

An Observational Study On Pharmaceutical Care Based On The Place Of Practice Of Pharmacists.

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ABSTRACT

Background: Clinical pharmacists are crucial in enhancing patient care and medication effectiveness, focusing on safety and effectiveness, as they founded pharmaceutical care to improve patient quality of life.

Methodology: An observational study was conducted on 869 patients in the southern state of India, examining prescription drugs received from various pharmacies, including community pharmacies, pharmacies connected to private hospitals, government medical college hospitals, and government Primary Health Centres. A self-administered, standardized, closed-ended questionnaire was employed. The data was sorted and summarized.

Results: The study examined the impact of pharmacists' pharmaceutical care on workplaces, finding that patients appreciated the pharmacy's location, amenities, cleanliness, and hygiene. However, their educational background was not impressive. While most of them were unaware of the quality of the prescriptions they received, there wasn't much discontent with the medications' availability. The pharmacists' counselling attitude and knowledge were impressive.

Conclusion: The study highlights the importance of pharmacists in pharmaceutical treatment, revealing that patients consider factors such as location, amenities, staff education, and attitude when choosing a pharmacy. Despite doubts about the quality of pharmaceuticals, adequate drug availability was found. The study also highlights the significance of pharmacists' knowledge and demeanor in responsible drug use, highlighting the need for both physical and professional aspects in pharmacy operations.

Keywords: Pharmaceutical Care, Pharmacist, Place of Practice, Observational Study

INTRODUCTION:

The pharmacy profession is shifting towards patient-centered, health outcomes-focused counseling and professional services, known as "Pharmaceutical Care." Modern pharmacists collaborate with medical experts to identify, resolve, and prevent drug-related problems. Health, according to the WHO, encompasses complete physical, mental, and social well-being, rather than simply absence of illness.¹ These skilled pharmacists are dedicated to using medication to improve patient outcomes, with a focus on cost-effectiveness, side effect identification, dosage, monitoring, and monitoring. A growing body of research is highlighting the critical role that clinical pharmacists play as integral members of the patient care team for both acute care and ambulatory patients.²

Pharmacists' expanded role beyond dispensing to pharmaceutical care has increased work-related activities, impacting job satisfaction and work quality. Job satisfaction is crucial for motivation and productivity, indicating how positively employees perceive their work.³ As the delivery of healthcare is changing quickly, the pharmacy profession is growing and changing dramatically. The public's perception of pharmacists is often confusing and inaccurate, despite their extensive experience in the medical field.⁴ Healthcare delivery is a complex process with interdisciplinary processes, including pharmaceutical ordering, preparation, and distribution. Various checkpoints and safeguards are necessary to identify issues before drugs reach patients. Pharmacists play a crucial role in identifying and preventing errors, as they are responsible for ensuring patient safety. A pharmacist's involvement and advice are crucial in creating and maintaining a medication management plan, enhancing safety and efficacy during a patient's stay.⁵

Medication knowledge assessment evaluates understanding of safe medication use, aiding in knowledge improvement strategies. Studies show inefficient use and ignorance reduce efficacy. Attitude assessment assesses interaction with patients and healthcare professionals, improving practice standards.⁶ Professional socialization is the process of transforming individuals from students to professionals who understand the ideals, attitudes, and actions of their profession. It is an active, complex, and unique process influenced by individual growth and environment.⁷ Community pharmacies are easier for the general public to access than medical practices. Consequently, government white papers and briefing materials from pharmacy professional associations have bolstered the expansion of the role of community pharmacists, especially when it comes to offering services that promote health and illness prevention. It's unclear if the evidence supporting the rise in these occupations is consistent across the board.⁸ Regulatory organizations must implement policies and procedures that will allow community pharmacists to offer and provide pharmacological treatment in a community setting, given the growing significance of pharmacists in improving patient care.⁹ Autonomy affects work satisfaction in female pharmacists more than male pharmacists, but is moderated by hours worked. Men

have greater flexibility, while women don't. Community pharmacists have greater freedom, while female doctors are less satisfied with autonomy.¹⁰

Effective communication skills are crucial for pharmacists to provide patient-centered care in an inter-professional healthcare team. Pharmacy educators use various techniques, including didactic lectures, small group work, and patient-centered counseling. However, students often struggle with self-evaluation due to lack of information and lack of feedback.¹¹ Healthcare practitioners can access continuing education (CE) in various formats, including live activities, distance learning, and printed materials. Research shows they prefer lectures and written materials. Effective CE programs should be Convenient, Relevant, Individualized, Self-assessment, Interesting, and Systematic.¹²

RESULTS AND DISCUSSIONS

The different parameters which determine the pharmaceutical care compared based on the place of practice. In this study various practice areas were community pharmacy, hospital pharmacy of various private hospitals, medical college hospital pharmacy and pharmacies attached to government Primary Healthcare Centre (PHC).

1. Demographic Characteristics.

1.1 Gender

The impact of Pharmaceutical Care was assessed by evaluating the responses of the patients. 869 patients participated in the study. Out of 869 patients, 469 (54%) were Female and 400 (46%) were Males (Table –1).

Table 1: Demographic Characteristics.

Gender	Frequency	Percentage
Female	469	53.97
Male	400	46.03
Total	869	100
Distribution of Respondents District Wise.		
Alappuzha	184	21.17
Kottayam	222	25.55
Kozhikode	163	18.76
Thrissur	158	18.18
Trivandrum	142	16.34
Total	869	100
Distribution of Patients according to Study Area.		
Community Pharmacy	551	63.41
Private Hospital	152	17.49
Primary Health Centre	166	19.10
Total	869	100

1.2 Distribution of Respondents District Wise.

The patients were randomly selected from those who visited Community Pharmacy, Private Hospital and Government Public Health Centres in various regions of Kerala. (Table- 1).

