

Original Article

Factors impacting on customer satisfaction with community pharmacies in Vietnam

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ABSTRACT

The quality of community pharmacy services in Vietnam still lags behind the developed countries. The objective of this study was to identify factors that affect the overall satisfaction of customers visiting community pharmacies in Vietnam.

A cross-sectional survey of a consecutive sample of 354 customers at 13 randomly selected community pharmacies in five districts in Hanoi, Vietnam was conducted. Data were collected in the field through structured questionnaires consisting of three questions related to customer demographics and 33 items related to customer satisfaction. Customers were asked to rate specific issues concerning their satisfaction on a five point-Likert scale. The reliability of the questionnaire was measured using Cronbach's alpha on this data. Descriptive statistics, factor analysis and multiple regression analysis were used for data analysis.

Out of 450 questionnaires distributed, 354 questionnaires were completed (78.6%). The findings indicated that five main factors affecting customer satisfaction towards community pharmacy services were: 1) attitude and communication of the pharmacy staff/pharmacist, 2) consultation on medication and disease, 3) facilities and convenience, 4) availability and a variety of drugs, 5) pricing. The attitude and communication of the pharmacist was the important factor affecting overall satisfaction (beta coefficient=0.207). Besides, availability and a variety of drugs also had an influence on customer satisfaction in the Vietnamese context. Multiple regression analysis yielded the five main factors explaining 41.5% of total satisfaction.

The interventional solution on attitude and communication of the pharmacist should be considered and implemented to improve customer satisfaction in Vietnamese community pharmacies.

1. INTRODUCTION

Customer satisfaction is a multidimensional construct that reflects the type and quality of pharmacy service provided by pharmacists, how well it is delivered, and the extent to which the expectations and needs of patients are met¹. It is one important indicator of the quality of care because it reflects whether or not a given service meets consumers' expectations and is consistent with their values. Customer satisfaction is considered "a personal

*evaluation or appraisal of a service or product received*². Assessment of customer satisfaction can help to improve the delivery of healthcare services and optimize resource utilisation³. Therefore, the information about patient satisfaction may serve as an indicator of the quality of pharmacy services and a predictor of patient health-related behavior⁴. Using satisfaction surveys can be elicited points of lapses from patients' feedback. Necessary adjustment is then made to retain the loyalty of customers.

The conceptualization of performance evaluation developed by Ware et al., was used by most studies to assess satisfaction in healthcare⁵. MacKeigan and Larson based on the patient satisfaction questionnaire of Ware et al. to develop and validate an instrument to measure patient satisfaction in pharmacy setting. The questionnaire included 44 items measuring eight dimensions of pharmacy services⁶. In 1994, their original measure was validated again to assess patient satisfaction with traditional pharmacy services using 33 items measuring seven dimensions⁷. In the year 1997, Schommer and Kucukarslan reviewed four conceptualizations of satisfaction and recommended to choose a conceptualization that pertains to the question or the purpose of the evaluation⁸ and different ways of measuring patient satisfaction with pharmaceutical services are suggested. Patient satisfaction is becoming increasingly popular as an indicator of the quality of health care services, including pharmaceutical services. Satisfaction can be conceptualized as a performance evaluation, disconfirmation of expectations, an affect-based assessment, or an equity-based assessment. A satisfaction measure should have a theoretical base on which the measure's validity can be assessed. The measure chosen must fit the context of an overall research process, and the researcher must have a clear idea of what is to be measured. A large pool of items, or questions, for potential inclusion in a patient-satisfaction questionnaire can then be generated. The researcher should develop a format for each item (e.g., Likert scale). Besides, many studies were carried out to identify factors affecting to patient satisfaction⁹. However, data of the service quality of community pharmacies and customer satisfaction are still scarce in Vietnam. It is necessary to conduct research to provide the scientific evidence

for the improvement of pharmacy service in community pharmacies in Vietnam.

The objective of this study was to identify factors affecting the overall satisfaction of customers visiting to community pharmacies in Vietnam.

