



Perception of community pharmacists towards patient counseling and continuing pharmacy education program in Kuala Lumpur and Selangor states of Malaysia

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ABSTRACT

Malaysia is one of the front-runners amongst developing countries, whereby clinical practice and pharmaceutical care is dominating the picture of professional pharmacy practice. The most accessible health professionals to the general public worldwide are known to be the community pharmacists. A positive pharmacist perception, behavior and attitude are pivotal towards the implementation of pharmaceutical care. Convenience sampling was done. The sample size was determined using RAOSOFT calculator by using 95% confidence level with 0.05 statistical significance. Study information sheet was shown and concern (either verbal or written) was obtained prior to the study. The community pharmacies' lists were obtained from Malaysian Pharmaceutical Society for sample selection. A total of 220 community pharmacists completed the questionnaire. There were male (48%) and female (52%) respondents, and most of the pharmacists were Chinese (98%). Almost half of the respondents were in the age group of 25 to 35 years old (49%) and experiences for most of them in community practice were above 10 years (53%). Many of the respondents responded their working hour per day was 8-10 hours. Overall, almost all the community pharmacists had positive perception towards patient counseling and continuing education program in Kuala Lumpur and Selangor states of Malaysia. Further research is needed to evaluate perception of community pharmacists in different states of Malaysia and explore more on continuing education program in Malaysia.

Keywords: Community pharmacists, patient counselling, continuing pharmacy education program

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INTRODUCTION

Malaysia is one of the front-runners amongst developing countries, whereby clinical practice and pharmaceutical care is dominating the picture of professional pharmacy practice. The most accessible health professionals to the general public worldwide are known to be the community pharmacists.¹ A positive pharmacist perception, behavior and attitude are pivotal towards the implementation of pharmaceutical care.² In a study conducted in The Republic of Moldova, Europe, due to the accreditation of the pharmacies, the pharmacists happen to have a positive influence, as they have a better perception of their professional activities.³ Community pharmacists are well trained to perform various roles in ensuring optimal health outcomes for their patients through proper medication usage. Thus, patient counseling has become an integral part of the community pharmacy practice. Counseling enhances compliance and reduces the problems owing to non-compliance to the cure.³ A study conducted in the state of Karnataka, India suggested that the main reasons pharmacists provide patient counseling were, professional satisfaction (43%) which was observed to be the highest, followed by patients satisfaction (32%), increase in sales (8%) and the lowest was improved patient compliance which was (7.5%).¹ In a study conducted in the state of Karnataka, India, it was mentioned by the pharmacists that they are aware of their professional responsibility. However, they have not been practicing it due to various barriers faced by them. The barriers mentioned were poor response from patients, which was the highest (82%), followed by pharmacists' inadequate knowledge, and confidence which was (78%), inadequate continuous professional development programs (75%), doctor's dispensing (72%) and no additional professional fee given (56%).¹ Recognizing the importance for pharmacists to be regularly updated on knowledge and skills in medicine management, continuing pharmacy education program plays an important role in supporting the development of pharmacists and advances the practice of pharmacy overall.⁴ Based on a multicentre study conducted in Nepal by Poudalet *al.* in the year 2009, it suggested the importance for continuing pharmacy education programs which is to upgrade the community pharmacists' knowledge and to strengthen the concept of patient counselling.⁵ It was identified by Currie *et al.* in the year 1997 that the pharmacy training program proved to be a very effective way in increasing the amount of issues identified and addressed by pharmacists.⁷

The current study is intended to assess the opinion of community pharmacists towards patient counseling and continuing pharmacy education program which is currently lacking in Malaysia. The study looks into major barriers faced by community pharmacists for effective patient

counseling and continuing pharmacy education program. It is hoped that this study will provide a baseline data of hurdles on the road to patient counseling and continuing pharmacy education program which will be useful for the development of interventions in the future.

MATERIALS AND METHOD

Data collection:

This was a cross-sectional study which used a self-administered questionnaire among the community pharmacists in Kuala Lumpur and Selangor states. Data collection was conducted in the community pharmacies located in these states.

Sampling:

Convenience sampling was done. The sample size was determined using RAOSOFT calculator by using 95% confidence level with 0.05 statistical significance. Study information sheet was shown and concern (either verbal or written) was obtained prior to the study. The community pharmacies' lists were obtained from Malaysian Pharmaceutical Society for sample selection.

Questionnaire:

Questionnaire was prepared by an extensive literature search. This questionnaire consisted of total 22 questions. Among these, 4 questions were related to the demographic details of community pharmacists, 4 were related to the working details of community pharmacists. 13 items were scored on four-point (1-4) Likert scale with anchor words (Strongly agree to strongly disagree) and was categorized as; Perception of community pharmacists towards patient counseling (6 items), Perception of community pharmacists towards continuing education program (7 items).

