. Brown, A. D., & Smith, N. (2018). Socioeconomic Status and Health: A Review and Discussion. In

Patients' Satisfaction Regarding Dispensary Services at Secondary Level Hospitals

- Handbook of Medical Sociology (pp. 67-81). Springer.
- V. Crow, R., Gage, H., Hampson, S., Hart, J., Kimber, A., Storey, L., & Thomas, H. (2002). The measurement of satisfaction with healthcare: implications for practice from a systematic review of the literature. *Health Technology Assessment*, 6(32), 1-244.
- VI. Haldar, D., Sarkar, A., Bisoi, S., Mondal, P. (2008 April). Assessment of client's perception in terms of satisfaction and service utilization in the central government health scheme dispensary at Kolkata. *Indian Journal of Community Medicine*. Vol. 33, No. 2, PP 121-123. doi.org/10.4103/0970-0218.40883
- VII. Jones, M., Smith, J., & Johnson, A. (2020). Education and Social Stratification. In *Education and Society: An Introduction to Key Issues in the Sociology of Education* (pp. 42-63). Routledge
- VIII. Kebede, H., Tsehay, T., Necho, M., Zenebe, Y. (2021 jan 22). Patient Satisfaction Towards Outpatient Pharmacy Services and Associated Factors at Dessie Town Public Hospitals, South Wollo, North-East Ethiopia. *Patient Prefer Adherence*. Vol.15, PP 87-97. doi.org/10.2147/PPA.S287948
- IX. Kesselheim, A. S., Avorn, J., & Sarpatwari, A. (2017). The High Cost of Prescription Drugs in the United States: Origins and Prospects for Reform. *JAMA*, 316(8), 858-871.
- X. Liu, C., Liu, C., Wang, D., & Shen, J. (2020). Impact of Waiting Time on Patient Satisfaction: A Study of Public Outpatient Departments in Shanghai. *International Journal of Environmental Research and Public Health*, 17(10), 3474.
- XI. Paul, T.R., Rahman, A., Biswas, M., Rashid, M., Islam, A.U. (2014 July 23). Practice of Hospital Pharmacy in Bangladesh: Current Perspective. *Bangladesh Pharmaceutical Journal*. Vol. 17, No.2. PP 187-192. doi.org/10.3329/bpj.v17i2.22339
- XII. Schoenfelder, T., Klewer, J., Kugler, J., & Pfeifer, K. (2012). Determinants of patient satisfaction: a study among 39 hospitals in an in-patient setting in Germany. *International Journal for Quality in Health Care*, 24(5), 503-509.
- XIII. Smith, A., Giannoudi, M., Chen, C., & Ghaferi, A. (2017). The Relationship Between Wait Times and Patient Satisfaction: A Systematic Review of the Literature. *The Journal of Surgical Research*, 220, 171-187.
- XIV. Sultana, J., (2018 January 30). Patients' perception and satisfaction on model pharmacies in Dhaka City, Bangladesh. *Bangladesh Pharmaceutical Journal*, 21, No.1, pp.47-54. doi.org/10.3329/bpj.v21i1.37906
- XV. Ware Jr, J. E., & Snyder, M. K. (1975). Dimensions of patient attitudes regarding doctors and medical services. *Medical Care*, 13(8), 669-682.
- XVI. Weingart, S. N., Gandhi, T. K., Seger, A. C., & Borus, J. (2019). Patient-Centered Safety Reporting: A Systematic Review. *Quality and Safety in Health Care*, 18(1), 61-65.