2. MATERIALS AND METHODS

2.1. Development of the questionnaire

This study was based on the performance evaluation conceptualization of patient satisfaction. A questionnaire was developed based on the instrument from previous studies^{5-8,10-15} the adapted questionnaire and its revisions were evaluated in three successive studies conducted on convenience samples (n = 30, 313, 489). The questionnaire was initially developed in the English language. A forward translation of the questionnaire to Vietnamese was completed by a bilingual member in Department of Pharmaceutical Management and Pharmacoeconomics at Hanoi University of Pharmacy (HUP) who also refined the English version of the questionnaire. Backward translation to English was independently performed by another member at HUP. Any discrepancies were discussed and resolved. Both the English and Vietnamese versions of the questionnaire were then distributed to lay people (n=20) in the community for input into the selection of items, the wording of items and feedback about suitability and completeness of the items. The questionnaire (both English and Vietnamese versions) was revised and pilot-tested using another group of 15 lay people, following which further fine adjustments were made to produce the final version.

The questionnaire comprised two sections. The first contained items assessing aspects of customer satisfaction with pharmacy services they had received. A five-point Likert-type scale was used with answers ranging from strongly disagree to strongly agree. This section had 33 items which are shown in table 2. The dimensions in the questionnaire include: attitude and communication of the pharmacy staff; consultation about medication and disease, facilities and convenience, availability and a variety of drugs, pricing, and general satisfaction.

The second section contained items related to participant demographics (i.e. gender, age and the level of education). The questionnaire also contained an instruction for the customers to indicate their

level of satisfaction with the pharmacy encounter compared to what they felt it ought to be (ideal).

2.2. Participants and data collection

A cross-sectional descriptive study was carried out. The samples were randomly selected among customers who visited 13 community pharmacies in Hanoi, Vietnam. The community pharmacies were selected using systematic random sampling from the pharmacy lists provided by Hanoi Department of Health. The surveys were then administered to 450 consumers visiting the pharmacies (around 35 customers per pharmacy). Eligible participants were provided with a copy of the Explanatory Statement and Invitation Letter. Individuals agreeing to participate completed the anonymous questionnaire on the spot. Participants were excluded if they met the following criteria: 1/ younger than 18 years, 2/ declining consent, 3/ unable to understand written or oral expression in Vietnamese, 4/visiting to pharmacies to pick medications for someone else. Parents collecting medicines for their children were, however, included in the survey.

2.3. Data analysis

Usable returned questionnaires were entered into SPSS version 20.0 (SPSS Inc., Chicago, IL), cross-checked for accuracy and analyzed. Descriptive statistics were computed for participant demographic

information. The percentage frequencies, mean scores, and factor loadings on the questionnaire items were performed. Internal consistency reliability was assessed using Cronbach's alpha to measure the internal consistency of the scale, with preferred values higher than 0.7.

Factor analysis was undertaken as part of questionnaire validation so as to define factors and related items. Prior to conducting factor analysis, the suitability of the data for factor analysis was assessed in terms of adequacy of the sample size, and the strength of inter-correlation among items on the scale. Factor analysis was performed using principal components and Varimax rotation of factors that had eigenvalues greater than 1. Items with factor loadings greater than 0.50 were considered "significant". This process of factor rotation was done to assess the dimensions of consumer satisfaction with the community pharmacy service.

3. RESULTS

3.1. Demographics of the participants

Of the 450 questionnaires distributed, 354 were returned (78.6%). Participants' demographics are shown in Table 1. Most of the respondents were female (61.3%). The 18-20 age group and 30-39 age group have the highest percentage of participants (33.9% and 26.8% respectively). Regarding the highest education level, most of them had a bachelor degree (42.7%).

Table 1. Demographics of the participants.

	Frequency	Percentage
Gender		
<i>Male</i>	137	38.7
<i>Female</i>	217	61.3
Age (years),		
<i>18-29</i>	120	33.9
<i>30-39</i>	95	26.8
<i>40-49</i>	48	13.6
<i>50-59</i>	34	9.6
<i>60-69</i>	39	11.0
<i>> 70</i>	18	5.1
Highest educational level,		
<i>Pre-high school</i>	54	15.3
<i>High school</i>	51	14.4
<i>Post high school diploma</i>	76	21.4
<i>Undergraduate degree</i>	151	42.7
<i>Post graduated</i>	22	6.2

3.2. Satisfaction scores for current services

Patient satisfaction with items representing current pharmacy services is reported using descriptive statistics (Table 2). “The pharmacy staff use clear and understandable words” and “the location of pharmacy is convenient” had the

highest mean (4.59 ± 0.537 ; 4.59 ± 0.552 respectively). Meanwhile, the items with the lowest means are “Advice to manage common ailments (i.e. colds, flu) is provided”, “I am recommended to the pharmacy”, “Private area for counseling is available” and “I satisfy with medication prices” (below 3.58).