1.3 Distribution of Patients according to Study Area.

The patients were distributed according to study area. The study area included in the study was Community Pharmacy, Pharmacies attached to Private Hospital and Government Primary Health Centre (PHC).

Out of 869 patients participated, 551 (63.41 %) were getting medicines from Community Pharmacy as they were considered as the primary contact of majority of the patients. 152 (17.49%) of them were visited various private hospital pharmacies for their medication after they consult with the physicians in that hospital. 166 (19.10 %) were from Government Public Health Centre (Table – 1).

2. Comparison of Pharmaceutical Care.

Table-2 Questionnaire for comparison of Pharmaceutical Care based on workplace.

SI No	Questions	Question Code
1	Location of pharmacy is suitable for you?	COMP1
2	Are you satisfied about dispensing area in pharmacy shop?	COMP2
3	Are you satisfied with cleanliness and hygienic condition of pharmacy shop?	COMP3
4	Do you think staff is well educated?	COMP4
5	Are you satisfied with the staff attitude?	COMP5
6	Are you satisfied that number of staff is adequate to pharmacy operational requirement?	COMP6
7	Are you satisfied with availability of medicines or health appliances you need?	COMP7
8	Are you satisfied with the quality of medicines?	COMP8
9	Are you satisfied that instructions on your medications are easily readable?	COMP9
10	Are you satisfied with knowledge and attitude of counselling person?	COMP10

Table – 3 Responses for Comparison of Pharmaceutical Care based on Work Place.

Questions	Responses	Community Pharmacy		Private Hospital		PHC	
COMP1	Satisfied	480	87.11	114	75	60	36.14
	Not Satisfied	58	10.53	28	18.42	95	57.23
	Not Specific	13	2.36	10	6.58	11	6.63
COMP2	Satisfied	503	91.29	132	86.84	133	80.12
	Not Satisfied	28	5.08	18	11.84	18	10.84
	Not Specific	20	3.63	2	1.32	15	9.04
COMP3	Satisfied	489	88.75	127	83.55	115	69.28
	Not Satisfied	44	7.99	22	14.47	40	24.10
	Not Specific	18	3.27	3	1.97	11	6.63
COMP4	Satisfied	277	50.27	98	64.47	128	77.11
	Not Satisfied	49	8.89	10	6.58	16	9.64
	Not Specific	225	40.83	44	28.95	22	13.25
COMP5	Satisfied	459	83.30	120	78.95	126	75.90
	Not Satisfied	83	15.06	28	18.42	32	19.28
	Not Specific	9	1.63	4	2.63	8	4.82
COMP6	Satisfied	392	71.14	116	76.32	116	69.88
	Not Satisfied	45	8.17	34	22.37	10	6.02
	Not Specific	114	20.69	2	1.32	40	24.10
COMP7	Satisfied	400	72.60	151	99.34	122	73.49
	Not Satisfied	138	25.05	1	0.66	26	15.66
	Not specific	13	2.36	0	0	18	10.84
COMP8	Satisfied	394	71.51	92	60.53	75	45.18
	Not Satisfied	20	3.63	15	9.87	7	4.22
	Not specific	137	24.86	45	29.61	84	50.60
COMP9	Satisfied	488	88.57	117	76.97	135	81.33
	Not Satisfied	63	11.43	23	15.13	20	12.05
	Not Specific	0	0	12	7.89	11	6.63
COMP10	Satisfied	84	15.25	73	48.03	114	68.67
	Not Satisfied	379	68.78	27	17.76	42	25.30
	Not specific	88	15.97	52	34.21	10	6.02

2.1 Location and Accessibility.

The location of the pharmacy is very much important for the access of the patients. Usually, they are established in locations which are easily accessible to the patients. Community pharmacies are established in places where parking and stopping facilities are available and near to clinics or hospitals. In hospitals they are established in locations near to outpatient clinics preferably in the ground floor.

In this study 551 patients are getting medicines from community pharmacies. Out of them, 480 (87.11%) were satisfied with the location of the pharmacy, while 58 (10.53%) were not. Among all, 13 (2.36%) have no opinion on the location as they are not purchasing from same pharmacy all the time (Table – 3 and Figure – 1).

152 patients were getting their medications from pharmacy attached to private hospitals. In hospitals the pharmacy is usually established in a place most accessible to patients of all departments particularly in Outpatient departments. Among them, 114 (75%) of them were satisfied with the location of the pharmacy. 28 (18.42%) were not and 10 (6.58%) expressed no comments as they are not visiting the same pharmacy all the time (Table – 3 and Figure – 1).

Out of 166 patients who collect their medicines from Government Public Health Centres such as Medical College Hospital and Government Primary Health Centres. Only 60 (36.14%) were satisfied with the location of the pharmacy. But, majority of them (57.23%) were not satisfied as they find difficult to locate the pharmacy after consultation with physicians in different outpatient departments. A few 11 (6.63%) participants did not comment. (Table –3 and Figure –1)

In medical college hospital the number of outpatient departments are more and the volume of outpatients visiting the hospital is large and therefore the location of pharmacy is not so easy to identify like private hospitals. In Government Public Health Centre (PHC) the location of the pharmacy is not that much prominent like other hospitals as they have very limited spaces and facilities in the premises and campus. Accordingly, majority of them were not satisfied with the location of the pharmacy.

On comparison of the satisfactory levels of the patient regarding the location and accessibility of the pharmacy, it was noted that patients who visited Community pharmacy were most satisfied followed by Private Hospital Pharmacy and those who visited PHC were the least.

