

**The threats and possibilities for the
Centrum Apotheek Enschede
in the changing pharmacy**

**Master's
Assignment**

Colloquium: April 24, 2008
Time: 15.45
Location: SP7

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Management summary

The problem

A lot of changes are taking place in pharmacy. Important changes are for example the increasing competition and the shift from medicine supplier to a care provider with an increasing accent on the distribution of information and services. These changes have an effect on pharmacies and their market. To adapt to these changes there is the need to explore the market and the effect of the changes. With this knowledge it is possible to anticipate and react on these changes.

The Centrum Apotheek Enschede wants to know what the changes in the market are exactly and what the possibilities and threats are. To research this, the following research question was formulated: "What are the possibilities for the Centrum Apotheek Enschede to respond to the changes in the environment, taking into account its special position and the wishes of the customers?".

Recommendations

It is a good strategy to emphasize the (strong) position of information supplier. This could be done by installing a robot that helps with the medicine distribution. In this way more time at the desk is created that can be used for giving information.

The strategy can also be emphasized using the website of the Centrum Apotheek. The website provides a lot of information, but the visibility and knowledge of this information can be increased by displaying it on the homepage. Also the service of handing in prescriptions digitally and the possibility of email contact can be made more visible by this.

The need for prevention was not very high in the survey. It is possible this interest increases in time and it may be more interesting on a longer term. General practitioners could be involved for the health aspects and the insurers for the financial aspect.

The service level of the Centrum Apotheek seems sufficient. Medication reviews is the only extra service that is appreciated by the customers. This could be done in cooperation with insurers for the financial support.

Internationalization offers possibilities for the Centrum Apotheek, because of the location near the German border. This could be done for instance by adapting the product offering.

Motivation

The relation of the Centrum Apotheek with its customers is described by the three markets model. The PEST analysis showed important trends that influence this relation and the (expectations of the) customer. Because of this, relevant trends for a strategy are internationalization, increasing competition, changing legislation, the role of the internet, a changing population and a changing customer. The element 'Market' of the 7M model emphasizes the importance of the relation between Centrum Apotheek and customer. The element 'Mission' of the Centrum Apotheek states the market should be focused on the customer, and 'medical technology' can be used to support this relation. The stakeholder analysis showed the shareholders (other pharmacies in Enschede) to be important. Their influence on the actions of the Centrum Apotheek limits the possibilities for a strategy. Based on the

strengths and weaknesses of the Centrum Apotheek, specialization and internationalization are possibilities worth investing in, the relation with the MST should be maintained and prevention should be decided on if it is worth investing in.

A survey among customers was done to measure the customers' expectations of the Centrum Apotheek. The trends do not seem to influence the customers of the Centrum Apotheek much. The customers have a traditional image of pharmacies according to the survey. Customers have a high need or service and (specialized) information, but a low need for additional services or prevention activities. People are also unwilling to pay for these services and activities. Pharmacies are however the place people go to for information on medicines.

Consequences

Buying and installing a robot to create more time at the desk is a costly decision; the initial costs are high. Optimizing the possibilities of the internet is less complicated since the website of the Centrum Apotheek already offers the possibility of handing in prescriptions and contact and health information. It should be relatively simple to increase the visibility of these services. The costs of prevention activities and medication reviews could be reduced by cooperating with insurers. Adapting the products and information to the increasing international customers is also a low-cost possibility.

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1. Introduction

In this chapter, first the motive of the research is described, followed by a short introduction on the problem. This leads to the description of the research questions in the third paragraph. After that the Centrum Apotheek Enschede is described, that asked for this research. At the end of this chapter the structure of the report is discussed.

1.1 Motive of the research

The health care sector in The Netherlands is changing. Examples of these changes are developments such as increasing competition on the market, technological developments and the influence of the government (Van der Kruijs & Den Engelsen, 2007). These developments also affect the pharmacies and the role of pharmacists has changed over the years. Pharmacists are shifting from a medicine supplier to a supplier of service and information. With these trends and other (inter)national changes, such as internet pharmacy and the increasing important of service, pharmacists have to adapt (Croonen, 2006; Roberts et al. 2003).

The research described here is done for the Centrum Apotheek Enschede. As a result of the changes in pharmacy the Centrum Apotheek wants to know how they should react. What the changes are exactly, how these changes influence the Centrum Apotheek and what the Centrum Apotheek can do in reaction to these changes are researched in this report.

1.2 Centrum Apotheek Enschede

The Centrum Apotheek Enschede has asked for this research. The Centrum Apotheek is a unique pharmacy, because of the set-up of the pharmacy.

The Centrum Apotheek Enschede is the only pharmacy in Enschede that is always open, 24 hours a day and every day of the year. The Centrum Apotheek was set up in 1999, from the initiative of the other pharmacists in Enschede. Two city pharmacies were bought and merged into the Centrum Apotheek with the goal of centralizing the services during outside office hours (nights and weekends). This idea was unique in The Netherlands at the time (Toering, 1999).

The pharmacy has three departments, The Centrum Apotheek Enschede II (the day pharmacy), Dienstapothek Centrum Apotheek Enschede (the night and weekend pharmacy) and Recenter Paratus (the ad hoc preparation of medicines). The Centrum Apotheek is a private company in which all pharmacies or pharmacists of Enschede can participate (the shareholders). They have an influence on the actions of the Centrum Apotheek, which creates the unique position of the Centrum Apotheek (figure 1). The pharmacist has the responsibility to act in daily practice but has to answer to the board of directors. This board has a supervising role. Outside normal opening hours the responsibility for the pharmacy is varied among the shareholders, which are the other pharmacists in Enschede.

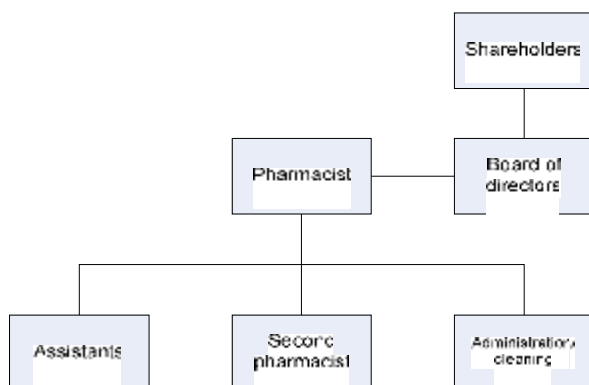


Figure 1 Organization chart Centrum Apotheek

The primary task of pharmacies is to provide medicines to their customers. In order to do this well, the pharmacist also has to check for medication interactions, inform the patient on medication and side effects, guarantee the quality of the medication and the privacy of the patient. How this should be implemented is written in the "Nederlandse Apotheek Norm" formulated by the Koninklijke Nederlandse Maatschappij ter bevordering der Pharmacie [KNMP]. The Centrum Apotheek works according to that norm. An example of this is the separate consulting-room to guarantee the privacy of the patient. The Centrum Apotheek offers additional services like the possibility of handing in your recipe by fax or internet and a delivery service for the people who need it. In 2004 the Centrum Apotheek obtained the HKZ-certificate for public pharmacies, a certificate that shows that an organization has reached a certain level of quality. This certificate was renewed in 2007.

The Centrum Apotheek has, besides the normal tasks, the responsibility for part of the medication of the people discharged from the hospital. Also medication for special groups (such as addicts and homeless people and patients from RIAGG, employees of the ITC and refugees) is provided by the Centrum Apotheek. The tasks of the Centrum Apotheek are therefore diverse.

The Centrum Apotheek Enschede is located in the centre of Enschede. The central position of the Centrum Apotheek makes it easy to reach and it has customers from all over the city. Because of the location close to the Medisch Spectrum Twente, there is a lot of cooperation and competition with the MST.

1.3 Changes in pharmacy

The changes in pharmacy created a shift in the role of pharmacists; first they were only a supplier of medicines, now there is a shift towards being a supplier of information and service (Xu, 2002; Croonen, 2006; Tio, LaCaze & Cottrell, 2007). Other important changes are the increasing competition, legal changes (Geneesmiddelenwet, WGB0) and a changing customer (Van der Kruijs & Den Engelsen, 2007). The changes on the entire sector have their influence on the environment of individual pharmacies. It is often heard that pharmacists are too passive and need to react on the changes now (Pharmaceutisch Weekblad, 2006a). How these changes influence the profession and what the consequences for the actors in the market of pharmacies are, is not completely clear. However, it can be said that due to the increasing competition, it is less obvious customers will always

visit the same pharmacy (Van der Kruijs & Den Engelsen, 2007). The customer is also becoming more assertive and will demand a higher level of service and counseling (Feenstra, Cavalini & Georgopoulos, 2007). This makes it less obvious that the customers will come to a certain pharmacy. Pharmacies should therefore meet the (higher) demands of the customer. The customer adopts a more active role (Tio, LaCaze & Cottrell, 2007). Insight in why people choose for a certain pharmacy and what customers want from a pharmacy could help pharmacies in meeting the wishes of the customers. The risk of making the wrong choices is large when the wishes of the customer are not known (Van Haarlem, 2006).

If the changes in pharmacy and the needs of the customer are known, it can be used to create a long term vision on how to deal with the changes and meet the wishes of the customers. A method for analyzing the changes and influences in pharmacy and use this information to create a vision is strategic planning (Botter, Fisscher & Boer; 1994). This method also provides the possibility for analyzing (changes in) the environment of an organization and to take the stronger and weaker points of an organization into account when creating a long term vision.

1.4 Research questions

The trends in health care and pharmacy cause changes for the individual pharmacist. The environment and the customer are changing. The goal of this research is to determine what the changes in pharmacy are and what the consequences of these changes are for the Centrum Apotheek and how these trends influence the customer's wishes. With this information recommendations for a strategy can be made for the Centrum Apotheek on how to react on the changes. This leads to the following main questions of this research:

Main questions:

What are the possibilities for the Centrum Apotheek Enschede to respond to the changes in the environment, taking into account its special position and the wishes of the customers?

Sub questions:

What is environment and how to analyze it?

What are the changes in the environment of pharmacies?

What is the environment of Centrum Apotheek Enschede?

What can the Centrum Apotheek Enschede do in reaction to the changes in pharmacy?

These sub questions address the issue of the changes in pharmacy and the changes in the environment of the Centrum Apotheek. The customer is however an important actor in this; the customer is the one that chooses a pharmacy and is the buyer of the products of the pharmacy. Their wishes are therefore important to be taken into account. Because of this, the following sub question is formulated:

What are the wishes of customers of Centrum Apotheek Enschede?

The answer on these sub questions should lead to the answer on the main questions and recommendations for the Centrum Apotheek Enschede on how to handle the changes in the health care and pharmacy world.

1.5 Structure of the report

This report has as a goal to research what the possibilities are for the Centrum Apotheek to react on the changes in pharmacy given the unique position of the Centrum Apotheek. The sub questions are used to find an answer on the main research question. In the second chapter of this report the answer on the first sub question will be formulated, by discussing literature on environment and strategic planning. In the third chapter the techniques found in the literature will be applied on the situation of the Centrum Apotheek. This will provide an answer on the second, third and fourth sub question. Paragraph 1.1 mentioned the importance of knowing the wishes of the customer. The fifth sub question is therefore answered by a survey among the visitors of the Centrum Apotheek that researched their wishes. Finally the main question is answered in the fifth chapter, in which the answers on the sub questions should provide an answer on the main question. In the sixth and final chapter the research is discussed and some recommendations for further research are made.

2 Strategic planning

The introduction in chapter 1 described shortly some of the changes in pharmacy and the need to research these changes. For the exploration of an organization's possibilities in a changing environment, strategic planning is a helpful method. This method of organizational decision making offers the possibility to take changes in the environment and strengths and weaknesses into account when developing a long term plan (Botter, Fisscher & Boer, 1994; Taylor, 1984).

This chapter first discusses some literature about environment, in order to answer the first question "what is environment and how to analyze it?". To answer this question, theory will be discussed that can be used to describe an organization and its environment. The theory is used to describe the elements that can be of influence on the organization, the customers and the relation between the organization and its customers. The techniques mentioned in this chapter could help with the analysis of the market on a macro level (three markets model), which helps to determine the scope of the research. The three markets model describes the relation between a care provider, the insurers and the customer. The PEST analysis helps to analyze the market of the sector (PEST), which results in changes in the sector and will provide relevant threats and opportunities in the SWOT analysis. The situation of the organization, with relevant elements in and outside the organization is described by the 7M model. The model will help to distinguish the relevant elements of the organization which should be taken into account in the research. The external influences of the stakeholders are described by the stakeholder analysis and finally the strengths and weaknesses of an organization are researched by the SWOT analysis. This analysis shows which opportunities or threats should be reacted on based on the specific characteristics of the organization. These elements are important for creating a strategy (Taylor, 1984).