Reliability and Validity of questionnaire:

Questionnaire was tested for reliability of internal consistency. For this 20 community pharmacists in four different regions of Kuala Lumpur and Selangor states were used. The Cronbach's alpha value was 0.78. Based on these findings from the pilot testing, minor modification on the questionnaire was made. The questionnaire was face validated by content experts.

Participants:

Participants were asked to fill up the questionnaire. Demographic and other characteristics data of the community pharmacists were collected which include Gender, Age, Years of experience, Race, Number of customers per day, Number of pharmacists in a pharmacy, and their working hours. Participants were asked on their perception towards patient counseling including key

points of counseling, common questions, problems and ways to overcome. Besides that, participants were asked on their opinion regarding continuing education program in Kuala Lumpur and Selangor states, Malaysia.

Data analysis

Descriptive data analysis was used and performed using SPSS version 18. Pharmacists' responses were presented as frequencies and percentages. Perception of community pharmacist towards patients counseling and continuing pharmacy education program was analyzed through scaling method.

RESULTS AND DISCUSSION

Study population

A total of 220 community pharmacists completed the questionnaire. There were male (48%) and female (52%) respondents, and most of the pharmacists were Chinese (98%). Almost half of the respondents were in the age group of 25 to 35 years old (49%) and experiences for most of them in community practice were above 10 years (53%). Many of the respondents responded their working hour per day was 8-10 hours and 87% of them were worked in their pharmacy alone as a pharmacist. Conferring to the findings, 200 out of 220 community pharmacists received more than 30 customers per day. The features of study population are summarized in Table 1.

Table 1: Demographic details of community pharmacists (n=220)

Demographics	Frequency	Percentage (%)
Gender		
Male	106	48
Female	114	52
Age		
Below 25	16	7
25-35	108	49
36-45	70	32
Above 45	26	12
Experience in years		
Below 2	10	5
2-5	41	18
6-10	52	24
Above 10	117	53
Race		
Malay	2	1
Chinese	215	98
Others	2	1

Community pharmacists' perceptions regarding patient counseling

Almost all the respondents except two had positive perception towards patient counseling and continuing education program. Most of the respondents took 1-5 minutes for dispensing a prescription (48%).

Views among the community pharmacists regarding the key points in counseling patients were numerous (refer Figure 1). Approximately 41% of them counseled patients mainly on 'dose and frequency' followed by all three key points including dose and frequency, duration and indication (20%). Besides, perceptions of community pharmacists were diverse towards questions that patients usually asked during patient counseling (refer Figure 2). Most of them rated the questions on 'dose and frequency' as the highest (42%).

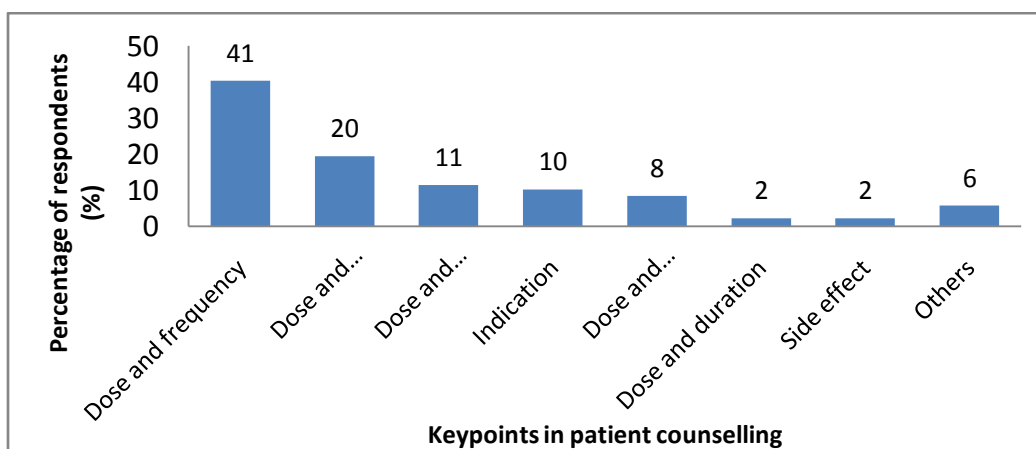


Figure 1: Perception of community pharmacists towards key points in patients counseling