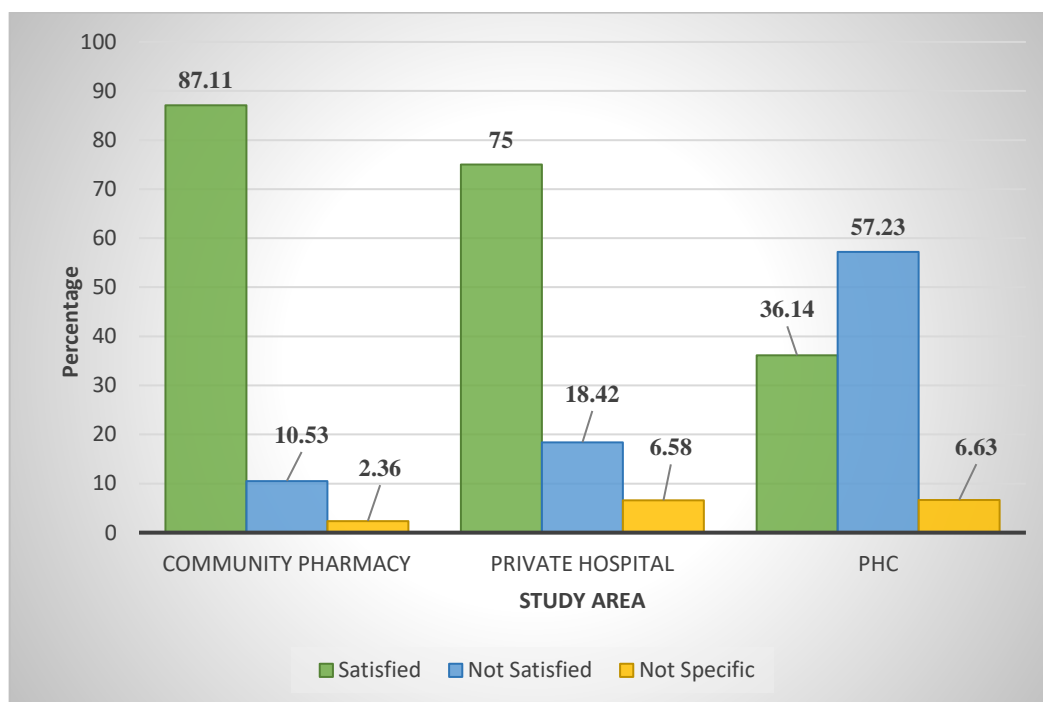


Figure-1 Responses for Comparison of Location and Accessibility of Pharmacy.

2.2 Distribution of Drugs and Appliances.

Proper distribution of drugs in the pharmacy is very important for the easy, fast and accurate dispensing of medicines.

In Community Pharmacy this is well arranged as they have very limited places to distribute the drugs in the pharmacy. Majority of the patients (91.29%) were satisfied with the distribution of medicines while 5.08% was not satisfied and 3.63% have no specific opinion (Table-3 and Figure -2).

In case of Private Hospital, 86.54% of them were satisfied with the pharmacy distributions while 11.84 % were not satisfied and 1.32% were having no specific opinion. (Table – 3 and Figure- 2).

Among patients visiting Government Public Health Centres pharmacies, 80.12% were satisfied and 10.84 % were not satisfied with the distribution arrangements. But 9.04% expressed no opinion. (Table – 3 and Figure – 2).

On comparison of the satisfactory levels of the patient regarding the distribution of the drugs and appliances of the pharmacy, it was noted that patients who visited Community Pharmacy were most satisfied followed by Private Hospital Pharmacy and those who visited PHC were the least.

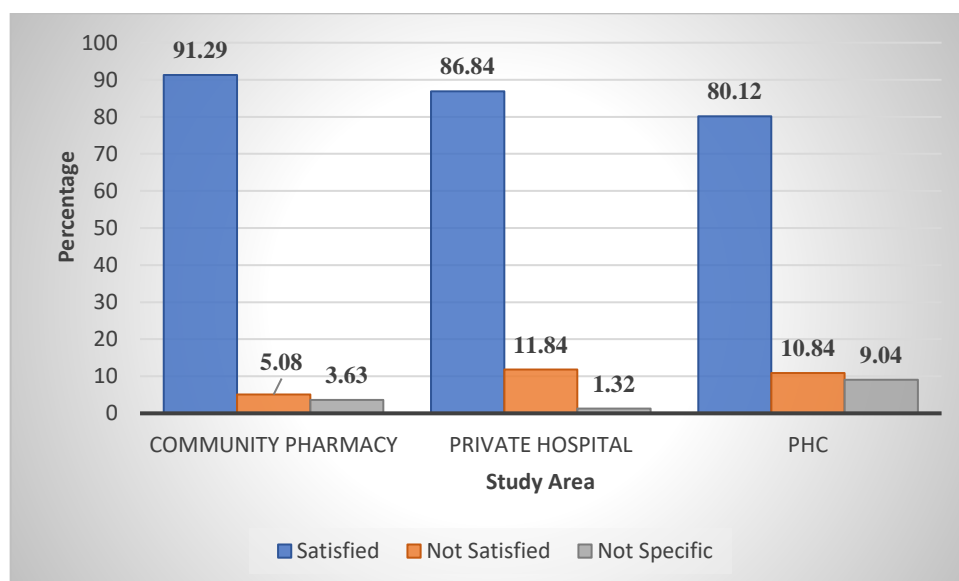


Figure-2 Responses for Comparison of Distribution of drugs and appliances in the Pharmacy.

2.3 Neatness and Cleanliness.

One of the most important parameters for all pharmacy is neatness and cleanliness as medications are easily contaminated and may get deteriorated leading to health hazards. Out of 551 patients visited community pharmacy regularly 489 (88.75%) said that the pharmacies are maintained neat and clean. But 44 (7.99%) did not satisfy and 18 (3.27%) were not very much interested to comment (Table -3 and Figure – 3).

Among 152 participants from Private hospitals, 127 (83.55%) were satisfied with the neatness and hygiene of the pharmacy whereas 22 (14.47%) were not satisfied. But 3 (1.97%) expressed no opinion. (Table-3 and Figure -3)

In case of patients visiting Government Public Health Centre pharmacies 115 (69.28%) while 40 (24.10%) were not satisfied. 11 (6.63%) has no specific opinion. (Table – 3 and Figure- 3).