Table 2. Satisfaction scores for current services.

	1 N (%)	2 N (%)	3 N (%)	4 N (%)	5 N (%)	Mean ± SD
The pharmacy staff are polite and respectful	-	1 (0.3)	9 (2.5)	151 (42.7)	193 (54.5)	4.51 ± 0.564
The pharmacy staff use clear and understandable words	-	-	8 (2.3)	130 (36.7)	216 (61.0)	4.59 ± 0.537
The pharmacy staff are friendly	3 (0.8)	2 (0.6)	8 (2.3)	166 (46.9)	175 (49.4)	4.44 ± 0.654
The pharmacy staff are interested in my health	1 (0.3)	12 (3.4)	51 (14.4)	150 (42.4)	140 (39.5)	4.18 ± 0.820
Listened to what I said	-	1 (0.3)	19 (5.4)	159 (44.9)	175 (49.4)	4.44 ± 0.609
I trust the information provided by the pharmacy staff	1 (0.3)	2 (0.6)	31 (8.8)	162 (45.8)	158 (44.6)	4.34 ± 0.684
Effects of medication are always explained	4 (1.1)	10 (2.8)	34 (9.6)	147 (41.5)	159 (44.9)	4.26 ± 0.832
Side effects of medication are always explained	17 (4.8)	27 (7.6)	98 (27.7)	124 (35.0)	88 (24.9)	3.64 ± 1.087
The pharmacy staff help me to choose drugs rationally	4 (1.1)	5 (1.4)	47 (13.3)	144 (40.7)	154 (43.5)	4.24 ± 0.819
The instruction of taking medication is clearly explained	4 (1.1)	11 (3.1)	29 (8.2)	141 (39.8)	169 (47.7)	4.30 ± 0.835
Advice to manage common ailments (i.e. colds, flu) is provided	18 (5.1)	43 (12.1)	98 (27.7)	108 (30.5)	87 (24.6)	3.57 ± 1.135
The explanation I received from the pharmacy staff is easy to understand and remember	3 (0.8)	9 (2.5)	32 (9.0)	147 (41.5)	163 (46.0)	4.29 ± 0.803
My concern about symptoms and medication issues is fully explained	4 (1.1)	8 (2.3)	36 (10.2)	159 (44.9)	147 (41.5)	4.23 ± 0.810
The location of pharmacy is convenient	1 (0.3)	-	5 (1.4)	131 (37.0)	217 (61.3)	4.59 ± 0.552

Table 2. Satisfaction scores for current services (Cont.).

	1 N (%)	2 N (%)	3 N (%)	4 N (%)	5 N (%)	Mean ± SD
Customers' parking lot is convenient	19 (5.4)	52 (14.7)	46 (13.0)	144 (40.7)	93 (26.3)	3.68 ± 1.168
The pharmacy is prestigious in the area	-	1 (0.3)	75 (21.2)	151 (42.7)	127 (35.9)	4.14 ± 0.751
I am recommended to the pharmacy	119 (33.6)	96 (27.1)	42 (11.9)	57 (16.1)	40 (11.3)	2.44 ± 1.387
Facility of the pharmacy is good	-	3 (0.8)	43 (12.1)	152 (42.9)	156 (44.1)	4.30 ± 0.683
The pharmacy is near my house	-	8 (2.3)	7 (2.0)	126 (25.6)	213 (60.2)	4.54 ± 0.652
The pharmacy is open at a convenient time	-	1 (0.3)	36 (10.2)	142 (40.1)	175 (49.4)	4.39 ± 0.677
The pharmacy is sanitary	1 (0.3)	1 (0.3)	26 (7.3)	150 (42.4)	176 (49.7)	4.41 ± 0.664
Waiting time to get medicines is short	-	6 (1.7)	20 (5.6)	160 (45.2)	168 (47.5)	4.38 ± 0.673
Private area for counseling is available	10 (2.8)	46 (13.0)	95 (26.8)	133 (37.6)	70 (19.8)	3.58 ± 1.035
The waiting area is comfortable	-	3 (0.8)	35 (9.9)	167 (47.2)	149 (42.1)	4.31 ± 0.666
The pharmacy has all drugs/products which I need	-	14 (4.0)	57 (16.1)	147 (41.5)	136 (38.4)	4.41 ± 0.796
The quantity of drugs is ensured	-	3 (0.8)	51 (14.4)	159 (44.9)	141 (39.8)	4.24 ± 0.722
The sensory quality of drugs is assured	-	-	40 (11.3)	156 (44.1)	158 (44.6)	4.33 ± 0.670
I satisfy with medication prices	-	7 (2.0)	122 (34.5)	140 (39.5)	85 (24.0)	3.58 ± 0.680
The price of drugs is reasonable	2 (0.6)	19 (5.4)	131 (31.9)	113 (31.9)	89 (25.1)	3.86 ± 0.803
The price of drugs is shown on the package	1 (0.3)	3 (0.8)	17 (4.8)	133 (37.6)	200 (56.5)	4.49 ± 0.657
I will come back to the pharmacy	-	-	15 (4.2)	152 (42.9)	186 (52.8)	4.49 ± 0.579
I will refer my relatives or friends to this pharmacy	2 (0.6)	6 (1.7)	42 (11.9)	164 (46.3)	140 (39.5)	4.23 ± 0.764
Overall, I satisfied with the pharmacy service	-	-	6 (1.7)	156 (44.1)	192 (54.2)	4.53 ± 0.440