2.1 Environment and strategic planning

Organizations are usually considered to be open systems; organizations are influenced by their environment and can influence their environment. Environment is defined as "all the elements that are no part of the organization" (Vranken & Henderickx, 1996). Elements could be events, activities, trends, resources or actors. Vranken & Henderickx (1996) describe the open system theory in which the boundaries of an organization are vague; it is unclear if elements are inside or outside the organization. This theory also states an organization should have a good relation with its environment in order to survive. An environment can be dynamic or stable and complex or simple. The less dynamic and complex an environment is, the easier it is to see changes coming and to react on changes in this environment. Heene (1997) mentions environment as one of the three steering elements in defining a strategy. Other elements are the resources and the organizations norms and values. If the organization is able to create a strategy that is consistent with the steering elements, competitive advantage can be created (Heene, 1997). Botter, Fisscher & Boer (1994) mention strategic planning as the most effective decision making method for organizations in reaction to its environment. Strategic planning is the systematic development of actions which are very important for the existence and continuity of the organization. A well defined strategy is able to give direction to the

actions of an organization. The set of beliefs and assumptions that the strategic plan of an organization contains about its environment, determines the success or failure of this plan (Mason, 1969). One of the greatest benefits is the consensus in an organization on the path that should be followed (Botter, Fisscher & Boer, 1994).

Oyen & De Schuyteneer (2002) describe four phases of which the strategic planning process consists. This process should eventually lead to a strategic document. This document contains the vision, mission and (definite) goals of the organization, which are the results of the planning process. This document should be made by the management itself, because translating the results of the planning process into definitive goals and objectives raises specific questions which should be decided on by the management (Oyen & De Schuyteneer, 2002). The phases are:

- An exploration of the future: techniques that are used in analysis of the environment and the future of an organization depend on characteristics of the organization and its environment. Characteristics like size, diversity of products and complexity of markets are important (Ginter, Swayne & Duncan, 2002; Oyen & De Schuyteneer, 2002).
- Formulating the position and role of the organization: evaluate by answering questions about the role of the organization, for example what customers can expect and what kind of message the organization wants to spread. The results of this phase should be put into words in a mission statement.
- Formulating a starting point for the policy: narrowing the mission statement down in long term policy goals.
- The results of the previous phases should be written in a 'strategic document' which will be a guide for the organization: this document with a vision, mission and goals should be a manual for the organization (Oyen & De Schuyteneer, 2002).

The first two phases have as a goal to develop the strategy; the last two phases should help in developing the policy.

The techniques of strategic planning that are most effective in the first phases are determined by the size, diversity of products and the complexity of the markets of the organization. Therefore techniques and models are needed to describe a market, the situation of an organization and the organization itself, with its strengths and weaknesses. For the strategic planning process in simple organizations, techniques that are suitable for this are for example PEST-analysis, stakeholder analysis and a SWOT (Ginter, Swayne & Duncan, 2002; Oyen & De Schuyteneer, 2002).

2.2 Three markets model

As described in the previous paragraph, actors could be part of the environment of organizations. To describe the market and the actors of health care, the three markets model of Van Montfort (1997) can be used. This model gives an overview of the relations in health care and the different roles of the parties involved. The relevant elements in the environment of pharmacies are described by this model.

A market is a group of buyers and sellers of a particular good or service (Mankiw, 2007). A market is characterized by the actors, what the goods are that are traded and where this market is (Van Montfort, 2007). The health care market is a special one, because there is a different structure

than a regular market. In a regular market the service offer and the payment are handled by the same parties. In health care the financial aspect and the care aspect is often separated and handled by a third party. This is displayed in the three markets model of Van Montfort (1997) (figure 2). The separation between the care and financial aspects creates three different markets, in which all the actors have a different role. The markets are regulated by the government, which has a central position.

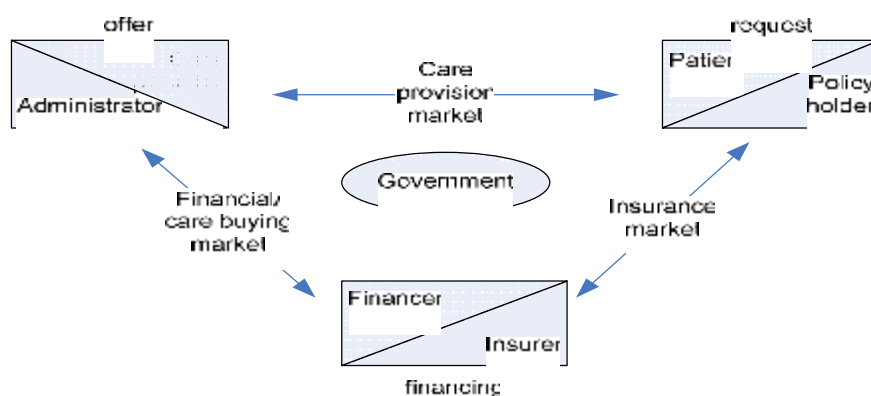


Figure 2 Three markets model (Van Montfort, 1997)

Care provision market

When a person needs health care, the patient asks for care with the care provider in the care provision market. This market is an individual one; patients ask for care on an individual bases. The goods of this market are mostly services, such as information and care, but also tangible goods, such as medicines. Customers are free to choose their own pharmacy. Even when registered at a pharmacy, the customer is free to visit other pharmacies. Because of medication safety it is however preferred to visit the same pharmacy as often as possible. Criteria of why customers choose a pharmacy are: liking the pharmacist, parking availability, price and short waiting time (Xu, 2002). Franic, Grauer & Law (2005) also did research and found the following factors: the pharmacist's competence, setup of a pharmacy, customer service, convenience and friendliness.

Insurance market

People are (usually) insured by an insurer; they pay their insurance premium and the insurer provides the policy holder with insurance (insurance market). This market is a collective market; the insurances are often regulated by government or purchased by employers. The goods of this market are the insurances. The separation of the financial aspect is not applicable in all cases. The products not compensated by the insurers, such as (most) Over-The-Counter-products (OTC), have to be paid for by the customer itself. Insurers sometimes declare 'preferred pharmacists', these pharmacies have a discount on OTC-products.

Financial market

If the patient received the care he needed, the care provider claims his costs on the insurer (the financial market). Care providers and insurers make agreements about the care for the patients (the goods on the markets). Insurers should contract enough care providers to guarantee a sufficient level of care ('zorgplicht') (Teeuwen, 2007).

The three markets model is a describing model. The model can therefore not be used to research the changes in a market, but can be used as a basis to describe the relations between the actors and how the changes affect these relations.

2.3 PEST analysis

Trends are also said to be elements in the environment of the organization. Scanning the environment helps to think creatively and be flexible (Taylor, 19854). For the analysis of the changes in the environment of an organization, a helpful and frequently used method is the PEST analysis (Oyen & De Schuyteneer, 2002). A PEST analysis is used to understand the movements of a market (on a macro level), and it can be used to understand the position, potential and direction of an organization (Chapman, 2006; Botter; Fisscher & Boer, 1994). By analyzing these changes, organizations can anticipate in time to these changes (Oyen & De Schuyteneer, 2002). The trends and influences are divided in four categories:

- Political trends (political regulations and activities that influence organizations),
- Economic trends (general economic changes in the country),
- Social trends (demographic changes, changes in norms, values and customs)
- Technological trends (scientific and technological developments)

Some additional categories are Environment, Industry analysis, Legal, Ethical, Ecological/Environmental, and Demographic trends (Chapman, 2006; Botter, Fisscher & Boer, 1994). These changes affect all organizations (in the same sector) eventually and equally (Oyen & De Schuyteneer, 2002; Daft, 2006). A PEST analysis often offers input for a SWOT analysis, and should therefore be done prior to a SWOT (Chapman, 2006).

By having a good idea of the changes influencing the market of a sector, the role and situation of an organization in these changes is not clear. A model to discuss the functioning of an organization is the 7M model.

2.4 7M model

This model is used to get an overview of the relevant elements in the situation of an organization. It is used to see which elements are of importance and influence for the organization and the relation with the customer. This model (Bijker, 2007) is derived from the 7S model of McKinsey, but the 7M model is more externally focused (with the element market) and the 7S model is more focused on change management (Schwering, 2003). The factors in this (Dutch) model are market (Markt), mission (Missie), medical specialist (Medisch specialist), medical technology (Medische technologie), resources (Middelen), management (Management), power (Macht). The elements of the 7M model provide a framework to discuss all the relevant elements of a situation.

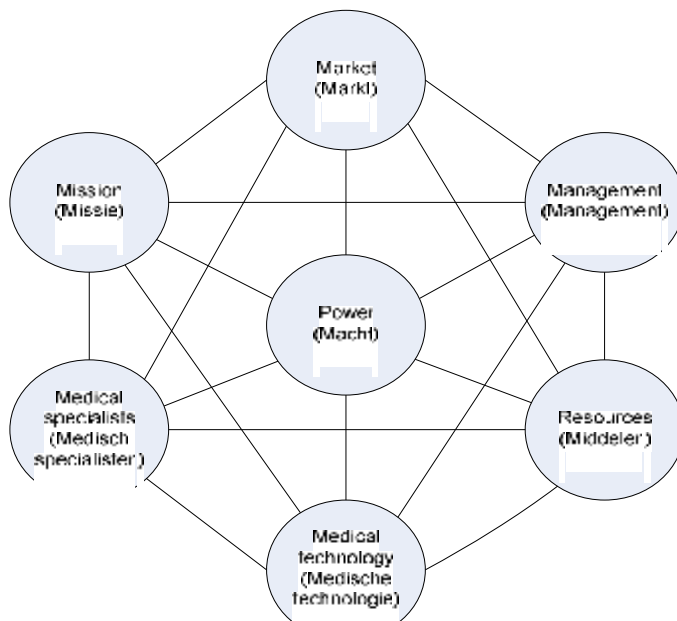


Figure 3 7M model (Bijker, 2007)

Just like in the original 7S model, all the elements should match the direction of the organization, which means that all elements should be implemented with the same underlying idea. All elements are connected and all elements should therefore be consistent with each other. The model is originally meant for the use in hospitals, but it can be used in pharmacies or other (medical) organizations (Bijker, 2007). Some elements of the model are however more relevant for a large and complex organization like a hospital. The model should be read starting with the element market. This implies that the process of managing should start with a clear image of the market. This market of pharmacies is discussed earlier (paragraph 2.2). The 7M model shows there should be a connection between the need for care (the market) and the way care providers handle this need, because all the elements are connected with the other elements (Bijker, 2007). The mission statement has as a goal to show what the organization wants to do and be (Botter, Fisscher & Boer, 1994). The strategy should be based on the goals of the management stated in the mission (Houben, Lenie & Vanhoof, 1999; Ginter, Swayne & Duncan, 2002). The importance of the mission is also reflected in the four phases of strategic planning described by Oyen & De Schuyteneer (2002). In pharmacies the medical specialist and management are usually the same persons. It is therefore not useful to distinguish these two elements in pharmacies. Because management and medical specialists are the same, the element power is less important in the organization. Medical technology will be of more importance in hospitals because the role of technology is more important for the primary process in hospitals. It can however still be of importance for pharmacies. The resources of an organization are of importance, but have less impact on the relation between the pharmacy and the customer.

Not all elements of the 7M model are relevant when applied to pharmacies in general. The management is merged with the medical specialists in one element. Power is less important in pharmacies and therefore not taken into account in the model. Resources have a minimal influence on

the relation with the customer and this element is also not taken into account. The market, mission, medical specialists and medical technology can all be of influence on how the organization treats the need for care of the customers. However, not only the market influences the organization, other parties in the market have an influence on the organization too.

2.5 Stakeholder analysis

Actors are mentioned before as elements in the environment of the organization. Stakeholder analysis is useful for researching the relation between important stakeholders and the organization (Brugha & Varvasovszky, 2000), which gives an image of the role of the organization and its position in the environment. By analyzing this, the influence of stakeholders on decision making becomes clearer and it would even be possible to influence them. A good overview of the stakeholders is also a necessary step before doing a SWOT analysis and formulating a strategy (Oyen & De Schuyteneer, 2002).