On comparing the various pharmacies, it was noted that community pharmacies are maintained more neat and clean than other pharmacies as they are in open spaces in the community followed by Private Hospital pharmacy and Government Public Health Centres.

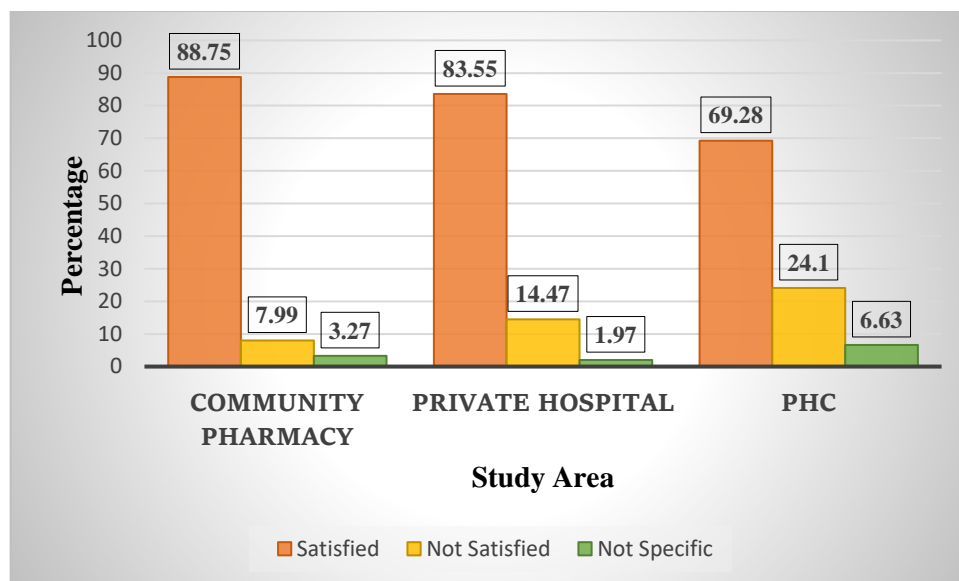


Figure-3 Responses for Comparison of Neatness and Cleanliness of Pharmacy.

2.4 Educational status of the Pharmacist.

As per the regulations of the Pharmacy Council, Registered pharmacist only permitted to dispense drugs. In most pharmacies the dispensing practice was carried out by Diploma in Pharmacy (D. Pharm) qualified pharmacists mainly in the community sector, But as more graduate and post graduate qualified pharmacists started dispensing practice, more qualified and educated pharmacists enter the profession of pharmacy practice.

In this study the patients knowledge on the qualification of the pharmacists, 277 (50.27%) of the patients visited community pharmacy said they are satisfied with the educational qualification of the pharmacist who dispensed medicine to them. But, 49 (8.89%) were not satisfied from their behaviour in the pharmacy. 225 patients (40.83%) were not aware of the educational qualifications as they are saying that there is no way to understand the qualification of the pharmacist. Because pharmacist and pharmacy assistants are also involved in dispensing inspite of the Pharmacy Council rules.

A similar situation was noticed in Private Hospital Pharmacy also. Out of 152 participants. 98 (64.47%) of the patients were happy with the education status of the pharmacists involved in the dispensing of their medications, but 10 (6.58%) were not satisfied and 44 (28.95%) has no specific opinion. (Table-3 and Figure-4)

In Government PHC also the selection and appointments are made by the government in strict terms of the Pharmacy Council. Therefore, all pharmacists are usually qualified and experienced and highly competent. This was well reflected in this study also.

Out of 166 patients who visited the Public Health centres, 128 (77.11%) of them were satisfied with the qualification of the pharmacists while 16 (9.64%) were not satisfied. 22 (13.25%) patients did not comment on the educational standards as they are from villages with very poor literacy and were not aware of the qualification requirements for the person involved in the dispensing of the drugs. (Table-3 and Figure- 4).

On comparing the satisfactory levels of patients involved in the dispensing of drugs, it was noted that better pharmaceutical care was obtained from public health centres which included medical college hospitals and primary health centres. This may be mainly due to better qualified persons entering the pharmacy practice at these Government sectors. It was followed by Private hospital pharmacy and Community pharmacy.

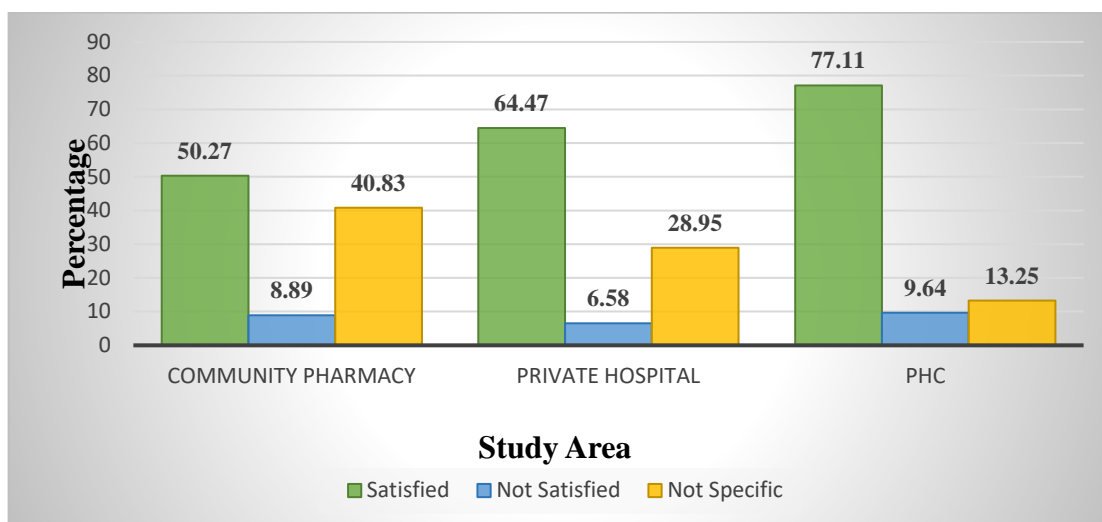


Figure- 4 Responses for Comparison of Educational status of the Pharmacist.

