

Availableonlineathttp://www.journalcra.com

International Journal of Current Research Vol. 11, Issue, 06, pp. 4737-4739, June, 2019

DOI: https://doi.org/10.24941/ijcr.35656.06.2019

RESEARCH ARTICLE

PHARMACEUTICAL CARE AND THE QUALIFICATION OF SERVICES

Karolina Melo and *Alexandra Crispim Boing

Federal University of Santa Catarina, Brazil

ARTICLE INFO

ABSTRACT

Article History: Received 17th March, 2019 Received in revised form 06th April, 2019 Accepted 11th May, 2019 Published online 30th June, 2019

Key Words:

Pharmaceutical care, Pharmaceutical, Pharmaceutical Services.

*Corresponding author: Alexandra Crispim Boing Pharmaceutical Care is defined as a model of pharmaceutical practice, developed in the context of Pharmaceutical Assistance. It includes attitudes, care, ethical values, behaviors, skills, commitments and co-responsibilities of diseases, promotion and recovery of health in an integrated way to the health team. In this study, we will focus on the perception of users of pharmaceutical establishments in relation to the quality of care and Pharmaceutical Care performed at these sites. Thus, the present study aimed to measure the perception of customers regarding the quality of care and Pharmaceutical Care provided. The present study demonstrates that although pharmacies have differentiated and qualified professionals to provide care, most of the users of the service can not identify these professionals. But at the same time they report that they prefer to be taken care of by pharmaciests, as well as, they observe in their speeches the importance of receiving care guided by pharmaceutical care.

Copyright © 2019, Karolina Melo and Alexandra Crispim Boing. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Karolina Melo and Alexandra Crispim Boing, 2019. "Pharmaceutical Care and the qualification of services", *International Journal of Current Research*, 11, (06), 4737-4739.

INTRODUCTION

Companies are increasingly realizing the need to seek excellence in service delivery, due to the indispensability of maintaining and expanding their business, together with the contemporary, highly competitive market. Not being different in the Pharmaceutical area, specifically the case of commercial Pharmacies, which due to the current economic system, are both health care and retail stores. Differentiating establishments that provide differentiated services, combining sales and the well-being and convenience of users, providing such as tele-delivery, scheduled purchases, services Pharmaceutical Care, among others. This study will address the Pharmaceutical Care. Pharmaceutical Care is defined as: "A model of pharmaceutical practice, developed in the context of Pharmaceutical Assistance. It includes attitudes, ethical values, behaviors, skills, commitments and co-responsibilities of diseases, promotion and recovery of health in an integrated way to the health team. It is the direct interaction of the pharmacist with the user, aimed at rational pharmacotherapy and the achievement of definite and measurable results, aimed at improving the quality of life. This interaction should also involve the conceptions of their subjects, respecting their biopsycho-social specificities, from the point of view of integral health actions "(PAHO, 2001). In this study, we will focus on the perception of users of pharmaceutical establishments in relation to the quality of care and Pharmaceutical Care performed at these sites.

Thus, the present study aimed to measure the perception of customers regarding the quality of care and Pharmaceutical Care provided.

INTERNATIONAL JOURNAL OFCURRENTRESEARCH

MATERIALS AND METHODS

According to Law No. 8078 of 1990, the service is an activity provided in the market, for remuneration. ISSO-9004 reports that the service is a result of the activities generated between supplier and user and the activities of the supplier, performed to meet the users' needs. Amboni (2002) reports that services are acts and performances offered and that they are intangible, whether or not their production is linked to a physical product, as is the case of Pharmaceutical Care that is not a physical product. Among the specific characteristics of the services are the intangibility, as mentioned by Amboni and the participation of individuals (Lovelock& Wright, 2002). Services are intangible because they are ideas, they are not seen. And the individual evaluates the service provided according to their perspectives and values. Then the user is an integral part of the service process. Thus in health, in the case of the pharmaceutical sector, where direct care is provided to the individual / client, it is necessary to raise the needs and perceptions so that the organizational structure is reviewed and provided to these clients services that meet their needs and desires, making the company have a differential compared to other companies operating in the pharmaceutical market.

According to Lovelock& Wright (2002) service is the central part of the economic activity of any society and tends to diversify and improve its quality to enable greater production and commercialization of goods and services. The present work was carried out in Florianópolis, with 20 clients of pharmaceutical establishments, randomly selected at the TICEN (Central Bus Terminal) of the city center, in September 2006.The interviews were developed through a semi-structured questionnaire, addressing issues related to the need of the pharmacist to perform the care, information passed at the time of purchase and satisfaction regarding care in establishments and Pharmacy Assistance. In some questions, technical concepts previously explained to the interviewees were used.

The quality of the services has two dimensions: the technical result and the functional result. (BERRY, et al, 1985). Both dimensions are perceived by users of the services and were used in the study. In health the author Donabedian is that approaches more of the proposal of evaluation of the quality of services. Donabedian also follows the same line of Berry defining the dimensions of quality: technical performance and personal relationship (DONABEDIAN, 1978). BROK et. al. (1985), studies the development of a methodology that the quality indicator is the relationship between the process and the result covering cost analysis, effectiveness evaluation, service audit, satisfaction among others. According to DONABEDIAN (1978), the satisfaction study is very important, although it is only an approximation of the quality of services. The dimensions used in this study were chosen for portraying well the issue of individualized care, the provision of Pharmaceutical Assistance and the perception of the user, thus considering the satisfaction and needs of the client.