3.3. Cronbach alpha and descriptive statistics

Table 3 shows Cronbach's alpha for each dimension. Cronbach's alpha of each new factor was higher than 0.8 (ranging from 0.825 to 0.926). 30 items were used to measure five dimensions/issues which are related to the satisfaction of the customer. After running Cronbach's alpha test, four items were removed in the questionnaire.

The alpha coefficient for 26 items was 0.926. The first five factors accounted for 60.992% of the total variance.

The Kaiser-Meyer-Olkin (KMO) measure of sampling adequacy for the factor analysis was 0.918. The value of Bartlett's test of Sphericity was less than 0.01 so that a factor analysis may be useful for the data.

Table 3. Cronbach alpha and descriptive statistics.

Evaluation scale	No. of item	Cronbach alpha	Highest possible score	Mean (SD)
Attitude and communication of the pharmacy staff	6	0.871	30	4.414 (0.507)
Consultation about medication and disease	7	0.857	35	4.083 (0.668)
Facilities and Convenience	8	0.825	40	4.382 (0.450)
Availability and a variety of products	3	0.836	15	4.238 (0.644)
Pricing	2	0.827	10	3.807 (0.793)
Total	26	0.926	130	4.248 (0.451)

3.4. Rotated factor loadings for current services items

Factor analysis extracted five factors with the cumulative explained variance of 60.992%. Factor loadings after a varimax rotation are shown in table 4. In cases where the factor loading was above 0.5 for two factors, they were categorized

into the factor having the greater factor loading. Accordingly, the three items were deleted and the 23 items on current services were regrouped into five new factors: attitude and communication of the pharmacy staff, consultation about medication and disease, facilities and convenience; availability and a variety of drugs, pricing.

Table 4. Rotated factor loadings for current services' items.

Items	Factor				
	1	2	3	4	5
The pharmacy staff are polite and respect me	0.787	*	*	*	*
The pharmacy staff use clear and understandable words	0.774	*	*	*	*
The pharmacy staff are friendly	0.752	*	*	*	*
The pharmacy staff are interested in my health	0.667	*	*	*	*

Table 4. Rotated factor loadings for current services' items (Cont.).

Listened to what I said	0.611	*	*	*	*
Side effects of medication are always explained	*	0.735	*	*	*
Effects of medication are always explained	*	0.720	*	*	*
Advice to manage common ailments (i.e. colds, flu) is provided	*	0.703	*	*	*
The pharmacy staff help me to choose drugs rationally	*	0.668	*	*	*
My concern about symptoms and medication issues is fully explained	*	0.656	*	*	*
The explanation I received from the pharmacy staff is easy to understand and remember	*	0.589	*	*	*
The pharmacy staff fully explain my concern about symptoms and medication issues	*	0.564	*	*	*
Location of the pharmacy is convenient	*	*	0.738	*	*
Facility of the pharmacy is good	*	*	0.701	*	*
The pharmacy is sanitary	*	*	0.689	*	*
The pharmacy is near my house	*	*	0.649	*	*
The pharmacy is open at a convenient time	*	*	0.626	*	*
Private area for counseling is available	*	*	0.583	*	*
The number of drugs is ensured	*	*	*	0.789	*
The pharmacy has all drugs which I need	*	*	*	0.777	*
The sensory quality of drugs is assured	*	*	*	0.699	*
I satisfy with medication prices	*	*	*	*	0.855
The price of drugs is reasonable	*	*	*	*	0.830

* Loadings < 0.5

1= attitude and communication of the pharmacy staff/pharmacists; 2= consultation about medication and disease; 3= facilities and convenience; 4= availability and a variety of drugs; 5= pricing.