2.5 Behavior and Attitudes of the Pharmacist.

General behavior and attitude of the pharmacists play an important role in the pharmaceutical care. It improves the communication with the patients for better understanding of the administration of the drugs.

In the community pharmacy set up it was noted that 459 (83.3%) of the patients were satisfied with the behavior and attitude of the pharmacist. They have mentioned that they take very much care for the medications and performing follow up 83 (15.06%) of them were not satisfied and 9 (1.63%) were expressed no opinion (Table- 3 and Figure- 5)

In case of private hospitals 120 (78.95%) of the Patients were satisfied with the behavior and attitudes of the pharmacist who dispense drugs for them. But 28 (18.42%) were not satisfied and 4 (2.63%) has no definite opinion (Table- 3 and Figure-5)

Like Private hospital, Public Health centres also have well qualified and experienced pharmacists who have sound knowledge about the drugs and pharmaceuticals. As a result, out of 166, 126 (75.90%) of the patients were satisfied with the pharmacist behavior and attitudes while 32 (19.28%) were not satisfied and 8 (4.82%) expressed no opinion.

On comparison of the satisfactory levels of the patients regarding the distribution of the drugs, behaviour and attitudes of the pharmacists, it was noted that patients who visited Community Pharmacy were most satisfied followed by Private hospital pharmacy and those who visited PHC were the least.

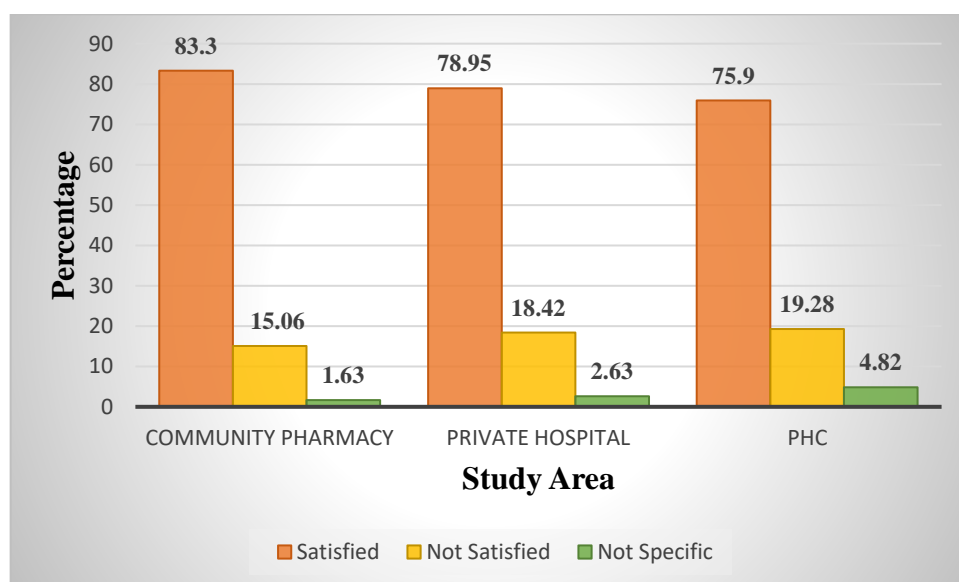


Figure-5. Responses for Comparison of Behaviour and Attitude of the Pharmacist.

2.6 Availability of properly Qualified Pharmacist.

Availability of properly qualified pharmacists is one of the great concern because of the shortage of proper qualified hands in the State of Kerala.

In community Pharmacy 392 (71.14%) of the patients were satisfied with the availability of the qualified persons in the pharmacy. but, 45 (8.17%) of them were not satisfied while 114 (20.69%) of them were having no answer (Table –3 and Figure-6).

In hospitals the sufficient number of pharmacists are always maintained as the number of outpatient departments and patients visiting daily are more. In most of the hospital pharmacies multiple counters are established for the smooth functioning of the pharmacy. This was reflected in this study. Out of 152 patients who receive medications from the hospital pharmacy, 116 (76.32%) of them were satisfied with the availability of qualified persons for the dispensing of the medications. 34 (22.37%) was not satisfied and 2 (1.32%) were having no specific opinion. (Table – 3 and Figure – 6).

The availability of the pharmacist is inadequate in case Public Health centres. The number of patients visiting is very large and therefore the requirement of properly qualified pharmacists is necessary. Out of 166 patients participated in the study from PHC, 116 (69.88 %) were satisfied with the availability of the properly qualified pharmacists while 10 (6.02%) were not satisfied and 40 (24.10%) did not give any proper response in the subject. (Table- 3 and Figure -6).

On comparison of the availability of the properly qualified, it was noted that patients who visited Private hospital pharmacy were most satisfied followed by Community pharmacy and PHC. This indicated that Private hospital appoints sufficient number of qualified persons for better drug handling.

