

ASSESSMENT OF PATIENT CARE INDICATORS AT COMMUNITY PHARMACIES IN BANDUNG CITY, INDONESIA

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Abstract. Community pharmacies supply medications; therefore are involved in the patient care process. The objective of this study was to study the quality of patient care given by these pharmacies. We conducted a cross sectional study of 13 community pharmacies in Bandung City, Indonesia. Data collected were patient care indicators whose standard is defined by the World Health Organization (WHO). These were assessed by observing 1,961 subjects who presented to the studied pharmacies to receive their medication. The average dispensing time was 62 seconds. Ninety-six percent of the prescribed medicine was dispensed correctly and 99% of the prescribed medication was sufficiently labeled. Only 88% of patients were able to repeat the correct dosage regimen of their prescribed medicines. Although the average dispensing time was greater than the recommended 60 seconds, the dispensing time ranged from 3 to 435 seconds. Greater attention should be focused on making sure the patient understands the dosage regimen correctly to ensure patient compliance with the correct regimen.

Keywords: patient care indicator, community pharmacy, pharmacy practice, Indonesia

INTRODUCTION

Many factors can affect the medication compliance, including quality of dispensing and adequate labeling (Karande *et al*, 2005), both of which require the correct interpretation of the prescriber's instructions and accurate preparation and labeling of the prescribed medicine.

Therefore, any error in the dispensing and labeling process may interfere with patient care (James *et al*, 2009). As the primary dispensers of medications, pharmacists are responsible for reinforcing patient knowledge about their prescribed medications. The pharmacists' quality of labeling, time spent informing the patient and communication skills can affect patient compliance rates (Garjani *et al*, 2009).

Community pharmacies usually responsibly supply medicines in accordance with prescriptions (WHO, 1994). They have expanded their role to be more involved in the management of pharmaceutical care (Panvelkar *et al*, 2009).

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