

**IMPROVING QUALITY OF OUT PATIENT SERVICES IN
PHARMACY DEPARTMENT, BANPRAK HOSPITAL**



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ABSTRACT

This study was a study of the quality of dispensing services for OPD patients of the Community Pharmacy Department, Banprak Hospital in order to evaluate how well the current service system is and how the quality of the service system is improved after implementing the continuous quality improvement (CQI) in the development activities. The quality measurement of this study employed 6 key performance indicators in evaluating the OPD patient services including waiting time, satisfaction level, percentage of receiving and understanding drug use instructions, shortage of drug supplies, percentage of pre-dispensing errors, and incidence of dispensing errors.

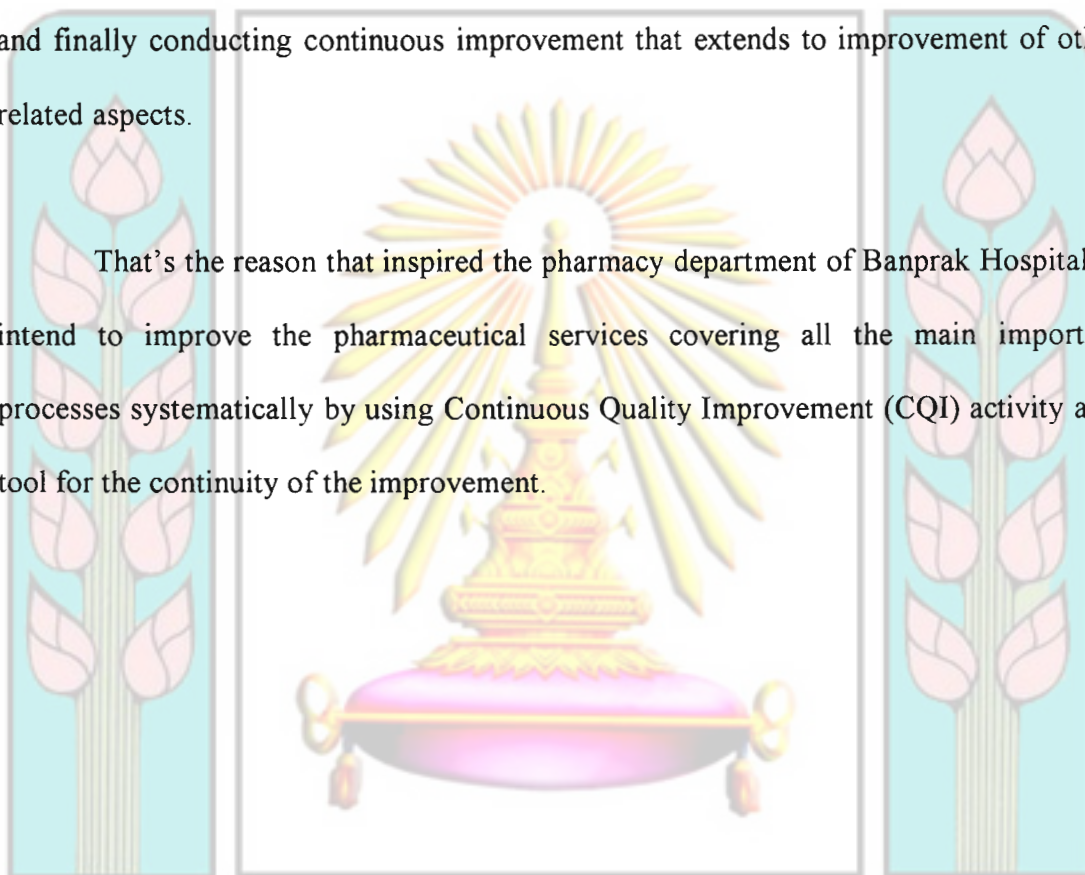
The first phase of this study involved pre-evaluation of the current situation according to all 6 key indicators. After that the project team selected the aspect that required urgent improvement to develop first by using an attribute rating map and consensus as the tools for prioritization. The percentage of patients receiving and understanding drug use instructions was selected to be improved first as its current situation was not up to standard and it was found that the patients mostly see the importance of this aspect. This study was therefore named “the development of dispensing service and drug detailing system for OPD patients”. After that the quality development activities using CQI system were implemented for a period of 9 months (September 2000-May 2001) resulting in significant outcomes as follows: the overall 6 key indicators indicated that improvement of drug advice provision to the patients for their better understanding of such advice involved development of the dispensing

system that enabled the patients to better receive and understand drug instructions. For example, there was an increase of patient percentages receiving and understanding advice from 79 % to 97 % on the topic of “ drug usages”, from 85 % to 95 % on “dosage and administration of drug” and 100 % of the patients had received the information on both topics. In terms of the information on “cautions and Adverse effect of drugs”, the percentage of patients receiving and understanding the advice increased from 58 % to 68 % and there was no patient receiving but not understanding the advice. In terms of the information on “medication practice”, the percentage of patients receiving and understanding the advice decreased from 60 % to 40 % with no patient receiving but not understanding the advice.

However, for the later two topics, percentages of patients not receiving the information increased from 20 % to 32 % and from 34 % to 54 % respectively. This might be because the patients picked up by the random interview were not chronic patients so no such information was provided to the patients. In addition, the result indicated that the overall satisfaction at excellent level increased from 14 % to 51 %. Moreover, the clear and systematic work instruction on dispensing process that required the staff to check more details of the prescription and the drugs. Pre-dispensing errors were found to increase from 2.20 % to 2.32 % while none of dispensing errors and incidence of drug supply shortage was found. However, development outcomes of the drug detailing system had an effect on the waiting time. An increase in the mean detailing time from 0.42 minutes to 2.36 minutes had led to an increase in the time period the patients needed to wait for services from 3.30 minutes to 5.04 minutes.

It can be seen that quality improvement activities began with a review of current activities whether or not they respond to the needs of the customers, then proceeding improvement and establishing standards, maintaining the standards (quality assurance), and finally conducting continuous improvement that extends to improvement of other related aspects.

That's the reason that inspired the pharmacy department of Banprak Hospital to intend to improve the pharmaceutical services covering all the main important processes systematically by using Continuous Quality Improvement (CQI) activity as a tool for the continuity of the improvement.



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