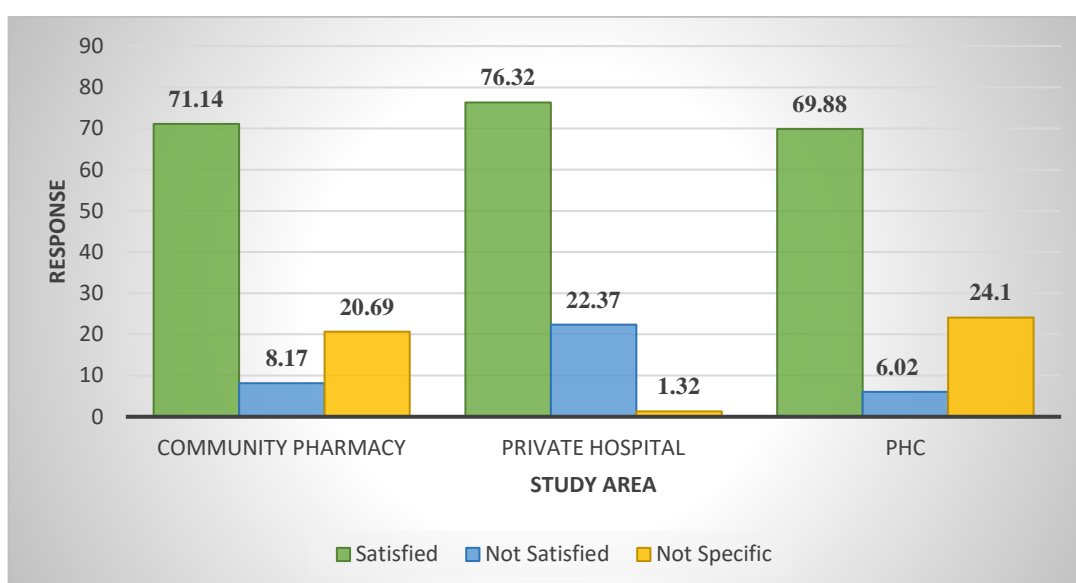


Figure-6. Responses for Comparison of Availability of properly Qualified Pharmacist.

2.7 Availability of Medicines and Health Appliances.

Availability of quality medicines is of prime concern for the patients. It was generally reported that sometimes the required medicine and other appliances are not available in the pharmacy. As a result, patients were forced to visit many pharmacies to satisfy their needs.

In community pharmacy 400 (72.6%) of the patients were satisfied with the availability of the medicines as they get all their requirements from the pharmacy where they regularly visited. But 138 (25.05 %) of them said they were not satisfied with the pharmacy all the time because sometimes they were sent to other pharmacies for their medications and appliances while 13 (2.36%) of them were having no answer. (Table – 3 and Figure – 7) In most of the Private hospitals, sufficient number of medicines and appliances are always maintained. This was reflected in this study. Out of 152 patients who receive medications from the Private hospital pharmacy, 151 (99.34%) of them were satisfied with the availability of medicines and appliances. Only 1 (0.66%) was not satisfied. (Table –3 and Figure –7)

In case of Public Health Centres, the purchase of medicines and appliances is through Government agencies and therefore always there was delay in the supply. Moreover, the number of patients visiting is very large and therefore the requirement of medicines and appliances is large in number. Out of 166 patients participated in the study, 122 (73.49%) were satisfied with the availability of the requirement of medicines and appliances while 26 (15.66%) were not satisfied and 18 (10.84%) did not give any proper response in the subject. (Table – 3 and Figure –7).

On comparison of the satisfactory levels of the patients regarding the availability of the medicines and appliances in the pharmacy, it was noted that patients who visited Private hospital pharmacy were most satisfied followed by those who visited Community pharmacy and Public Health Centre.

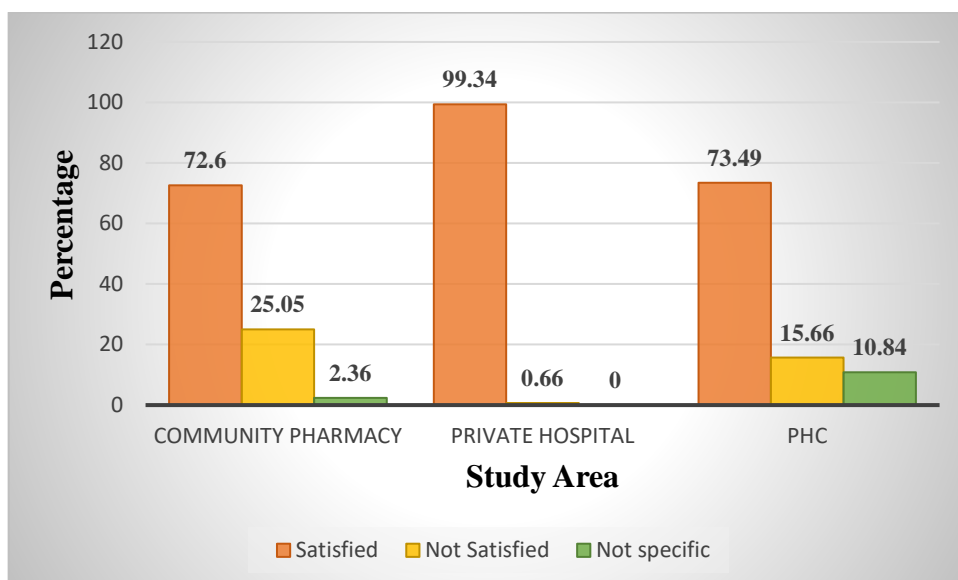


Figure-7 Responses for Comparison of Availability of Medicines and Appliances in the Pharmacy.

2.8 Availability of Quality of Medicines.

Another important parameter which governs the Pharmaceutical Care is the quality of medication. Now a days a large number of spurious medications are available and pharmacies sell them in place of standard medicines at low price. Since patients are having economic benefits, they may be tempted to buy them.

Out of 551 patients visiting Community pharmacy regularly 394 (71.51%) of the patients were satisfied with the quality of the medicines they received. But 20 (3.63%) did not satisfy and 137 (24.86%) were not very much interested to comment. (Table – 3 and Figure – 8).