According to Varvasovszky & Brugha (2000) there is not only one way to do a stakeholder analysis. The exact way to perform a stakeholder analysis differs with the context of the research. Mitchell, Agle & Wood (1997) describe a model to identify stakeholders and to define which stakeholder will get the attention from the management. They identify relevant actors by the possession of three attributes:

- **Power:** the power of actors to impose their will on the organization. Mitchell, Agle & Wood (1997) distinguish three kinds of power; coercive power (physical resources of force, violence and restraint), utilitarian power (material or financial resources) or normative power (symbolic resources). Together with legitimacy power can be authority, but this is not always the case.
- **Legitimacy:** Suchman (1995 in: Mitchell, Agle & Wood (1997)) defines legitimacy as the perception that the actions are desirable, proper or appropriate within some socially constructed systems of norms, values, beliefs and definitions. A reason for this legitimacy could be a contract, legal title, moral right or a moral interest (Agle, Mitchell & Sonnenfeld, 1999).
- **Urgency:** the degree to which stakeholders claim calls for immediate attention. A call is only urgent if it meets two criteria; time-sensitiveness (the degree to which a delay in attention from the management is not accepted by the stakeholder) and criticality (how important the claim or relation is to the stakeholder)

The possession of these attributes is variable and it is a matter of multiple perceptions. These attributes are shown in figure 3. The more attributes a stakeholder possesses, the more overlap in the model, the more influence a stakeholder is likely to have on management's decisions. Saliency, the degree in which a stakeholder gets attention from the management, is a perception of the management and is positively related to the perceived number of attributes of a stakeholder.

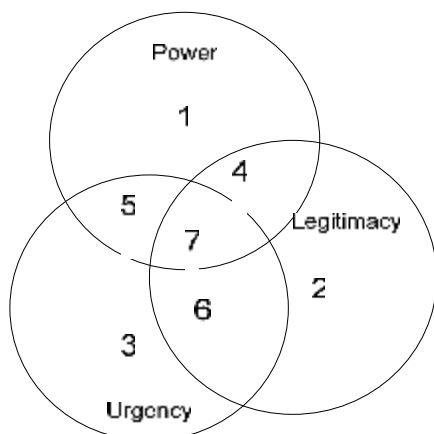


Figure 4 Attributes of stakeholders (Mitchell, Agle, & Wood, 1997)

As can be seen in the model, there are various sorts of stakeholders to identify, all with different attributes and a different relation to the organization. The different groups of stakeholders are:

1. Dormant stakeholders: this group only has the attribute power, but as they do not have another attribute, their power is not used. This group has little or no contact with the organization, but because of the possibility to get another attribute, it is an important group.
2. Discretionary stakeholders: these stakeholders are people with legitimacy but no power over the organization or urgent claim. Managers do not have a reason to pay attention to this group, but they can choose to do so which makes this group of stakeholder subject to corporate social responsibility.
3. Demanding stakeholders: this group only has an urgent claim, but because there is no legitimacy or power over the organization, it is not needed to pay much attention to this group. This group is mostly seen as annoying.
4. Dominant stakeholders: stakeholders with a legitimate claim and the power to influence to firm if needed. This relation is often confirmed by a formal mechanism. This group is often seen as the only stakeholders of an organization.
5. Dangerous stakeholders: by having power and urgency, but no legitimacy, stakeholders can become dangerous for the organization, themselves and the relation between the two. Because of this danger it is important to identify these groups in time, to limit the damage they can do.
6. Dependent stakeholders: these stakeholders are dependent because of the lack of power over the organization. If another (dominant) stakeholder helps the dependent stakeholder to get the claim fulfilled, the stakeholder can become a definitive stakeholder.
7. Definitive stakeholders: by possessing all three attributes, this group deserves and often gets the attention they need. The most regular scenario for becoming a definitive stakeholder is a dominant stakeholder with an urgent claim.

Not shown in the model are the non-stakeholders, groups that do not possess any of the attributes power, legitimacy or urgency. The stakeholders with only one attribute are latent stakeholders, and could be considered the least important when having not much time and effort. Saliency will therefore

be low for these stakeholders. The stakeholder groups 4, 5, and 6 are called expectant stakeholders. Because of the fact that they have two attributes they expect more of an organization than the latent stakeholders. Therefore an organization should pay more attention to these stakeholders; a higher salience. If the expectant stakeholders acquire the last, third attribute, they will become definitive stakeholders and salience will be highest for this group.

The stakeholder analysis is used to analyze the stakeholders of an organization and determine the influence of various groups on the organization. This method tries to give an overview of the groups that are most important for an organization and can help to decide which groups should get the most managerial attention.

The methods described here give an overview of the organization and the (changes in the) environment of the organization. The characteristics of the organization can be analyzed using a SWOT analysis, which takes the strengths and weaknesses into account in combination with the opportunities and threats of an organization.

2.6 SWOT analysis

The previous methods can be used to describe the elements in the environment of an organization that are of influence on the relation with the customer. However, in order to get a complete view of an organization and to create a strategy that fits best for the organization, the strengths and weaknesses of an organization should be researched. Strengths can be considered as a resource, one of the elements of an organization according to Vrancken & Henderickx (1996). SWOT measures a business unit or an idea on a micro level, in contrast to a PEST analysis, that measures a market (Chapman, 2006). SWOT stands for strengths, weaknesses, opportunities and threats. Strengths are competitive advantages that other organizations do not have (Houben, Lenie & Vanhoof, 1999). Weaknesses are issues in which the organization is not as good as other organizations. Opportunities are chances created by changes, often external and on the long term. This in contrast to threats; what could hinder the organization in its mission (Oyen & De Schuyteneer, 2002). Strengths and weaknesses are often each others opposites. The same thing is true for opportunities and threats; not taking an opportunity could become a threat. An internal analysis has as a result the strengths and weaknesses; an external analysis makes the opportunities and threats more visible. The opportunities and threats are therefore largely to be found in the PEST analysis conducted before.

The results of a SWOT analysis can be organized in a SWOT interaction table. Goals, stated in the organizational mission, should be based on the strengths of an organization and avoid the weaknesses (Houben, Lenie & Vanhoof, 1999; Oyen & De Schuyteneer, 2002). An interaction table is represented below (table 1).

Table 1 SWOT interaction table

	Important chances	Important threats
Explicit strengths	Invest	Defend
Explicit weaknesses	Decide	Disinvest

2.7 Summary

This chapter tried to find an answer on the research question: "What is environment and how to analyze it?". In answer to this question can be said that the environment of an organization are all the elements that are no part of the organization. According to the open system theory, the organization and its environment are connected to each other. The method of strategic planning is a method to analyze the environment and to react on changes in this environment.

The unique structure of the health care market creates three markets. The relations between insurers, care providers and customers are the basis for the analysis of the situation of the Centrum Apotheek. The elements in the environment of pharmacies in general that are of influence on the relation with the customer will be applied on the situation of the Centrum Apotheek. The elements of market, mission, medical specialists and medical technology can influence the way an organization handles the need for care of the customer. The stakeholder analysis shows the stakeholders that are relevant for the organization. It shows the influence of the stakeholders with the possession of the attributes power, legitimacy and urgency. The strengths and weaknesses of the organization can be combined with the possibilities and threats in the environment and create possible strategies.

These techniques create an overview of the organization and its environment. With a good overview it is easier to find a good answer on the question how to react on the changes in the environment. With the techniques mentioned above, the changes in pharmacies, the role of the Centrum Apotheek and the possibilities for the Centrum Apotheek to react on the changes in pharmacy will be assessed and discussed in the next chapter.

3 The Centrum Apotheek and its environment

In this chapter the methods in the previous chapter will be applied to the changes in pharmacy and the situation of the Centrum Apotheek. These analyses should provide the answer on the sub questions “What are the changes in the environment of pharmacies?”, “What is the environment of Centrum Apotheek Enschede?” and “What can the Centrum Apotheek Enschede do in reaction to the changes in pharmacy?”. Each method applied in this chapter on the situation of the Centrum Apotheek should provide extra information on the influences and relations in the environment of the Centrum Apotheek. With this information a model of the environment is created, and at the end of each paragraph the results of the analyses are added to this model (in a different color), resulting in a complete model at the end of the chapter.

3.1 Three markets model

The three markets model of Van Montfort (1997) describes the three markets in health care. As described in the introduction, the motive for the research is to offer care and service adapted to the wishes of the customers. This is a problem that is to be found on the care provision market. Because of the recent changes, the care provider will have to adapt to the (changing) wishes of the customer. The focus of this research will therefore be on the care provision market. The three market model is used as a basis to describe the relations in health care and the elements that are of influence on the actors and the relations in the markets

The care provision market is the relation between pharmacies and the customers. The goods that are traded on this market are medicines (on prescription and OTC products), services and information. The individual character of the market means that anyone who needs the goods can go to any pharmacy at any time (no specific time or place), the products are generally the same and the market is regulated by the government, which makes it moderately organized. As mentioned before, opening hours are important for choosing a pharmacy. The Centrum Apotheek is the only pharmacy in Enschede that is always opened, which could be a possibility to distinguish the pharmacy.

Insurers have influence on both parties, for example by nominating preferred pharmacies (Zorgplanet, 2005). In spite of the preference insurers have of pharmacies, anyone is allowed to go to any pharmacy he or she wants. Therefore there is competition possible between the various pharmacies. The pharmacies in Enschede are the competitors of the Centrum Apotheek, but at the same time the shareholders of the organization. This makes it a difficult position.

Figure 5 shows the relation between the actors on the market. The chain of care providers is also displayed in the figure, showing pharmacies as a group of care providers and with the focus on the Centrum Apotheek. The most important actors of the three markets model -the Centrum Apotheek Enschede, the customers and the insurers- are shown in red.

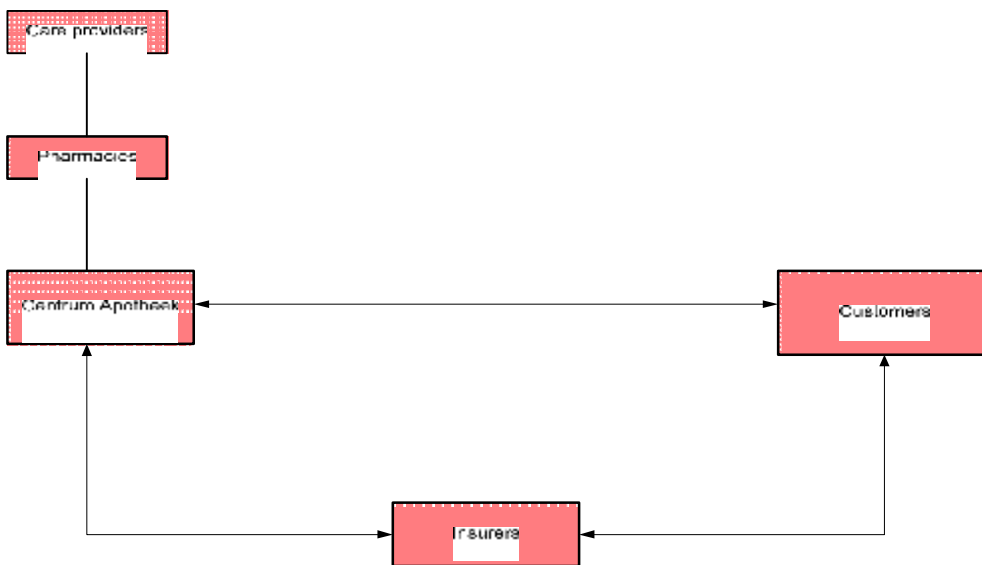


Figure 5 Environment Centrum Apotheek

3.2 PEST analysis

As described in the previous chapter, the PEST analysis is an exploration of the future. Because the changes are on a macro level, these changes are relevant for all pharmacies. Only the four main categories are used; most categories can be merged with one of the main categories (such as legislation and political) and the use of only four categories makes it more clear. Also some common reactions on the trends are described.

Political changes

The political trends in pharmacy are the increasing competition between pharmacies, increasing attention for prevention and the changing legislation.

Competition

A tendency that can be seen in politics is that the government is decreasing their influence in the area of healthcare (Van der Kruijs & Den Engelsen, 2007). An important step in this process is the liberalization of the pharmacy market in 1999, which resulted in a free entrance of the market (KNMP, 2006). This has had as a consequence that in 2005 the percentage pharmacies owned by a pharmacist decreased from 77% to 70% (Stichting Farmaceutische Kengetallen [SFK], 2006). Wholesale trade chains enlarged their market share by buying pharmacies and drugstores (SFK, 2006). In 2005 there has been the largest growth ever in number of pharmacies (KNMP, 2006); from 1732 to 1784 pharmacies at the end of 2005 (SFK, 2006). This increasing competition has as a consequence that colleagues now have become competitors. Cooperation on the other hand is also necessary. To guarantee safe medicine use, there has to be more coordination between pharmacies (and other caregivers) to optimize care, for example by exchanging medication history of patients. This trend is relevant for the Centrum Apotheek, because the relation with the shareholders. As described in the introduction the shareholders are the owners as well as the competitors of the Centrum Apotheek. This trend increases the competition between these actors. This is a relevant trend that is likely to influencing the Centrum Apotheek.