RESULTS AND DISCUSSION

Twenty people were interviewed, of these 14 women and 6 men. Of those interviewed 18 they buy their drugs in commercial pharmacies and 2 through public sector pharmacies. Regarding the questioning about the Pharmacy search for the care of the pharmaceutical professional, most of them did not perceive the difference between Pharmacy attendants and the pharmaceutical professional, according to the following reports:

"...... always when I go to the pharmacy I am taken care of by the pharmacist, there is always a boy there who attends I think he is a pharmacist ..."

"In the pharmacy there are always some pharmacists, then when we get some, "When I go to the pharmacy I ask that they call the pharmacist, he is never on the counter, but I know he's there ... so I'll talk to him, he'll talk to me and clear my doubts. I know I can trust " Regarding the questioning about the information passed at the time of service, the interviewees reported:

"They talk like you do right ...".

"Tell me how you take the medication, the schedule, if it should be taken with a full stomach, I think that's it." "They say very little, I think they should pass on more information." "At the pharmacy I go to, they sit with me and give me the information about the medicine I am taking, the medications I am using at home, and they also taught me how to store the medicines." In relation to the preference to the establishments that the service is done by the Pharmacist, the interviewed ones reported in the majority prefer to be attended by the pharmacist:

"Of course ... I'd rather be taken care of by the pharmacist, but we know he's not always in the pharmacy." "I prefer to go to the pharmacy that I'm being treated by the pharmacist, because he talks to us and I feel safer" "I only go to the pharmacy that has the pharmacist, in the pharmacy the pharmacist who answers me already called until my doctor to talk about a medicine that I was using ... then I am safer"

Users of pharmaceutical establishments were questioned regarding the need to implement Pharmaceutical Care in all establishments and reported: "According to the explanation given about pharmaceutical care, it certainly should have in all establishments, so we would buy the drug and get educated out of the pharmacy."

"I think it should be offered to customers who need more information." "They never said anything to me, but I think it would be good and necessary." All interviewees were also questioned about satisfaction with care in pharmacies and the vast majority reported that they were not satisfied with care, as reported below:

"I think the service could be better" "Sometimes they deliver the medicine and call the other customer" They do not pay much attention ... they explain how they take the medicine and only". The present study demonstrates that although pharmacies have differentiated and qualified professionals to provide care, most of the users of the service can not identify these professionals. But at the same time they report that they prefer to be taken care of by pharmacists, as well as, they observe in their speeches the importance of receiving care guided by pharmaceutical care. Thus the present work demonstrates the need of the market in creating innovative strategies to gain market. According to the reports of the clients, they demonstrated the need of the pharmaceutical professionals, training of teams to carry out pharmaceutical care, promoting the rational use of medicines, promotion and health protection, that is, with more information and individualized care.

Thus using this instrument as a service differentiator in search of satisfaction of users of pharmaceutical establishments. In this way, according to Ballé (1977) reorganization, the redesign of processes can be applied even in the way people organize themselves, being applied in any activity. The point to be redesigned in this market, since we know what the client thinks, and it is necessary that the team of pharmacists and sales professionals also pass on the flow, problems and questions so that the Manager, the Director or even the owner can map and redesign the process inside the pharmacy. But it is important to remember that this new structure of differential care, distinguishing the pharmaceutical professional and having a team capable of developing pharmaceutical care must be implemented, monitored and improved, showing the team the advantages of this new process so that it feels an integral part, has full adherence to this new structure, reaching the proposed objective that is the quality of the service provided in the pharmaceutical establishment.

REFERENCES

- Amboni, N. 2002. Qualidade em serviços: dimensões para a orientação e avaliação das bibliotecas universitárias federais brasileiras. Florianópolis.
- Ballé, M. 1977. Reorganizando sua empresa: um kit de ação para reengenharia. Rio de Janeiro: InfoBook.
- Berry et. al . 1985. Um modelo conceitual da qualidade de serviços e das suas implicações para a pesquisa futura. Jornal da queda do marketing 49 (4) 41-50.
- Brasil. Lei 8078. Diário oficial da República Federativa do Brasil, 1990.
- Donabedian, A. The Quality of Medical Care. Science 200, 1978

- Brook, R. H., Lohr, K. Efficacy, Effectiveness, Variations and Quality: Boundary-Crossing Research, Med. Care, n. 23, v.5, página: 710-722, 1985.
- International organization for Standardization. Isso 9004: quality management d quality system elements. Genebra: Iso, 1991.
- Lovelock, C., Wright, L. Serviços marketing gestão. São Paulo: Saraiva,2002.
- Minayo, C. Pesquisa Social Teoria, Método e Criatividade. Vozes. Rio de Janeiro, 1995.
- OPAS . Organização Pan- Americana da Saúde. Atenção Farmacêutica no Brasil: Trilhando Caminhos". Relatório da oficina de trabalho. Fortaleza, 2001.