3.5. Regression results

The multiple regression was employed to test the models.

Table 5 discloses that R square = 0.413, and the p-value for the F test statistic is less than 0.000, providing strong evidence against the null hypothesis.

The results demonstrated that the liner multiple Regressions between factors and customer satisfaction was appropriate with data and able to be used. The Sig. of factors was showed that three factors (X1, X3 and X4) among five factors had

the statistically significant impact on customer satisfaction (sig<0.05). They are attitude and communication of the pharmacy staff, facilities and convenience, availability and a variety of drugs with standardized coefficients ranging from 0.172 to 0.345. Through the value of adjusted R square, the explanatory level of the model was 40.5%. It showed that 40,5% of customer satisfaction can be explained by the five main factors. Based on the results, an equation is established as follow:

$$Y = 0.000 + 0.207 \times X_1 + 0.046 \times X_2 + 0.172 \times X_3 + 0.345 \times X_4 + 0.037 \times X_5$$

Table 5. Coefficients.

	Unstandardized Coefficients		Standardized Coefficients	Sig.	95% CI for B	
	B	S.E	Beta		Lower Bound	Upper Bound
Constant	1.259	0.229		<0.01	0.809	1.710
Attitude and communication of the pharmacy staff (X1)	0.215	0.059	0.207	<0.01	0.099	0.330
Consultation about medication and disease (X2)	0.037	0.045	0.046	0.411	-0.051	0.124
Facilities and convenience (X3)	0.194	0.057	0.172	0.001	0.082	0.307
Availability and a variety of drugs (X4)	0.285	0.043	0.345	<0.01	0.201	0.369
Pricing (X5)	0.025	0.032	0.037	0.427	-0.037	0.087

- R square: 0.413
- Adjusted R square: 0.405

4. DISCUSSION

The study was conducted to identify factors which affect customer satisfaction with community pharmacy in Vietnam. To our knowledge, this is the first study to establish a validated questionnaire that could be used to assess the patient's satisfaction with community pharmacy services in the Vietnamese context. In the literature, there are varying opinions on the appropriate sample size for factor analysis; some researchers argue that 300 cases are appropriate while others prefer to use a minimum ratio of five to ten participants per questionnaire item to be

analyzed, up to a total of 300. 354 cases retained for analysis in this study met both these sample size criteria, as the participants/item ratio was 10:1 (354 cases: 33 items). At the front line, community pharmacists in Vietnam could benefit from the findings of this study by identifying areas for improvement in their service provision, which could eventually lead to increased patient satisfaction and demand for the services.

The validation process resulted in five significant factors instead of the eight factors proposed by Mohd Baidi Bahari or Kamei et al^{14,15}. However, the previous studies showed that these

five factors were included in effected factors. The results of factor analysis and item rotation showed that the use of validated items proved to be successful as almost proposed items were retained. Identification of these dimensions helps to narrow down appropriate services that need to be provided and improved by the pharmacy.

In measuring the reliability of the scale, the calculated Cronbach's alpha for each of the extracted factors was employed (Cronbach's alpha ranged from 0,825 to 0,871). The finding indicated that the items within each of the factors were internally consistent. The instrument is useful to assess customer satisfaction in community pharmacies in Vietnam, and it is relatively simple to use in practice. Once a baseline level of satisfaction has been identified, various pharmaceutical care practices can be instituted. Appropriate data analysis, with adequate sample size, will allow community pharmacists to pinpoint with confidence exactly which areas of their pharmaceutical care practices require urgent improvement.

This instrument may also be used in practice as a quality assurance tool. As health care moves toward an outcomes-based model, patient satisfaction, as well as patient/ customer outcomes, will be of interest to payers who may wish to contract preferentially with practitioners/pharmacists who produce better outcomes or greater patient/ customer satisfaction. As a results, pharmacists who demonstrated greater patient/ customer satisfaction may be at a competitive advantage.