Prevention

The increasing importance of prevention is also a political trend (MinVWS, 2006; Van der Kruijs & Den Engelsen, 2007). The government emphasizes the importance of prevention and develops and implements the policy for prevention. Important points of attention in prevention are smoking, depressions, obesitas, diabetes and alcohol use (up to 2010). Pharmacies already offer some prevention activities, for example blood sugar tests and cholesterol tests. The relationship between pharmacists and general practitioners is getting more competitive because of this development; general practitioners think self-tests should be conducted only by general practitioners (Landelijke Huisartsen Vereniging, n.d.). In contrast, pharmacists think the pharmacy is a good place because they are more easily accessible (Bolt, 2007).

Changing legislation

As shown in the three markets model, the government has influence on health care. In pharmacy, legislation has recently changed; the most important changes seem to be the introduction of the 'Geneesmiddelenwet' and the introduction of pharmacists in the WGBO. In literature, these changes get very much attention and therefore is focused on these laws.

The 'Geneesmiddelenwet' has become effective on July 1st 2007, which had some consequences (MinVWS, n.d.). This is a 'product law': it does not state how a pharmacist should do his work, there are less licenses and it decreases administrative burden. The 'Geneesmiddelenwet' also divides the over-the-counter medicines in three groups and determines where each group can be sold ('general sales', 'pharmacies & chemists' and 'pharmacies only'). The selling of specific medicines in any store (for example gas stations and supermarkets) could cause extra competition, but this is expected to be minimal because of the limited number of medicines and the fact that these medications already were bought at chemists out of convenience (Duchateau, Peters & Van der Veer, 2005). This law makes clear the pharmacist is seen as a care provider (Pharmaceutisch Weekblad, 2007). The 'Geneesmiddelenwet' was introduced at the same time with the registry of the profession of pharmacist in the 'Wet op geneeskundige behandelingsovereenkomst' (WGBO). In this law the rights and duties of the pharmacist and the patient are defined. The pharmacist and patient make an agreement about the treatment, this can be for a single delivery or a complete treatment (Rendering, 2007). Also the pharmacist is obliged to give information (e.g. on side effects), keep a file about a patient with all relevant information of a treatment and guarantee the patient's privacy. It is said that pharmacies that work according the Nederlandse Apotheek Norm, such as the Centrum Apotheek, already comply with the WGBO (KNMP, 2007b). Pharmacies are affected by this measure because they have to adapt their method of work. The 'Geneesmiddelenwet' could increase the competition for the Centrum Apotheek. Because some medicines are allowed to be sold in any store, the competition of the stores in the centre of Enschede could increase.

Economic changes

The costs of health care and medicines are increasing. In 2005 the costs of medicine has increased with 4,6% in comparison with 2004 (SFK, 2006). This is caused by the growth and the aging of the population. Table 1 shows the increase in medicine costs since 2001.

Table 2 Increase in medicine costs (SFK, n.d.)

Year	Percentage cost increase	Total costs
2007	3,8%	€ 4.302.000.000
2005	4,6%	€ 4.045.000.000
2003	7,2%	€ 3.967.000.000
2001	10,6%	€ 3.419.000.000

To prevent an enormous increase in expenses, the government tries to limit this growth by making agreements with parties like KNMP and Zorgverzekeraars Nederland. Elements of this agreement are the substitution of expensive medicines by generic medicines and the prices of this medication. Without this and other measures the costs would have increased by 11%. The focus of the government is shifting more from containing costs to quality management, innovation and the role of the patient (Van der Kruijs & Den Engelsen, 2007). This can also be seen in the agreement; it also introduced a new tariff system, in stead of the fee per recipe ('receptregelvergoeding'). This new system (delayed until July 1st 2008) should provide more stimuli for pharmacies to deliver qualitative good care and innovation. The new system makes a distinction between basic performance and additional performances (MinVWS, 2007). The tariff distinguishes six modules: first distribution, repeated distribution, ANZ distribution (outside regular opening hours), week distribution, magistral preparation and special magistral preparation (FarmaActueel, 2007). All these modules have a different fee.

Social changes

Social trends are changes in the behavior of the (health care) consumer, internationalization, and the changing composition of the population.

Changing customer

The consumer of health care is changing in more than one way. Customers are more and more aware of the options they have in choosing their health care provider. There is more choice and it is increasingly possible to get a clear view on the achievements of a care provider (Van der Kruijs & Den Engelsen, 2007). This claim of the right of self-determination is made increasingly since the seventies and will continue. Possible causes for this are a higher education level, an increasing knowledge of patient-rights and more available information via the internet (Sociaal en Cultureel Planbureau [SCP], 2004). But the customer is not only aware of the possibility of choosing a care provider, also the assertiveness of customers is increasing (Van der Kruijs & Den Engelsen, 2007; Oyen & De Schuyteneer, 2002; Feenstra, Cavalini & Georgopoulos, 2007). This means that the customer will expect more of a care provider and this will change the relationship between provider and customer (Feenstra et al., 2007).

Internationalization

The ongoing internationalization mainly increases competition for pharmacies (Van der Kruijs & Den Engelsen, 2007). European legislation eliminates differences between countries (for example leveling of prices and education standards). The new 'Geneesmiddelenwet' is already adapted to European legislation. This will make it easier to cross borders and sell your services elsewhere. For customers it means that it will increasingly be possible to cross borders for getting the health care they want.

Pharmacies at the border already have customers from the neighboring countries (Bolt, 2008). This shows it is a relevant trend for the Centrum Apotheek.

Changing population

Another social trend is the changing of the composition of the population. This change is twofold: the obsolescence and the coloring of the population. The process of obsolescence will have reached in 2020 the point that the amount of people over 65 will have increased by 50% (Timmermans & Woittiez, 2004) to 19% of the population (SFK, 2006) and in 2038 almost a quarter of the population will be 65 years or older (Van der Kruijs & Den Engelsen, 2007). People over 65 use three to four times more medicines than younger people, and the use of medicine is also more chronic. The trend of coloration delays the trend of obsolescence; one out of three non-western immigrants is younger than twenty (Centraal Bureau voor de Statistiek [CBS], 2007). The increase of immigrants has not only implications for the obsolescence, but also for the health care. There are differences between groups in the need for care, the diseases they have and the care they use (Westert & Verkleij, 2006a). Medicine use is lower for Moroccans and Turks than for Dutch people. The immigration of other cultures also creates specific problems. An example is medicine use during the Ramadan; because Muslims are expected to fast, this could create problems in medicine use and asks for specific information (KNMP, 2007c).

Technological changes

Two sorts of technical developments can be seen, the improving (medical) technology and the possibilities created by this, and the internet and the consequences of its increasing influence.

Improving technology

Overall, technology is improving and different areas of technology (for example biotechnology) can be linked to invent new technologies (Ginter, Swayne & Duncan, 2002). For pharmacy, the improving technology can help by adapting medicine therapy to the individual needs, which results in complex medicines (Van der Kruijs & Den Engelsen, 2007). The use of systems like the electronic patient file makes information available fast and contributes to medication loyalty.

Internet

The internet has a significant influence on the practice of pharmacists. This influence is twofold. First, internet pharmacy is rising and this creates important competitors. Not only Over-The-Counter medicines (OTC's) are available, also medicines with prescription can be purchased online. It is expected that the market share will be 10% in 2010 (Van der Kruijs & Den Engelsen, 2007). Internet pharmacies are however not undisputed, they are often said to be too expensive and slow (Consumentenbond, 2007). Customers also seem to prefer the 'regular' pharmacy over internet pharmacies (Duchateau, Peters & Van der Veer, 2005; Pharmaceutisch Weekblad, 2006b). Second, on the internet is also a lot of information available on diseases, medicines and experiences of patients with health providers. This has as a result that people are more informed and diagnosing yourself becomes more common for patients. Because of this the relation between patient and physician will be more equal and patients will be more assertive (Feenstra et al, 2007; Pharmaceutisch Weekblad, 2000). People that have sought the internet for information, tend to check this information with their general practitioner or physician (Eysenbach & Köhler, 2002).

Conclusions PEST

The analysis shows the answer on the second sub question. Some changes have comparable effects and can therefore be summarized in a few main trends:

- The increasing competition, caused by the increasing number of (internet-) pharmacies, the introduction of the Geneesmiddelenwet and the internationalization.
- The shift from medicine provider to care provider, caused by the introduction in the WGBO, the increasing competition, a new tariff system.
- An increasing need for information, caused by the changing customer and the rise of internet.

These trends provide the answer on the question “What are the changes in the environment of pharmacies?”.

The results of the PEST analysis are added to the model of the environment of the Centrum Apotheek. The trends that are of influence on the relations in the environment are shown in green boxes. This can be seen in figure 6.

The legislation has an effect on all pharmacies and on the relation between the Centrum Apotheek and the pharmacies in Enschede, because of the increased competition. The increasing competition is a trend as well as an effect of other trends, such as the legislation. The changing customer influences another important actor in the environment of the Centrum Apotheek. Because of the higher demands of the customer and increasing assertiveness, this change could have consequences for the relation between the Centrum Apotheek and the customer. The changing population influences the customer. The customer becomes different one, with a different need for care. The internet increases the competition by the rise of internet pharmacy, but also the assertive customer. By making information easy accessible, the customer becomes more active.

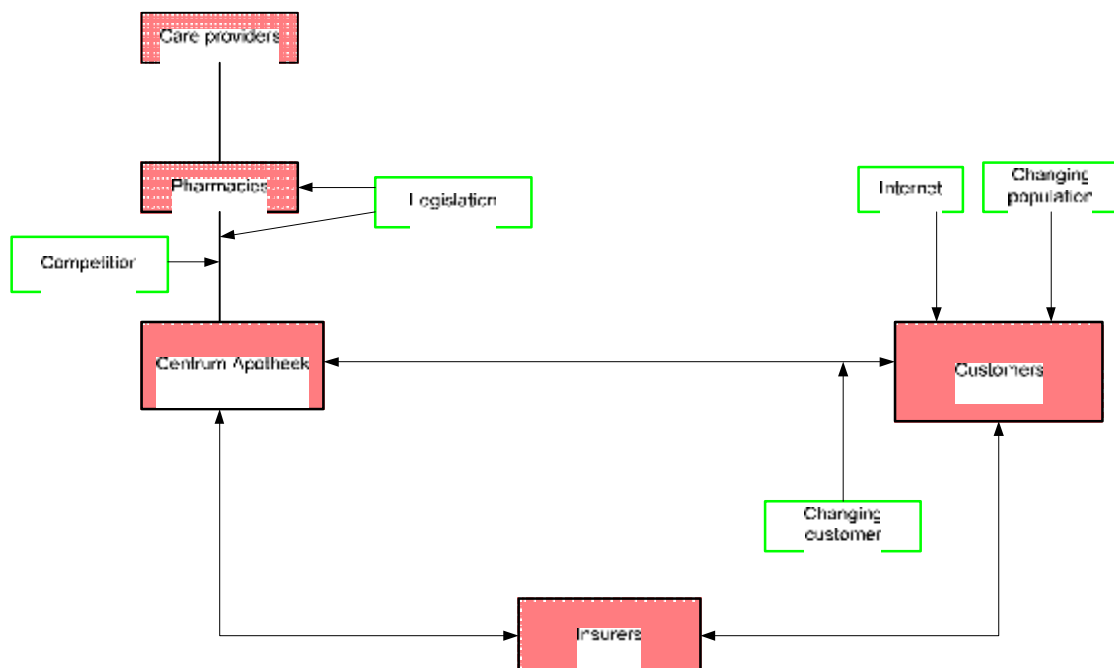


Figure 6 Environment with PEST influences

3.3 7M model

The 7M model, described in the previous chapter, is adapted to describe the situation of the Centrum Apotheek. The elements that are of influence on the relation between Centrum Apotheek and its customer are market, mission, medical specialists and medical technology. These are applied on the situation of the Centrum Apotheek. The mission, medical specialists and medical technology can define the way the organization handles the need for care of the market (Bijker, 2007).

Market

The market on which this research focuses is the market between a care provider, in this case the Centrum Apotheek, and the customer. This market is becoming more competitive because of the increasing offer of care providers (more pharmacies, internet pharmacies, international competition). The customer is getting more mobile, assertive and critical on the care provider (Van der Kruijs & Den Engelsen, 2007; Bijker, 2007). The role of the customer is shifting from passive to active, which shows the increasing importance of meeting the customers' expectations. The care provision market becomes more demand centered (in stead of supply centered). What this market looks like for the Centrum Apotheek shows partly from the research of Duchateau, Peters & Van der Veer (2005). The research shows people are satisfied with the care provided in the region of Twente, especially with the pharmacists. The customers of pharmacies in Twente think a quick, discrete distribution, friendliness of the staff and good information are important and they are satisfied with this. The largest competition seems to be the chemist and the need for internet services is low. The research of Duchateau, Peters & Van der Veer (2005) is focused on the satisfaction of customers and provides little information that is useful for creating a strategy, because of the long term character of a strategy. Trends such as prevention are however not surveyed in this research.

