Managing minor ailments in the United Kingdom. The public’s preferences for characteristics of community pharmacies: a discrete choice experiment.

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BACKGROUND

• Many visits to high cost UK health services, such as general practitioners and emergency departments, are for minor ailments1.
• Published evidence shows that community pharmacy (CP) management of minor ailments is a suitable, less costly alternative2.
• CP staff can advise people about minor ailments and recommend treatments without the need for medical intervention.
• This study has begun to explore why some people might seek medical advice in preference to treatment in CPs.

AIMS

1. To establish the public’s relative preferences for different characteristics of CPs.
2. To estimate their willingness to pay for these characteristics.

DESIGN

Discrete choice experiment (DCE), a survey technique that defines attributes (characteristics) of a service and:
• measures the relative importance that respondents place on each;
• measures the extent to which respondents ‘trade’ between them; and
• can allow estimation of willingness to pay for those attributes.

DCE QUESTIONNAIRE DEVELOPMENT

Attributes and levels for the DCE were informed by:
1. A literature review
2. Responses to a pilot questionnaire asking CP customers why they chose to visit a pharmacy on a particular occasion

Respondents were asked to imagine that they had flu-like symptoms......

You have a headache and a fever, your bones are aching, you have a sore throat and your nose feels slightly blocked up.
You are still able to do all the things you usually do but are more tired than usual.
The symptoms started to appear four days ago, and were slightly worse when you woke up this morning.
A doctor’s appointment is not available for 7 days and you don’t have any of the medicines you might need at home.

......and choose between two hypothetical pharmacies with differing levels of attributes to help them manage the symptoms, or choose to ‘do nothing’.

Attributes and levels were:
• Pharmacy location (local shops, shopping centre, supermarket, Dr surgery)
• Car parking (definitely, probably, unlikely, definitely not)
• Waiting time (5 hrs, 12 hrs, 1 day, 2 days)
• Pharmacy staff (pharmacist, trained assistant, untrained assistant)
• Staff attitude (friendly/approachable, not friendly/approachable)
• Questioned asked about symptoms/general health (yes, no)
• Better understanding of symptoms/management (yes, no)

METHODS

PARTICIPANTS: 157 members of the general public, randomly selected using UK Census Output Areas as the sampling frame, stratified by geographical region and subject to quotas for age, gender and working status.

SURVEY INSTRUMENT: Six versions of the questionnaire were created, each version containing eight unique choice questions (see example above), and questions collecting demographic data about respondents (age, gender), health status and recent use of CPs.

DATA COLLECTION: Face-to-face interviews using Computer Assisted Personal Interview (CAPI) technology; one version of the questionnaire was administered to each respondent by a trained researcher from Ipsos MORI in November 2012.

ANALYSIS: Conditional logit using STATA software.

FINDINGS

RESPONDENT CHARACTERISTICS:
• Age and gender: Mean age=49.2 years (SD 18.8; range 18-87); 56.1% female
• General health: 72% Good/Very good; 21% Fair; 7% Bad/Very bad
• Pharmacy use: 87% had visited a CP in the previous six months, mainly for prescription dispensing (61%) or purchase of OTC medicines (30%)

FACE VALIDITY OF DCE RESPONSES:
Most regression coefficients moved in the expected direction indicating face validity. For example, respondents preferred to pay less money for their preferred pharmacy characteristics (all other things being equal).

PREFERENCES FOR PHARMACY CHARACTERISTICS:
• Staff training and gaining a better understanding of symptoms and treatment were the most important characteristics when choosing between alternative CPs.

CONCLUSIONS

• When managing flu-like symptoms, consultations with trained staff that improved understanding of the condition and treatment were the most important influences on respondents’ choice of pharmacy.
• Cost, location and staff attitudes also influenced their choice.
• Optimizing staff training and communication skills, together with raising awareness of available pharmacy services for self-care support, could divert consultations for minor ailments from higher cost settings to CPs.

ACKNOWLEDGEMENTS

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References:
3. Porteous et al. Preferences for self care or professional advice for minor illness; a discrete choice experiment. Br J Gen Pract 2011; 61:911-917