Attitude and communication of the pharmacy staff

Vietnamese customers expect pharmacists to have a good attitude and communication. Satisfied customers are more likely to bring more business because of repeat purchases, recommendations and spending more in the pharmacy. The findings of this study indicated that "*attitude and communication of the pharmacy staff* (mean = 4.41)" is considered as an important factor impacting on customer satisfaction. It also indicated the pharmacist's competence in supplying medication and the ability to manage the consultation. Other studies assessing patient satisfaction with general pharmacy services have also reported "*attitude and communication of the pharmacy staff*" as an important factor^{14,15}. Community pharmacists

should therefore take this into consideration in improving their services and pharmacy staff should be well trained and enriched with communication skills.

Consultation about medication and disease

Participants rated the specific counseling they received about side effects of medications and management of the common ailments with low scores (3.57 and 3.64 respectively). The fact that specific counseling is not a routine occurrence in community pharmacies in Vietnam. It is clear that patients are dissatisfied with the type and quality of information they are receiving from community pharmacies. Therefore, consultation of medication and patients' issues should be a part of an improved process of pharmacy services. Other studies assessing patient satisfaction with general pharmacy services have also reported lower scores for specific counseling such as those dealing with the side effects of medications¹⁶.

Facilities and convenience

The customers often want to buy drugs at any time so that business hour pharmacy affect customer satisfaction. According to the new Vietnam pharmacy law (No.105/2016/QH13), the drugstores were encouraged to open 24/24. Most of the Vietnamese pharmacy often open from 7 a.m to 8.30 p.m. Some pharmacies open sooner (6 a.m.) and close later (10 p.m.). It is a convenient time for customers to buy drugs. Moreover, customers often choose a pharmacy near their house because of the convenience (mean=4.54). Facilities and level of cleanness also influenced pharmacy customers' choice (mean=4.30). Customers sometimes have to wait at the pharmacy to buy drugs in a rush period. So, customers seem to be more satisfied with a pharmacy having a comfortable waiting area.

From 2013, all pharmacies in Vietnam have already met GPP Standard requirements. The GPP regulation requests a private area for counseling in a pharmacy and it plays an important role in affecting customer satisfaction. However, pharmacies in Vietnam often use a table near the counter to counsel for customers. The finding indicated the low level of customer satisfaction in terms of consultations which ensured privately

(3.58 (SD=1.03)). It is similar to previous studies in other countries¹⁶. More and more Vietnamese people want to be served in better pharmacies which have good and clean facilities. Currently, many pharmacy chains in Vietnam have grown up with better facilities than that of private pharmacies. Therefore, if private pharmacies want to have competitive advantage, they will need to focus on the image and facilities of pharmacies.

Availability and a variety of drugs

The Vietnamese pharmacies often provide drugs, beauty products, and functional food. This is similar to the findings published in South-east Asian countries like Malaysia¹⁴. Diversified products should be aimed to satisfy the different customers' demand. The level of service offered can range from self-service (in the front of the shop) to an authentic, personalized service throughout the shop. The customer expects not only medications but also a wide range of products to be available in the pharmacy so that they can purchase everything needed in the pharmacy and save time by not having to travel around to look for the items needed. A mix of products that fits the needs of a broad mix of customers will become a success factor for customer satisfaction.

Pricing

Setting an appropriate price for a product or service is an essential part of the pharmacy business. The participants did not seem to be satisfied with the prices of the medications. The mean score of this item was low (3.58 (SD=0.68)). In Vietnamese pharmacies, medicines are sold on the free market, and the price of medicines is determined by the retailers and market forces. Customers tend to survey and compare the prices of their medicines at different pharmacies and then demand the lowest price from the pharmacy they used to visit. This has happened as customers are being offered more choices from different retail pharmacies and among brand and generic drugs. Most customers go to more than one drugstore to check the price and choose the pharmacy offering the lowest price of drugs of interest.

Several limitations should also be considered. The questionnaire depended on participant self-

report. Consequently, data inaccuracies may result from poor memory and misunderstanding of the questions. Furthermore, data gathered using Likert scales are subject to biases caused by participants who may agree to a given survey statement, simply out of the desire to provide a favorable response.

5. CONCLUSION

The findings of this study indicated that there were five main factors determining customer satisfaction toward community pharmacies in Vietnam, and these include: attitude and communication of the pharmacy staff; consultation about medication and disease; facilities and convenience; availability and a variety of drugs and Pricing. Stakeholders could utilize this information to design and delivery of improved services that lead to increase patient satisfaction of the services, and hence, improved quality of care. The interventional solution on attitude and communication of the pharmacy staff/pharmacist should be considered and implemented in order to improve the quality of pharmacy service and customer satisfaction in community pharmacies in Vietnam.

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