Mission/vision

The mission statement plays an important role in this strategic planning process. To be able to give direction to the organization, the mission statement should be measurable, be unique in some way, relevant to all stakeholders, it should be daring and motivating and be broadly accepted by the board (Botter, Fisscher & Boer, 1994). The mission should also contain the sustainable competitive advantage of the organization.

The mission of the Centrum Apotheek is to optimize the pharmaceutical care, adapted to the wishes of the patient. The goal is to optimize the patient care, health and quality of life of the patient. In this mission the patient is said to be the most important actor (consistent with the increasing importance of the customer in the market) and the actions of the Centrum Apotheek should therefore be consistent with this mission, which means that the actions of the Centrum Apotheek should always be in the advantage of the patient. The sustainable competitive advantage is not well formulated in this mission; the distinguishing aspect such as being always open is not made clear in this mission.

Medical specialist

The medical specialists play an important role in the primary process (Bijker, 2007). The specialist should act in this contact in consistence with the goals of the organization. The Centrum Apotheek has the pharmacy's assistants and the pharmacists as medical specialists. In the contact with the customer and the distribution of medicines the mission (optimizing pharmaceutical care, adapted to

the wishes of the customer) should be the central. The research of Duchateau, Peters & Van der Veer (2005), although not performed specifically for the Centrum Apotheek, seems to imply pharmacies meet the wishes of the customer.

Medical technology

This factor is more relevant for a hospital, where technology is more common and needed than in a pharmacy. But, as shown from the technological trends in the PEST analysis, it is not a redundant factor and it has influence on the functioning of the pharmacy. The improving technology leads to complex medicines, electronic patient files and the use of internet. In the Centrum Apotheek is a possibility for the customers to use the internet. Also the website of the Centrum Apotheek offers various possibilities, such as health information and the handing in of prescriptions.

Medical technology could also be used to support the primary process. The research of Duchateau, Peters & Van der Veer (2005) showed customers think friendliness is important. In order to create more time for the customer and create more time to give information, a robot that delivers medicines could help. The delivering of medicines is faster (a reduction of about one minute per prescription). The medicines can be delivered at the desk, which creates less need to walk for the assistants (KennisCentrum Robotisering, 2007). This could create more time at the service desk to help people or simply speed up the process of medicine distribution. In this way the technology can be used in line with the mission of the organization.

Conclusions 7M model

The 7M model describes the functioning of the Centrum Apotheek. The market and the mission of an organization are very important; the market should determine the product and service offer and the mission should be central in the actions of the organizations. In the mission of the Centrum Apotheek the customer has a central position, also reflecting the importance of the market. Because all the other elements should be consistent with each other, the importance of the (wishes of the) customer is reflected in all the elements of the model.

The important factors of mission and market are added to the model in figure 7. The influences are shown in blue boxes. The market is in this case the care provision market, as said in paragraph 3.1. The mission influences the way the organization reacts on changes in the market, it describes how organizations should react. The mission of the Centrum Apotheek confirms the focus on the care provision market. Medical technology can be used to emphasize the mission, such as the robot. It could be used to create more time at the desk or to speed up the medicine distribution. The medical specialists are part of the Centrum Apotheek and are therefore added to the box of the Centrum Apotheek.

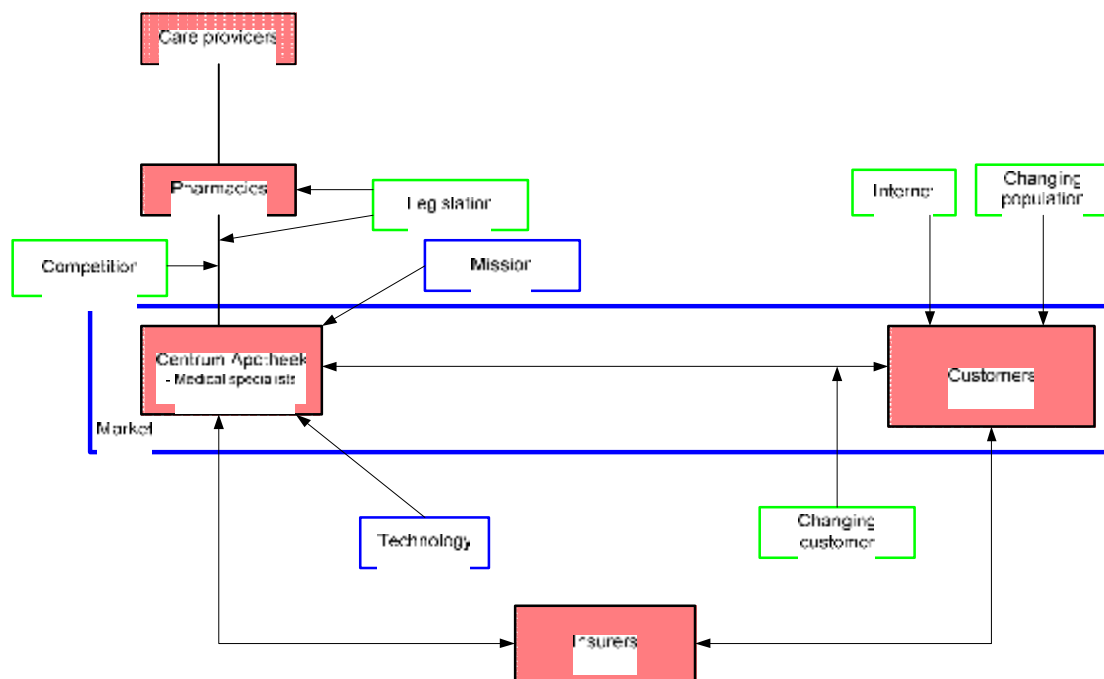


Figure 7 Environment with 7 M elements

3.4 Stakeholder analysis

The stakeholder analysis provides more insight in the parties that (can) influence or are influenced by the Centrum Apotheek. This results in a better understanding of the functioning of the organization. A first step is to map the internal and external stakeholders of an organization (Oyen & de Schuyteneer, 2002). This is done to make an inventory of the stakeholders that might be relevant for the Centrum Apotheek. This map can be seen in figure 8. Almost all the groups in the model are already mentioned. The customers, government and the insurers showed already to be important in the description of the market with the three markets model. The customer is in the middle of the model because this is the actor with the request for care. The role and importance of the medical specialists and the shareholders/pharmacies are described in the previous paragraph. The relation with the Medisch Spectrum Twente is mentioned in the introduction. The cooperation between the MST en the Centrum Apotheek is (partly) created by the location of the Centrum Apotheek. Also important in the environment of the Centrum Apotheek are the general practitioners in Enschede. This group is important in the referral of patients and the consultations between care providers in the city. The pharmaceuticals are another group in the social map of the Centrum Apotheek; they provide the goods that are traded in the care provision market. The Koninklijke Nederlandse Maatschappij ter bevordering der Pharmacie is the association for pharmacists and has the possibility to influence the (environment of the) Centrum Apotheek.

The stakeholders will be matched with the criteria from Mitchell, Agle & Wood (1997) to determine their possession of the attributes power, legitimacy and urgency, the influence on the organization and the attention they should get.

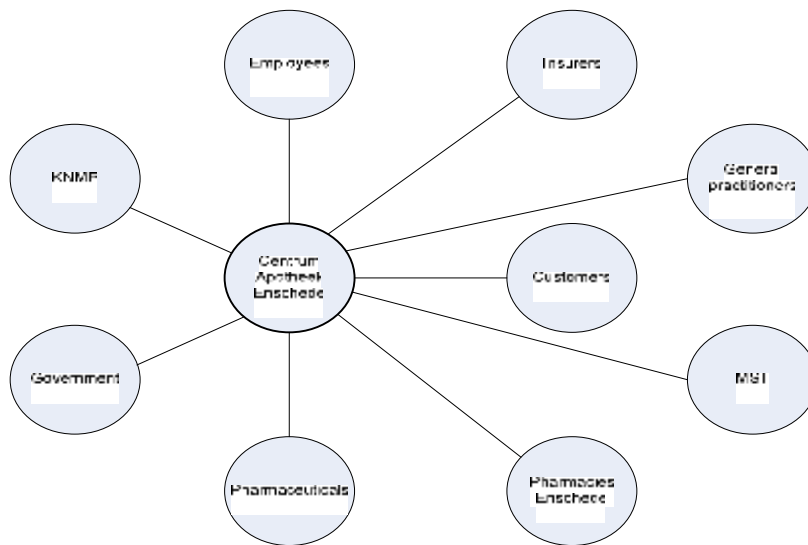


Figure 8 social map of the Centrum Apotheek

Customers

In this research, the customers of the Centrum Apotheek are considered as the individuals entering the pharmacy when needing medicine. However, the institutions the Centrum Apotheek provides the medication for are also customers. As stated before, the customer the customer decides which pharmacy he goes and should therefore be persuaded to come to the Centrum Apotheek. The criteria on how to choose a pharmacy have already been discussed shortly (paragraph 2.2) and because of the increasing competition it is getting even more important that the customers' wishes are met. This shows the customer has the attribute of power. The request for care is also legitimate, because it is a generalized perception that one should go to a pharmacy for his or her medicines. The need for care is also urgent; it meets the two conditions (time sensitivity and criticality) for an urgent claim. If the customer doesn't get the attention he wants, the customer will find this unacceptable and he will go to another pharmacy (time sensitivity) (Van der Krujjs & Den Engelsen, 2007). The claim is also important for the stakeholder, in the way that he wants his medicines (expectation). But if this claim does not get any attention, he will go to another pharmacy (criticality). Therefore the relation with the Centrum Apotheek is critical.

Customers possess all three attributes and are therefore definitive stakeholders.

Insurers

Pharmacies are dependent on insurers for a (large) part of their financial resources (the financial market). In this way they do have power over pharmacies. In the new care system the control on the market has shifted more from the government to the insurers. The influence on pharmacy is however not very different from the agreements made together earlier (Varkevisser & Van der Geest, 2006). The relationship between an insurer and a pharmacy is therefore legitimate, they have a contractual relationship.

Because of the legitimacy of the claim and the power they have over the organization, insurers are a dominant stakeholder.

General practitioners

Because of the central position of the Centrum Apotheek, the customers of the Centrum Apotheek are from various general practitioners in the city.

The relationship between pharmacies and general practitioners (GP's) is legitimate, because of their professional relation in the care process. An example is pharmacotherapy consultation, the meetings of pharmacists and GP's to improve the quality and safety of medicines distribution (Westert & Verkleij, 2006b). The general practitioners also have a certain amount of power, because they can advise patients to go to a certain pharmacy. This power is limited, because of the free choice of the patients and because the Centrum Apotheek is not dependent of a general practitioner.

Because of this limited power and the legitimacy of the relationship, the general practitioners can be seen as both a dominant or discretionary stakeholder.

Medisch Spectrum Twente (MST)

The general hospital Medisch Spectrum Twente has a double role. The Centrum Apotheek receives a certain amount of prescriptions from medical specialists. On the other hand, the Centrum Apotheek provides a part of the medication after the release from the MST. There is a certain power over the Centrum Apotheek, because of the financial means received for the prescriptions handled. This is also a legitimate relationship, based upon the agreements the MST and the CAE made on, for example, the release medication. This mutual dependency becomes is over if the MST opens its own pharmacy. In that case, the close location to the MST will be a disadvantage, but the location near the centre will probably still offer enough opportunities.

The two attributes of legitimacy and power make the MST a dominant stakeholder.

Pharmacies Enschede (shareholders)

As said before, all pharmacies are (or can be) shareholders of the Centrum Apotheek. This means the pharmacies are colleagues and competitors. This difficult position has as a disadvantage that the options for the Centrum Apotheek are limited. Because the shareholders are also competitors of the Centrum Apotheek, it can therefore be expected that not all strategic options are appreciated. The shareholders are able to influence the organization and possess legitimacy based on a legal right. Because of the legal right the pharmacies have, they also have the power to lay their will on the organization. This gives them power as well as legitimacy. The conditions for criticality are met; the relationship is important to the stakeholder because of its ownership. Furthermore it is a time-sensitive claim, if they have a claim on the Centrum Apotheek, and it is not handled in time, it would be not acceptable for the stakeholder. Therefore the conditions for urgency are met too.

The other pharmacies in Enschede possess all three attributes and are therefore definitive stakeholders.