Among 152 participants from the Private hospitals, 92 (6.53%) were satisfied with the quality of the medicines they received whereas 15 (9.87%) were not satisfied. But, 45 (29.61%) expressed the opinion that they are not sure of the medications quality. (Table – 3 and Figure – 8)

In case of patients visiting Government Public Health Centre pharmacies out of 166 participants, 84 of them (50.60%) expressed the opinion that they are not at all sure of the medications quality. Among them, 75 (45.18%) was satisfied and 7 (4.22%) were not satisfied with the quality of the medications they received. (Table – 3 and Figure – 8)

On comparing the quality of medications received by the patients, it was noted that Community pharmacies are maintained the quality than other pharmacies as they have known customers in their locality. It was followed by Private Hospital Pharmacy and Government Public Health Centres.

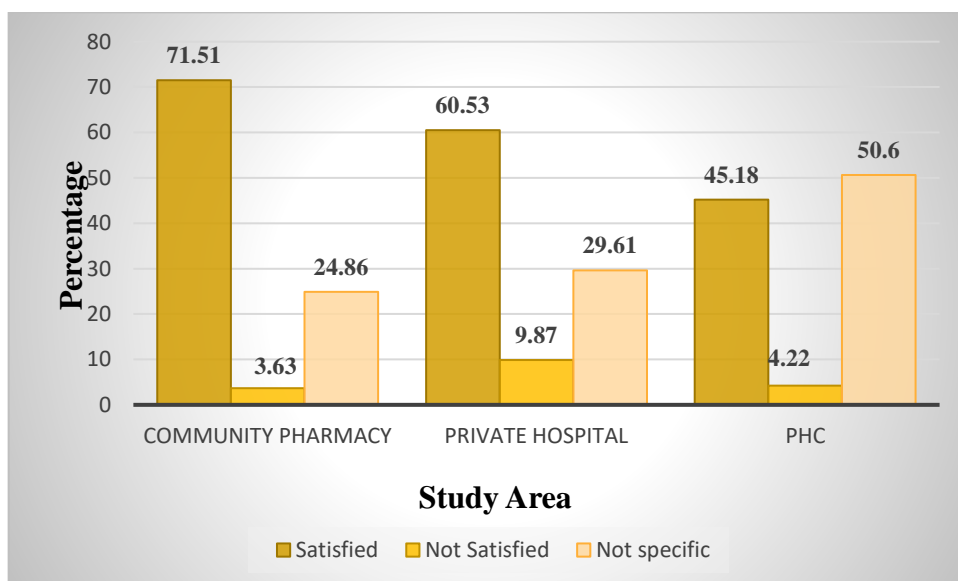


Figure-8 Responses for comparison of Availability of Quality Medicines in the Pharmacy.

2.9 Instructions on the Medications.

Usually, the instruction related to all medications are written on the envelop. Sometimes printed instructions are used. Since, most of the time patients were not directly collected the medicines, the instructions provided plays an important role for the administration of them by the patients.

Out of 551 patients visiting Community pharmacy regularly 488 (88.57%) of the patients were satisfied with the instructions provided by the pharmacists at the time of dispensing of the medicines. But 63 (11.43%) did not satisfy (Table -3 and Figure -9)

Among 152 participants from Private Hospital, 117 (76.94%) were satisfied whereas 23 (15.13%) were not satisfied. But, 12 (7.89%) expressed the opinion that they are not clear of the instructions on the envelop. (Table -3 and Figure -9)

In case of patients visiting Government Public Health Centre pharmacies, out of 166 participants, 135 of them (81.33%) expressed the opinion that they are satisfied with the instructions given by the pharmacist. Among them, 20 (12.05%) were not satisfied and 11 (6.63%) were did not given specific opinion (Table -3 and Figure -9).

On comparing the instructions on medications received by the patients, it was noted that Community pharmacies are more cautious in this matter than other pharmacies as they have known customer in the pharmacy. It was followed by Private Hospital pharmacy and Government Public Health Centres.

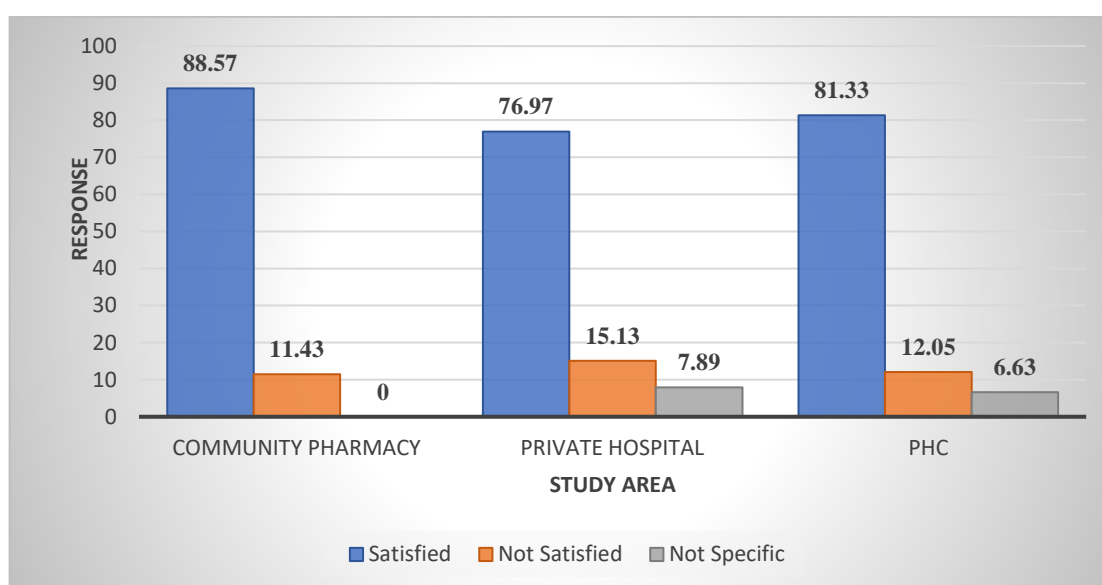


Figure-9 Responses for comparison of Instructions on the medications.