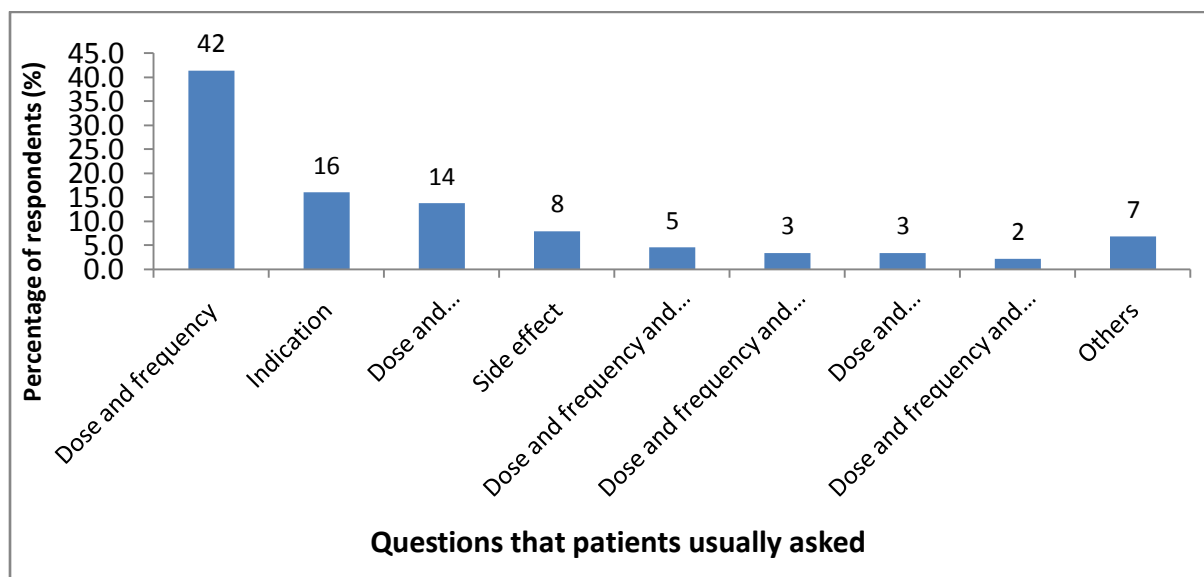


Figure 2: Perception of community pharmacists toward questions usually asked by patients
Barriers in patient counseling

Most of the respondents felt that lack of time was the major barrier faced while counseling patients, followed by lack of patient's interest, and lack of knowledge. A few of the respondents specified that they faced language barrier during patients counseling. (Refer Table: 2)

Strategies to overcome barriers to patient counseling

The highest four strategies which mentioned by pharmacists to overcome barriers on patient counseling were promoting public education, increasing the number of pharmacists, attending continuing education program and providing private space for counseling (Refer Table: 3).

Table 2: Barriers in counseling patients (n=220)

Problems	Frequencies	Percentage (%)
Lack of time	73	33
Lack of patient's interest	61	27
Lack of knowledge	43	20.5
Lack of time and patient's interest	22	10
Language barrier	10	4.5
Lack of time and knowledge	10	4.5
Stubbornness	1	0.5

Table 3: Strategies to overcome barriers to patient counseling

Strategies	Frequencies	Percentage (%)
By promoting public education	114	52
By increasing number of pharmacist	44	20
By attending continuing education program	20	9
By providing private space for counseling	15	6.5
By increasing number of pharmacist and providing private space for counseling	10	4.5
By attending continuing education program and providing private space for counseling	9	5
By increasing number of pharmacist and attending continuing education program	6	2.2
Others	2	0.8

Community pharmacists' perceptions towards continuing education program

Almost half of the respondents were 'sometimes' interested in attending continuing education program, followed by those 'often' interested in attending CPE program. Very few of them were 'rarely' interested in attending CPE program whereas little of them were not interested in attending CPE program at all.

Most of the respondents 'strongly agree or agree' that continuing education program can improve their knowledge, give current updates and improve their career (Refer Figure 3).