Pharmaceuticals

The pharmaceuticals deliver the medicines and other products for pharmacies and have therefore control over the resources of the Centrum Apotheek, the goods of the market. The pharmaceuticals

also have extra power because of the negotiations pharmacists have on purchase margins. This is both a form of utilitarian power (material or financial resources) pharmaceuticals have over pharmacies. Because this is all arranged in a contract, they have also legitimacy based on a contract. As said before the most common way to become a definitive stakeholder, is for a dominant stakeholder to acquire the third attribute. This could happen if a pharmaceutical buys a pharmacy. This is however not the case with the Centrum Apotheek, but it could be an example of the dynamics of the relation between stakeholders and organization Mitchell, Agle & Wood(1997) refer to in their article.

The pharmaceuticals are a dominant stakeholder because of the possession of the two attributes power and legitimacy.

Government

The government is already mentioned in paragraph 3.1. The influence of the government on the market is important for pharmacies. The regulations of the government structure the health care sector and the profession of the pharmacist. The relation between Centrum Apotheek and government is no different than the relation between the government and another pharmacy, but it is still an important stakeholder.

The relationship of the government is legitimate. Although the government decreased its power with the introduction of the new health system, the government takes care of the boundary conditions and still has influence (Varkevisser & Van der Geest, 2006). Here, legitimacy and power form authority; it is safe to say that the government has authority over pharmacies. A claim from the government is a time-sensitive one; it is generally not accepted to ignore such a claim. Also criticality is of importance; the relationship (with pharmacies in general) is seen as important to the government, because of their function in the health system.

With the possession of three attributes, the government is a definitive stakeholder.

KNMP

The KNMP is the Koninklijke Nederlandse Maatschappij ter bevordering der Pharmacie, the official association of the profession. Both pharmacists of the Centrum Apotheek are registered with the KNMP. Being their formal representative, the KNMP has a legitimate relation. The KNMP has also normative power over pharmacies, because they have the power to influence the media. An example is the advertising campaign "medicijnen werken beter dankzij uw apotheker". This power could be said to be limited because it is (almost) the same for all pharmacies. However, the Centrum Apotheek, as a pharmacy with extra broad opening hours, is may be influenced more by actions of the KNMP. An example of this is the blood sugar test, for which patients asked in the evening hours.

The KNMP is a dominant / discretionary stakeholder.

Employees

The employees of the Centrum Apotheek have a legitimate claim on the organization, as they are formally connected to it with a contract. With their role in the primary contact with the customer, they are very important and possess utilitarian power over the organization. Urgency could be also an

attribute of the employees, depending on the dynamics of their relation with the Centrum Apotheek. This relation is important to them; it is their working environment. A claim is also time-sensitive, it is probably not accepted if there is no attention for their claim. All three attributes are present, which is consistent with the 7M-model in which the medical specialists are represented, mostly because of their contact with the customers.

Employees are also definitive stakeholders, possessing all three attributes.

Conclusion stakeholder analysis

This stakeholder analysis provided, together with information from the 7M model, an answer on the sub question “What is the environment of Centrum Apotheek Enschede?”. The 7M model pointed out the importance of the market in which the Centrum Apotheek is, and the importance of stakeholders such as the other pharmacies in Enschede (shareholders) and the power of other external stakeholders. This resulted in a stakeholder analysis, which showed four groups of definitive stakeholders: customers, the other pharmacies in Enschede (shareholders), the government and the employees of the Centrum Apotheek. These are the groups that are seen as most salient, and should therefore get the most attention and are most relevant when creating a strategy. The least salient are the general practitioners in Enschede and the KNMP, mostly because of their limited influence on the Centrum Apotheek itself. Insurers, the Medisch Spectrum Twente and pharmaceuticals are dominant stakeholders, and are seen to be medium salient, and deserve a moderate amount of attention.

Most important result from this analysis is the influence of the shareholders on the organizations. The most salient stakeholders are shown in the orange boxes in figure 10. The employees are the medical specialists already displayed in the box of the Centrum Apotheek.

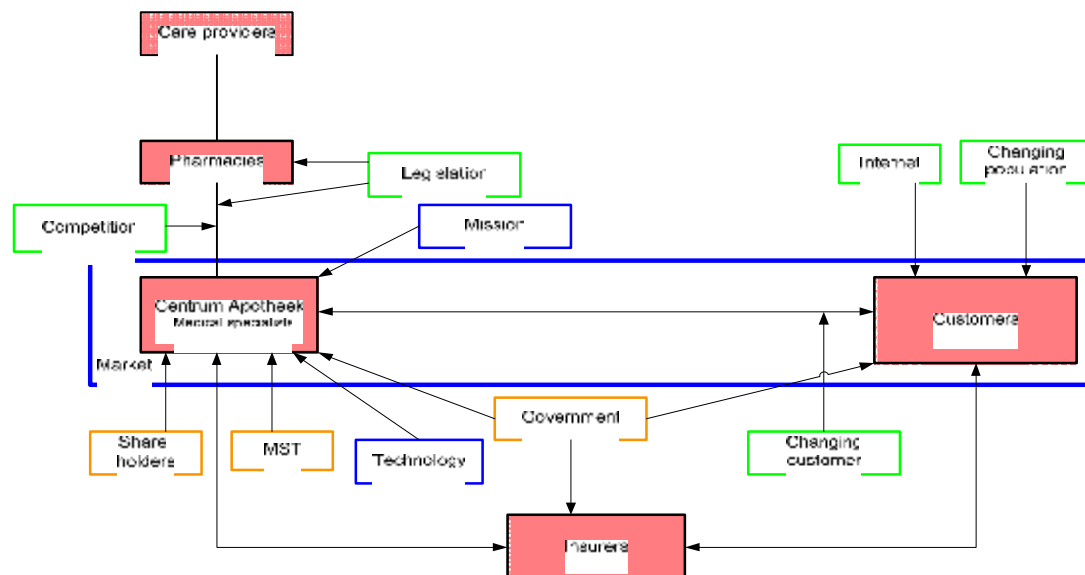


Figure 9 Environment with important stakeholders

3.5 SWOT analysis

This SWOT analysis has as a goal to give an overall picture of the things the Centrum Apotheek is (relatively) good or weak at, and the possibilities or problems they might have to face. This SWOT is conducted for the Centrum Apotheek as a whole.

Strengths and weaknesses are often opposed to each other (just like opportunities and threats). The strengths and weaknesses should be strengths and weaknesses relatively to the competition of the Centrum Apotheek, the other pharmacies in Enschede (Oyen & De Schuyteneer, 2002). These relative strengths and weaknesses can be found in table 3.

Strengths

Strengths of the Centrum Apotheek are the location; close to the centre of Enschede and the Medisch Spectrum Twente. The close location to the MST is (partly) the reason for the good relation with the MST, which resulted in a specialization in urology and IVF and the handling of the medication when leaving the hospital (as already discussed shortly in the stakeholder analysis). This results in relatively more prescriptions for medication prescribed by a specialist (in comparison with the national mean) (Centrum Apotheek Enschede, 2007).

The location close to the centre could be a reason for the high over the counter sales and the high amount of passers-by. Because this is an advantage that other pharmacies do not have, it is a relative strength could be important for a strategy.

Another unique aspect of the Centrum Apotheek is the opening hours. Opening hours were found to be an important aspect in choosing a pharmacy, although people thought there was no difference in this between pharmacies (Franic, Grauer & Law, 2005). Because the Centrum Apotheek is the only pharmacy in Enschede that is always open, this is an important strength.

Weaknesses

Weaknesses are the aspects in which the organization scores less good than the competition or threats that could hinder carrying out the mission of the organization. The Centrum Apotheek think the waiting times might be considered long by the customers. With the increasing importance for accessibility, quality and speed, this could be a weakness (Van der Kruijs & Den Engelsen, 2007).

Another weakness is the dependency of the shareholders of the Centrum Apotheek. Because of the shareholders' influence in the organization, the Centrum Apotheek is obliged to take into account the wish of the shareholders (as discussed in the stakeholder analysis) and not all strategies are possible.

The opening hours of the Centrum Apotheek are already mentioned as strength, but there is also a weakness opposed to this strength. Because the pharmacy is always open, there is the need to work unusual hours (nights or holidays). This could cause problems with filling up the hours.

Opportunities

Opportunities are mostly external and can be (partly) derived from an external analysis such as the PEST analysis in paragraph 3.1. The increasing attention for prevention, the increasing need for disease specific programs and information (specialization) and the internationalization are trends derived from the PEST analysis. These trends could be an opportunity to improve the performance of the organization.

The trend of prevention is a possibility to differentiate from the other pharmacies without hindering the interests of the shareholders. Although this is not specific for the Centrum Apotheek, it still is an opportunity. The prevention trend also implies the increasing attention for self tests and wellness products. Selling self tests and wellness could be an opportunity.

Specialization, as described in the PEST analysis could be an opportunity too. The Centrum Apotheek is already specialized in IVF and urology projects. The knowledge of these specific problems is already present and could be used to differentiate. Activities such as consulting hours can be organized.

Another relevant trend is the internationalization, the European legislation that eliminates differences between countries and thereby increases international competition. Enschede is located near the German border and already has many German customers. Possible reactions to this trend could be for example specific information or other products (Van Lingen, 2007).

Threats

The threats are increasing competition and the ending of the projects the Centrum Apotheek does for the MST. The increasing competition is also a general trend, but could be relevant for the Centrum Apotheek not only in this general way. As discussed in the stakeholder analysis, the opening of a politheek (a pharmacy in the hospital) by the MST is a threat for the Centrum Apotheek. Because of the good relation with the MST, this is a threat to the organization. With the opening of a politheek, it is possible the prescriptions and services the Centrum Apotheek handles for the MST will be done by the politheek (Centrum Apotheek Enschede, 2007). The good relation with the MST and the projects are strengths, but also a threat when this relation will end. As shown in the stakeholder analysis, the location of the Centrum Apotheek could become a disadvantage if this happens, being so close to an important competitor.

Table 3 SWOT analysis Centrum Apotheek

Strengths	Weaknesses
location close to centre	Sometimes long waiting times
Opening hours	Dependent of shareholders
Location close to MST - Good relation with MST - Urology/ IVF	Unusual working hours
Opportunities	Threats
Increasing attention prevention - Health checks - Product offering	Increasing competition
Specialization (disease specific programs and information)	MST-projects ending
Internationalization (location near German border)	

The results of the analysis are put in a SWOT interaction table (table 4). By matching the strength and weaknesses with the opportunities, the results are possible strategies that should be worth investing, defending, deciding or disinvesting.

Table 4 interaction table Centrum Apotheek

	Opportunities Prevention Specialization Internationalization	Threats Increasing competition MST project ending
Strengths Location centre Opening hours Location MST	Invest: Specialization Internationalization	Defend: Relation MST
Weaknesses Waiting times Shareholder dependency Unusual working hours	Decide: Prevention	Disinvest:

The strategies in the first cell, 'invest', are found by matching the opportunities with the strengths. The interaction table shows specialization and internationalization to be relevant trends that could be worth for the Centrum Apotheek to invest in, considering their strengths such as location and the location near the MST. The Centrum Apotheek is already specialized in prescriptions from urology, and it could be a good idea to be clear to the customers that the Apotheek has expertise on specific diseases. However, with the MST so close and the chance of a politheek opening there, it might be risky. It seems likely that a part of the customers would prefer (for special prescriptions) the politheek in stead of the Centrum Apotheek, because of the easy access and small distance. Also the shareholders are not in favor of using this as a distinguishing aspect. Therefore, is not possible to use this as a strategy, but maybe it can be used as a part of the strategy. Internationalization could be a relevant trend considering the location near the centre. There already is a reasonable amount of Germans visiting the Centrum Apotheek, so it could be an option worth investigating.

The trend of prevention should be decided on, considering the high workload and the waiting times. This could be an opportunity, but if prevention activities are implemented it may increase waiting times or pressure on pharmacy assistants. The advantages and disadvantages (costs, workload) should be researched and weighed.

The cell 'defend' contains the relation with the MST. It was shown to be important from the stakeholder and SWOT analysis. The relation between the MST and the Centrum Apotheek results in a certain amount of work and financial means and is therefore valuable to the Centrum Apotheek. The location near the MST and the threat of the ending of the MST projects lead to the advice of defending that aspect.

Conclusions SWOT analysis

This analysis should provide an answer on the sub question: “what can the Centrum Apotheek do in reaction to these changes?”. The Centrum Apotheek could invest in the strategies of specialization and internationalization, and should decide on the trend of prevention. The relation with the MST should be hold on to.

The results of the SWOT analysis, which are of influence on the relation between the Centrum Apotheek and the customers, are in the purple boxes in figure 11. The opening hours and the location near the centre of Enschede are strengths of the Centrum Apotheek. The relation with the MST is also a strength, but the MST is already represented in the model and therefore not marked purple.