2.10 Knowledge and Attitude of the Pharmacist.

As per the ethics of the Pharmacy Practice, all the patients must be properly counseled before dispensing the drugs. But in most of the cases the drugs were given without proper counselling. Knowledge as well as the Attitude of the Pharmacist is very much important in this aspect. This is reflected well in this study.

Appropriate use of medications depends on the proper counselling of the patient during the dispensing of drugs. This is very much important for the therapeutic outcome especially with antibiotic therapy. The knowledge and attitude of the pharmacist who is involved in the counselling is very much important for the effective communication. In this study, majority of the Patients who visit Community pharmacies for their medication were not satisfied with the Knowledge and Attitude of the pharmacist. Out of 551 visited, only 84 (15.25%) was satisfied while 379 (68.78%) were not satisfied. A few 88 (15.97%) have expressed no opinion as they says they were not much counseled in the busiest schedule work of the pharmacist (Table -3 and Figure -10)

But the scenario is different in case of Hospital pharmacy services. Out of 152 patients 73 (48.03%) was satisfied with the Knowledge and Attitude of the counselling pharmacist. This may be attributed due to better qualification and experience of the pharmacists working in hospital pharmacies. But 27 (17.76%) were not satisfied while 52 (34.21%) were having no specific opinion as they are not regular in this pharmacy and were not subjected to serious counselling (Table -3 and Figure -10).

In case of Public Health Centre, the pharmacist working are qualified, experienced and are always subject to orientation and refresher programs. As a result the knowledge level and the professional skills are more in these pharmacist. This is very well reflected in the study. Out of 166 patients 114 (68.67%) were satisfied with the counselling of the pharmacist in medication. Among all 42 (25.30%) were not satisfied and 10 (6.02%) were expressed no opinion. (Table -3 and Figure -10).

On comparing the Knowledge and Attitude of the pharmacists, it was noted that Community pharmacists are better than other pharmacists. It was followed by Government Pharmacists and Hospital pharmacists.

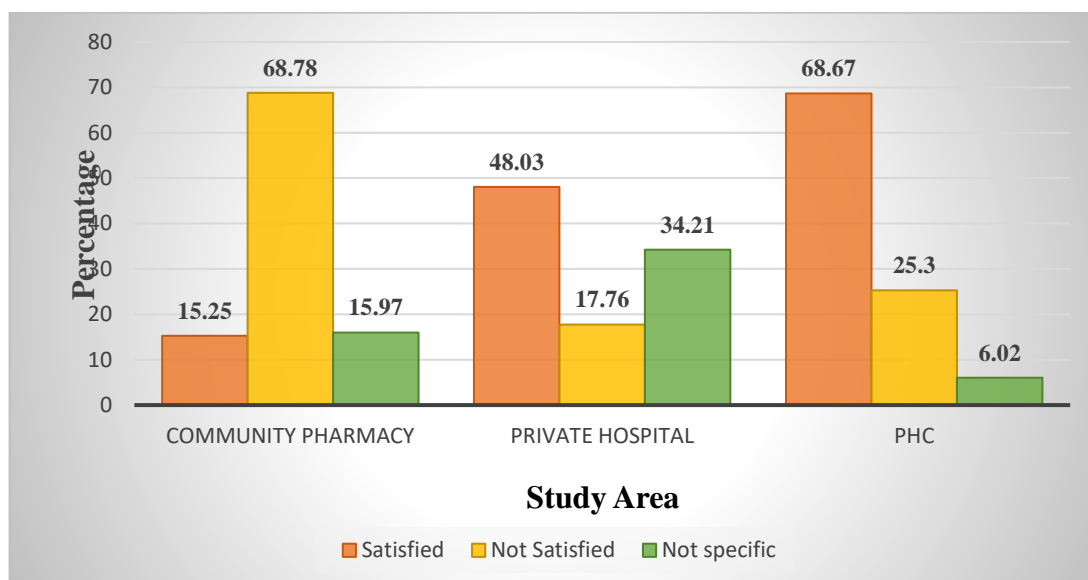


Figure-10 Responses for comparison of Knowledge and Attitude of the Pharmacist.

CONCLUSION

Location and accessibility of the pharmacy was studied among the patients visiting in different categories of the healthcare. It was observed that the satisfactory levels were found decreasing from community pharmacy to Public Health Centre.

The distribution of the drugs and appliances in community pharmacy was very much satisfactory when compared to private hospitals and government healthcare centres.

The satisfaction with cleanliness and hygienic condition of pharmacy was rated above 80% in community pharmacies and private hospital pharmacies while it was less in Government Public Centres.

The education levels in the Government sector is more satisfactory as government appointment are on examination and interview basis and more qualified people get accommodated. It was followed by private hospitals and community pharmacy.

The behaviour and attitude of the staff was important for the proper communication and understanding of the patients.

Almost all pharmacies keep minimum operating staff as the handling of the drugs and pharmaceuticals need less staff and facilities unlike other establishments.

The availability of the medicines was found as one of the major factor for the patients. Many times, they were sent to other pharmacies which make them uncomfortable. In this regard it was found that private hospitals have more stock of medicines as they purchase bulk quantities of drugs as per the directions of the doctors. Accordingly, the satisfactory level is above 90 % in private hospitals. It was followed by government pharmacies where drugs were purchased through Government agencies. Community pharmacies also stock above average levels of drugs.

Patients' satisfaction with medication quality varies, with community pharmacies dispensed more branded items, while private hospitals have more brands, leading to dissatisfaction. Government sectors have 50% of patients dissatisfied with medication quality due to competitive pricing. Community pharmacies have better methods of dispensing and providing written instructions due to competition.

The study reveals that the knowledge and attitude of counselling pharmacists are less impressive in community pharmacy settings due to limited time, space availability, and qualified personnel, while they are more knowledgeable in government public health centers.

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