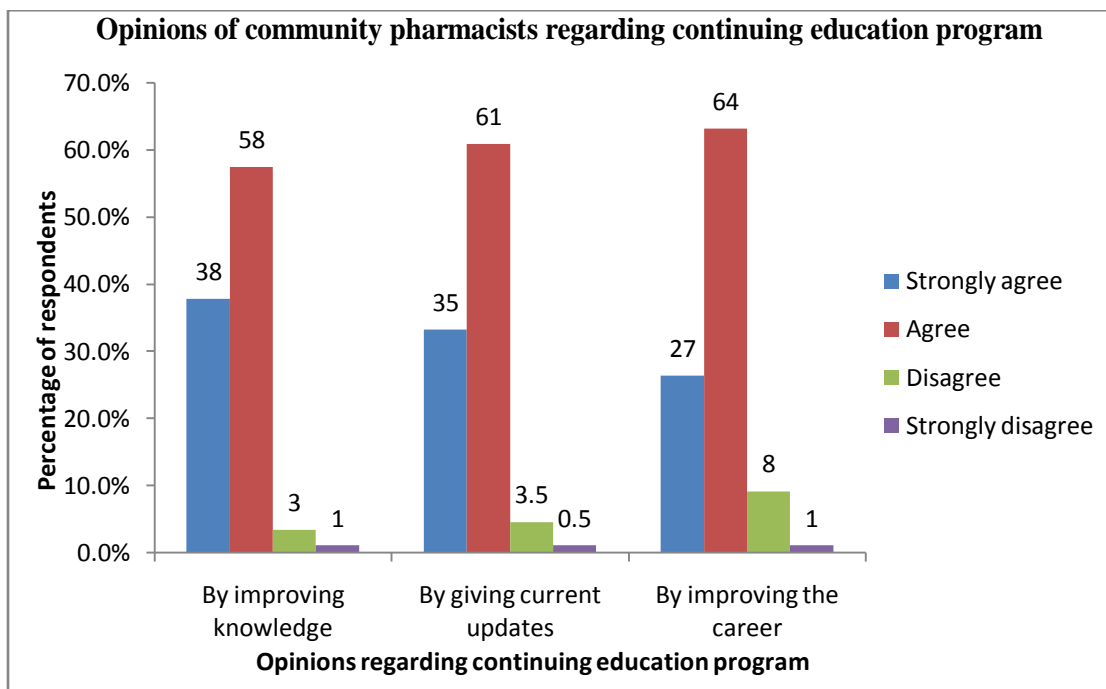


Figure 3: Opinions of community pharmacists regarding continuing education program

Community pharmacists' perceptions towards patient counseling

Though the study exposed that all respondents except two had positive perception towards patients counseling and continuing education program, majority of the pharmacists rated 'dose and frequency' as the key point in counseling the patients which is similar to the study conducted by A. Sarrif.¹ The reason might be due to lack of patients' knowledge towards drug administration since most of the patients usually asked on 'dose and frequency' during drug counseling. This result is also supported by a study conducted by Poudel et al. in Nepal where the query regarding to 'dose and frequency' of medication was common due to patients' confusion when more than one drug were prescribed³. However, the query related to cost was the highest rate in Nepal due to the economic crisis³

Barriers in patient counseling

Lack of time was the most common problem faced by community pharmacists in counselling patients, which was mainly due to lack of number of pharmacists in Malaysia. According to the ministry's statistics, there were only 1,834 Community Pharmacies throughout Malaysia and were still lack of pharmacies in rural areas and inequitable distribution.¹⁰ Besides that, lack of patient's interest and lack of knowledge were the next common barriers that limited their involvement in patient counselling. These results are in agreement with other studies done in other countries, showing that the main reasons of pharmacists for not offering patient counselling were lack of time, knowledge and confidence of pharmacists and poor response from patients.³⁻⁵

Strategies to overcome barriers to patient counseling

The strategy that was perceived by pharmacists as the best solution to overcome barrier to the problems were, to promote public education regarding their medical conditions. Public education might change the patients' mind set and improve communication skills with the patients and thus overcome barriers such as lack of patient's interest and language barriers. Moreover, another common solution suggested by pharmacists to overcome the barriers was to increase the number of pharmacists as lack of time was the major problem faced by majority of the pharmacists. Some of pharmacists suggested on attending continuing education program to overcome their lack of knowledge.

Community pharmacists' perceptions towards continuing education program

Most of the pharmacists were strongly agreed or agreed that continuing pharmacy education (CPE) program could help in improving their knowledge, giving the current updates and improving their career. However, almost half of the respondents were sometimes interested in attending CPE programs because compulsory CPE program had yet to be extended to the private sector in Malaysia.¹¹ In addition, this result can be supported by previous studies done by other countries as; inadequate of time, uninteresting subjects, no budgets and family matters were the main barriers for pharmacists in attending CPE program^{8,9}

Limitations

This study may not generalize the data for all community pharmacists in Malaysia as only selected states were included. Hence, the findings may not reflect the perception of the entire community pharmacists in Malaysia. Also this study did not target on, their opinions towards continuing education program in Malaysia and the barriers for not participating in CPE program. Further research is needed to evaluate perception of community pharmacists in different states of Malaysia, and thus to extrapolate our findings.

CONCLUSION

This study found that, overall community pharmacists in Kuala Lumpur and Selangor states Malaysia had positive perception towards patients counselling and continuing pharmacy education program. It is crucial for pharmacists to promote public education on health conditions. However, it can increase patients' knowledge and interest on their own medical conditions. More number of community pharmacists are needed in Malaysia which can reduce the barriers in counselling and CPE programs should be conducted often for community pharmacists in Malaysia.

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