This model shows the environment of the Centrum Apotheek, with the trends that are of influence on the organization or the relation with the customer, important elements in the organization, stakeholders that are important for the Centrum Apotheek and strengths of the organization.

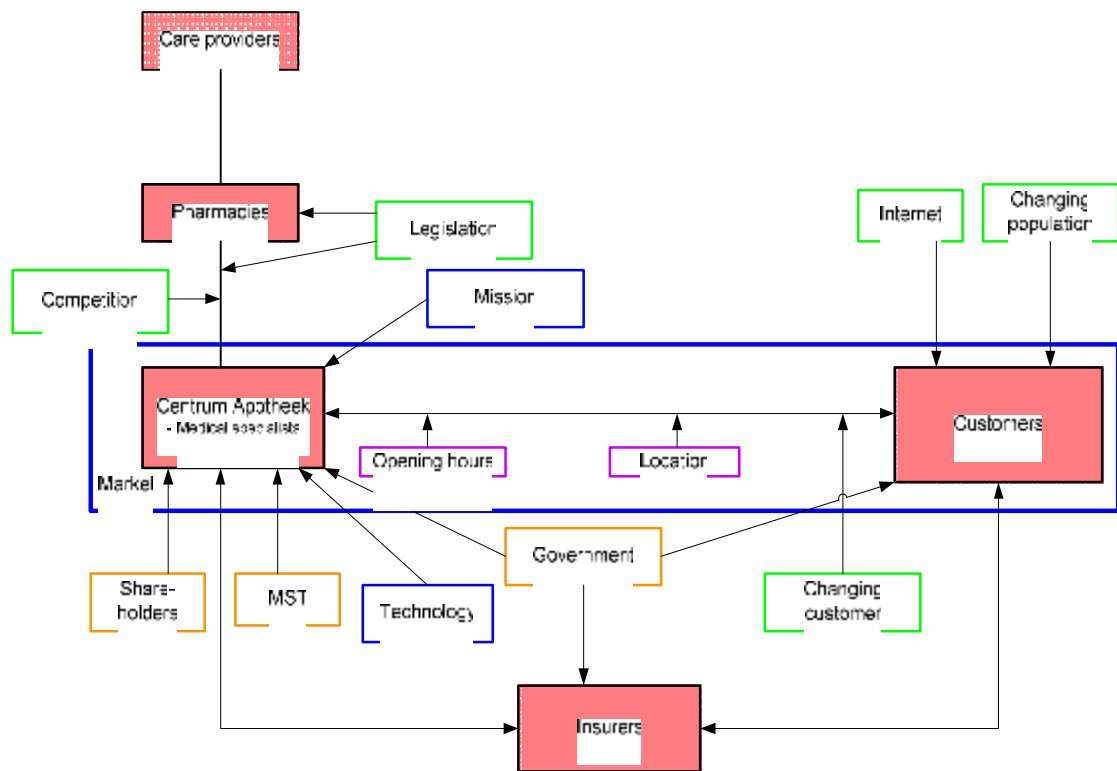


Figure 10 Environment of Centrum Apotheek with all influences

4. Survey

The previous chapter assessed the situation in pharmacy and the environment of the Centrum Apotheek. The PEST analysis provides an overview of the changes in pharmacy. The 7M model, the stakeholder analysis and SWOT analysis gave an idea of how the environment and the current situation of the Centrum Apotheek are. These analyses also made clear that an organization has to take into account their environment while making a strategy. In the organization's environment the customer plays an important role as is mentioned frequently in the previous chapter. According to Bijker (2007) organizations should not only provide the services they are good at, but also what the customer wants. It is likely the changing customer has changing wishes.

As shown from the analyses in the previous chapter, the wishes of the customer are important to know and to meet. The question is what the customers of the Centrum Apotheek think of these reactions and if these reactions fit the needs of the customers. The changes create the need for pharmacists to adapt themselves and to evaluate their role. It is often heard that pharmacists are too passive and need to react on the changes now (Pharmaceutisch Weekblad, 2006a). Pharmacies need to make sure their clientele will continue to come. Therefore pharmacies need insight in the factors that play a role in the decision of pharmacy patronage. In this way it is possible to create a long term strategy, fit to the wishes of the customers and the strengths and weaknesses of the organization. Xu (2002) describes research, dated from the 60's and 70's, of why people choose a certain pharmacy. The factors mentioned are: liking the pharmacist, the parking availability, price and a short waiting time. Service has become more important for the provider of care (Xu, 2002). Franic, Grauer & Law (2005) also did research on these factors. In their research they made the distinction between important factors and factors that differ in the customer's perception using the determinant attribute approach. According to this approach, there is no point in using a factor in a (marketing) strategy if the customer thinks there is no difference in this between pharmacies. This is consistent with the literature on strategic management that an organization should distinguish itself from other organization with a sustainable competitive advantage.

The relevant factors they discovered are:

- the pharmacist competence
- the setup of a pharmacy (chain or independent)
- customer service
- convenience
- friendliness

Also important, but perceived as less diverse and therefore as less important for a strategy are:

- insurance coverage
- location
- opening hours

Limitations of these researches are that they are conducted in an American community and the results of Xu's research could be dated. It is unclear which factors are important for Dutch customers and what the exact influence of the trends described in the previous chapter is.

It is important to know the wishes of the customer. It is however not completely clear what the customer wants or how the customer reacts on the trends described in the PEST analysis. This leads to the construction of a survey that will research the wishes of the customer.

4.1 Construction of the survey

The PEST analysis described the general changes. Some of these trends are not well applicable to the situation of the Centrum Apotheek, other are very useful considering its strengths and weaknesses. From literature show some common reactions on the PEST trends. The hypothesis is that these reactions are consistent with the wishes and expectations of the customer. The results of the PEST analysis are described below and used for the construction of the survey.

Competition

The increased competition creates the need for established pharmacists to clarify their added value to their clients (Van der Kruijs & Den Engelsen, 2007). If the client's needs are not satisfied, the customer will go to another pharmacy (Van der Kruijs & Den Engelsen, 2007). Possible reactions on this trend are focussing on service and quality, which can be seen in the shift from medicine distribution to service and care provider. An example of this strategy is the pharmacy 'Pillen en praten' where service is an important product. Other common reactions on this trend are improving accessibility and speed and offering extra services. Another reaction on this trend is joining a chain. Advantages are a clear strategy and a reputation throughout the country. The pharmacists receive support from the organisation by the management of his pharmacy, and the customer sees a recognizable formula.

Reactions: 1. Service (e.g. medication reviews)

2. Setup (independent/chain)

3. Accessibility

4. Quality

5. Speed

Prevention: The subject of prevention is a growing subject in pharmacy and the attention of the customer for prevention and wellness (physical and mental health) is also increasing. There is increasing attention for self tests and health checks.

Reactions: 6. Tests/health checks

7. Prevention on smoking, depressions, obesitas, diabetes, alcohol use

8. Wellness products

Changing legislation: The introduction of the 'Geneesmiddelenwet' increases competition for pharmacies, because there is an increase of places where certain medicines are allowed to be sold. The WGBO has a limited impact on the functioning of the Centrum Apotheek, because it already works according the NAN.

Reactions: 9. WGBO

10. Competition

Tariff system

The change of tariff system is a given fact and the only reaction is to adapt the different way of calculating the costs.

Changing customer: This trend is more relevant for care providers than for customers, because it influences the way the Centrum Apotheek should treat the customer. Customers have an increasing need of information on performance of caregivers and general health-related information. Both can be provided by the Centrum Apotheek. They can be a portal to the enormous amount of health-related

information on the internet. Furthermore, because the customer is getting more mobile he will switch pharmacies more (Van der Kruijs & Den Engelsen, 2007; MinVWS, 2004). Communication and coordination is therefore needed between pharmacies to guarantee good care and safe medicine use (Van der Kruijs & Den Engelsen, 2007).

Reactions: 12. Information on health

13. Coordination and communication between care providers

Internationalization: The ongoing internationalisation mainly increases competition for pharmacies (Van der Kruijs & Den Engelsen, 2007). European legislation eliminates differences between countries (for example levelling of prices and education standards). The new 'Geneesmiddelenwet' is already adapted to European legislation. This will make it easier to cross borders and sell your services elsewhere. For customers it means that it will increasingly be possible to cross borders for getting the health care they want. Pharmacies at the border already have customers from the neighbouring countries (Bolt, 2008).

Reactions: 14. Competition

Changing population: The changing population is too a trend that mainly affects pharmacies, because customers will need different information. A reaction on this trend is to create programs for certain diseases with a focus on therapy loyalty. This could be done in combination with other caregivers. Also information to certain groups could be a useful addition to the given service, for example programs (or conversations with patients) on how to deal with medicine use during Ramadan.

Reactions: 15. Disease specific programs or information

Improving technology: The development of new complex medicines will result in a complex profession (Van der Kruijs & Den Engelsen, 2007). Pharmacists should make a choice between being a specialist on a certain area or a generalist and provide basic tasks. A specialist can focus on certain groups or diseases, a generalist can, for example expand to areas such as prevention or wellness. The rise of electronic systems can have a twofold effect. These systems take over some tasks of the pharmacists and will leave more time for care related tasks. If the systems also take over the care related tasks, the pharmacists has to prove its extra value

Reactions: 16. Specialist/generalist

Internet: The increasing importance of the internet creates the need for a different approach to the customer. It becomes more important for care providers to create a dialogue, for example by using the internet as a communication tool and the offering of reliable health information (Pharmaceutisch Weekblad, 2000).

Reactions: 17. Internet pharmacies competition

18. Communication with customer

19. Information on health subjects

20. Internet as a communication tool

Because only the strategies that influence the customer are relevant, not all trends and consequences will be used in the survey (numbers 2 (setup), 9 (WGBO), 10 (competition), 11 (tariff system), 13 (coordination and communication between care providers), 14 (competition) and 16 (specialist/generalist). Some factors show overlaps (15+16 (disease specific programs and specialized

pharmacies), 12+19 (information on health and health subjects) and 18+20 (communication with customer and internet as communication tool) and are combined. The factors 3 (accessibility), 4 (quality), and 5 (speed) should be important for all pharmacies and are used in the question about the factors in the choice for pharmacy of customers, found at the end of the survey. A question about the wellness products (number 8) is also found at the end of the survey, in a general question about product and service range.

To create the questions the trends of the PEST analysis were the input for the questions of the survey. They were matched with the general attitude with respect to the specific trend, the need, the influence the reaction would have on the choice of pharmacy and the willingness to pay for the service. These four aspects were chosen because without a positive attitude, a need for the service, the willingness to pay for it or extra (or less, with a negative influence) customers because of a service, it is useless to offer the service. How the survey was constructed is partly to be seen in table 5 and the complete table can be found in attachment 1. The numbers behind the items are the numbers of the questions in the survey.

Table 5 Construction of the survey

	General attitude	Need	Influence on choice	Willingness to pay
1 Service	- Ik word liever snel geholpen dan dat ik extra informatie over mijn medicijnen krijg (8)	- Ik heb behoefte aan meer service van mijn apotheek (5) - Ik zou het prettig vinden om af en toe een gesprek te hebben over mijn medicatie (7)	- Ik zou eerder kiezen voor een apotheek die veel service biedt (6)	- Ik ben bereid bij te dragen in kosten voor goede service (9)
6 Tests /checks	- Preventie (bijvoorbeeld gezondheidstests of bloeddrukmetingen) is een taak van de apotheek (21)	- Ik heb behoefte aan preventie-activiteiten van mijn apotheek (22)	- Ik zou gebruik maken van preventie-activiteiten van mijn apotheek (24) -Ik zou eerder kiezen voor een apotheek die aan preventie doet dan voor een die dat niet doet (23)	- Ik ben bereid om bij te dragen in de kosten voor preventie-activiteiten (25)

The questions were put together in four segments with roughly the same content. This is done to make the survey more organized and less confusing for the respondents. A five-point scale was made for answering the items. A five-point scale was chosen, because a seven-point scale might be too complicated, but a five-point scale gives more information than a three-point scale. With a five-point scale the respondents were not forced to make a choice, as with a four or six point scale. The

questions about choosing a pharmacy, the product range and the service range were structured and factors that might be of importance were filled in, because this would increase the response on the question. The expectation was that if respondents were free to fill in their own factors, the response would be very low. Still there was left room for input from the respondents. The survey, before the pre-test, is found in attachment 2.

4.2 Pre-test

The survey was pre-tested by five respondents, all customers visiting the Centrum Apotheek. They were asked to fill in the survey and some additional questions regarding the survey itself during the time they were waiting for their medicines (attachment 3). The remarks and questions of the respondents during the filling in of the survey were noted and used as extra feedback. The results can be found in the attachment 4.

Of the pre-test respondents, one respondent was male, the other four were female. The average age of the respondents was 44,6 years old, the youngest was 20 and the oldest respondent 73 years old. Only one of the respondents was German, the other respondents had the Dutch nationality. Two said to be non-frequent visitors of a pharmacy, the other three visited a pharmacy five times or more. Because all respondents did not understand how to answer the question about the importance of factors on choosing a pharmacy (the method used by Franic, Grauer & Law (2005)), this question was altered. The part that asked about the difference between pharmacies with respect to the factors mentioned was deleted. Because one respondent did not notice the 'weet-niet'-category this was placed closer to the scale. None of the respondents had general remarks about the survey. Also none of them reported difficult words. One respondent reported difficult questions but could not exactly say which were difficult.

Using the results of the pre-test the survey was altered. The changed survey was the definitive survey and is to be found in attachment 5.

4.3 Procedure

Over 100 respondents were asked for this survey. The survey was handed out to people during their visit to the Centrum Apotheek, mostly during the waiting on their prescription. This because in most cases there is enough time to fill out the survey and there would be less reason to refuse participation. They were only asked to fill in the survey. Further introduction about the goal of the survey was given in the survey itself. The distribution is planned on weekdays and weekend days, to mix regular customers and incidental customers. In weekends the amount of passers-by is higher than on weekdays, which might have an influence on the answers. If people did not want to fill out the survey, they were asked why and this reason was noted.

The results of the survey were processed with SPSS. With this program, the descriptive statistics (age, nationality, gender, time of visit and the visiting frequency) of the respondents will be reported. The answers on the questions will be reported using frequency tables.

4.4 Results

In this chapter the results of the survey will be reported. First, the characteristics of the respondents are described. After that the correlations and frequencies of the responses are reported.

Respondents

About 115 surveys were handed out, 109 were returned of which 104 were also valid. Twenty people had no interest in participating. Eleven claimed not having time to participate, three did not feel like it, four were not able to (often because of not having reading glasses) and two because they didn't have any complaints and therefore did not see a reason to participate. Although it is very likely that not all rejections were noted, the response percentage is still very high. During regular opening hours 87 questionnaires were completed, outside regular opening times seventeen questionnaires were completed. The difference in the amount of surveys between weekdays and weekend days is because the weekends were too busy to also distribute the surveys.

Of the people filling in the survey, 36 were male (36,4%) and 63 were female (63,6%) (N= 99, missing 6). The youngest respondent was seventeen years old, the oldest respondent was 84 (N= 102, missing 3). The mean age of the respondents is 46 years old. Almost all respondents had the Dutch nationality, namely 94 people (92,2%). Besides this, other respondents had the Moroccan (one), Turkish (two), British (two) and German (one) identity. Two people did not answer the question. Most respondents were regular visitors of a pharmacy, 63,1% (65 respondents) visited a pharmacy five times or more a year. Not-frequent visitors (zero to four times a year) were 35 people.

Survey

The survey consisted of 25 questions in total. Of these 25 questions, four were about pharmacies, eight about service, eight about the internet and five about prevention. The frequencies of the answers on these questions are given in tables per subject, found in attachment 5. The total number of respondents for each question is given; the frequencies are given in valid percentages.

Pharmacy

The questions about pharmacies are about how people think about pharmacies in general. The majority of the respondents see pharmacies as the best place to receive information about their medicines, only 10,2% disagrees with this statement. As an answer on the second question, almost half of the respondents (41,5% in contrast to 31,9%) say to have a need for disease-specific information from their pharmacy. As answered on question three, little more than half of the respondents (52,1%) prefer a pharmacy that is specialized in their disease. The last question about pharmacies in general showed that most people feel discounts are no reason to change pharmacies (62,4%). One respondent reacted on the question saying that health care should be equal to all and discounts would be ridiculous. On the other hand, almost a quarter of the people (24,8%) would change pharmacies if they would get a discount (for example in cooperation with an insurer, or a system for discount on OTC-products).

The results of the survey are the same as the results of Duchateau, Peters & Van der Veer (2005) in which pharmacies have a strong position as an information supplier. The discount is no

reason to change pharmacies, which suggests that price is of not much influence for the OTC products or 'simple' medication that can be sold in drug stores. This result is contradictory with the results of the research of Duchateau, Peters & Van der Veer (2005) that showed the satisfaction with the price of pharmacies is low and the price is the main reason to purchase products at the chemist's.

Service

The questions about service discuss some options for extra services (the options resulted from the PEST analysis). Service was explained at the beginning of the sector as delivery at home or medication counseling. The answers of the respondents on question five ("Ik heb behoefte aan meer service van mijn apotheek") suggest the service level of pharmacies meets the wishes of the customer. Of the respondents, 24,7% needs more service of their pharmacy. The more service, the more the respondents prefer that pharmacy according to the results of question six; almost half of the respondents (47,5%, in contrast to 24,5% that does not) would prefer a pharmacy with more service. There was no clear answer on question seven if people would like to have a consultation about their medication; 42,9% did not see a need for this, in contrast to 38,5% that would like such a conversation. On the question if speed is more important than information only 39,4% confirmed this. Most people (47,5%) seem to find speed not very important. However, at the end of the survey, four respondents made remarks on the long waiting times. One respondent suggested informing people on why people sometimes have to wait long(er). Of the respondents, 47,8% was not willing to pay for (a part of) the costs of extra service, only 28,3% was willing to do this. The difference in opinions on question ten ("ik vind een spreekuur over bijvoorbeeld roken, alcoholgebruik of depressies bij de taken van een apotheek passen") is small (40,6% agrees, 45,8% disagrees). The need for such an event is low, only 11,9%. Only 28,1% says to prefer a pharmacy that has such consulting-hours. At the end of the survey, two people wrote that they consider pharmacies to be only a distribution point and had little interest in additional services.

The satisfaction with the service level of the Centrum Apotheek fits the view on pharmacies in Twente from the research of Duchateau, Peters & Van der Veer (2005). A consultation about medication is the best option for offering an extra service, with almost 40% interested in this service. There is almost no interest for the consulting hours, this is not an interesting service to offer. The people that made remarks about the waiting time seem to confirm the idea of the Centrum Apotheek that it might be a weakness of the organization.

Internet

The third section contained questions about the Internet. Seven of the respondents said they did not have internet. It is possible more respondents did not have internet, but did not mention this.

Slightly more than one third of the respondents (38,4%) said they used the Internet as a source of information on their health or medicines. Almost half of the respondents (48,5%) confirms question fourteen and thinks the Internet is a good source of health related information. However, more respondents think internet is not a good way to contact their pharmacy (40,3% thinks it is not a good way in contrast to 29,3% of the respondents). Only 24,8% of the respondents would use email to ask the pharmacist something about their medication. Question seventeen, "het inleveren van

(herhaal)recepten via Internet vind ik handig”, was confirmed by 47,8%. Almost half of the respondents (48,9%) would prefer a pharmacy that is also reachable via the internet.

The last two questions had the subject of internet pharmacies. The reliance of internet pharmacies are perceived lower than regular pharmacies by the public; 70,7% thought they were less reliable. Only 2,2% preferred internet pharmacies over regular pharmacies.

The low interest for internet services confirms the same trend found in the research of Duchateau, Peters & Van der Veer (2005). However, because of the interest for digitally handing in prescriptions and the use of internet for searching health information, the interest in internet services might increase in time, as the trend in the PEST analysis predicts. The internet pharmacies seem to be, at this moment, no real competitors for the Centrum Apotheek.

Prevention

The prevention activities matched with the needs of the customers are tests such as blood pressure measurements or health tests.

Almost half of the respondents does not think prevention is a task of pharmacies (49,4%) and only 27,7% of the respondents says to have a need for prevention-activities. The prevention activities would be for only 23,5% a reason to prefer a certain pharmacy. The answers on question 24 (“ik zou gebruik maken van preventie-activiteiten van mijn apotheek”) do not give a clear picture of the general opinion on this question. About a third disagrees with the question and a third agrees. The majority of the respondents (58,7%) are not willing to contribute in the costs for prevention activities (question 25). One respondent added to this question that prevention could save costs in the long run and that the benefits of this should be for the patients in the way of a lower health insurance fee.

The need for prevention activities is not very high. The intention to use the prevention activities is reasonable; about a third would use the possibility for activities such as health checks.

Factors, products and services

This question asked which factors were important in choosing a pharmacy. The scales of these questions ranged from 1 to 5; 1 being to most unimportant and 5 the most important. The factors mentioned in the survey all seemed to be perceived important by the respondents. Most important are the opening hours and the friendliness. The mean score of 4,64 suggest it is perceived as very important. The products are also very important. Location is perceived as the least important factor in the decision on which pharmacy to choose.

Twelve respondents used the free space to add a factor. The expertise was seen as important by three people. Equally important, also mentioned by three respondents, was the waiting time. Two factors were mentioned by two respondents, namely information on medication and the parking place availability. The importance of the opening hours, being reachable 24 hours a day, was emphasized by two respondents at the end of the survey.

The opening hours being important is positive for the Centrum Apotheek, because of their broad opening times. Because the respondents were customers of the Centrum Apotheek the result could be biased. It is possible opening hours are seen as more important than it really is for customers. Location is the least important factor, but still important. The products are researched in the next question.

Table 6 Factors for choosing a pharmacy

Factor	Mean
1 Opening hours Friendliness	4,64
2 Products	4,48
3 Service Privacy	4,40
4 Location	4,32

The next question asked about the products of which the customers think a pharmacy should have. The results are found in table 6. The results are consistent with the conservative image of a pharmacy; products that are most closely connected to health care are seen as the most important. The most important thing to have in a pharmacy is wound care products, followed by injury products and appliances. The least important products to offer are cosmetics and perfume. With a mean score of 1,67 and 1,35 they are perceived as very unimportant to have. None of the respondents added something to this list.

Table 7 Products in a pharmacy

Products	Mean
1 Wound care products	4,35
2 Injury products	3,98
3 Appliances	3,95
4 Mouth care products	3,61
5 Self tests	3,54
6 Nutrition supplement	3,19
7 Skin care	2,91
8 Cosmetics	1,67
9 Perfume	1,35

The last question asked which services are important for a pharmacy, basic services as well as possible extra services. The services that were mentioned were perceived as important too, not one had a mean score lower than three. Most important is being easy to reach on the phone. Medication counseling is the next important thing, which is consistent with the results from the service section, in which there is a reasonable interest in a conversation about medication. Least important were the internet services, consistent with the results from the internet questions. One respondent added the delivery for the people that needed it as being very important.

Table 8 Pharmacy services

Service		Mean
1	Being reachable by phone	4,73
2	Medication counseling	4,30
3	Delivery service	3,88
4	Health checks	3,64
5	Internet services	3,56

At the end of the survey there was room for further comments. Three respondents commented in the survey that they were content with the Centrum Apotheek and that they did not have any complaints. One respondent complemented on doing the survey, one respondent thought the question were well considered, another commented the questions were poor without further motivation.

4.5 Conclusions survey

This survey was conducted to find an answer on the question "What are the wishes of the customers of the Centrum Apotheek Enschede?". The results of the survey describe a customer with a traditional view of what a pharmacy should do. When realizing the trends in the PEST analysis are on the long term, it seems likely that the customer of the Centrum Apotheek is somewhat conservative (and therefore does not need extra services) or not completely ready for the future changes. The main trends found in the PEST analysis (the increasing competition, the shift to service provider, and the need for information) are confirmed by the survey; the service of the pharmacy is seen as very important and the need for information is also considerable. The competition is not explicitly used in the survey, because this trend is less relevant for the customer but has mostly consequences for the pharmacies. Internet pharmacies, an important competitor, are not perceived reliable. This seems to contradict, or at least slow down, the competition from the internet pharmacies; internet pharmacy may be a rising competitor, the competition is not yet significant. The willingness of customers to pay for extra services can be said to be very low and overall the customer seems satisfied with the level of service already offered, such as delivery and internet services. A consultation about medicines is however valued by a large part of the respondents. The opening hours are seen as important, which is a good thing for the Centrum Apotheek. Some respondents commented on the friendliness of the assistants of the Centrum Apotheek, which is also an important factor on choosing a pharmacy. The products mentioned and perceived as important in the survey are all available in the Centrum Apotheek. Also most of the services mentioned in the survey are offered at the Centrum Apotheek, which seems to be logically connected to the satisfaction with the services of the Centrum Apotheek.

5 Conclusions & recommendations

This chapter combines the results from the analysis from chapter 3 and the results of the survey in chapter 4. This should give the information needed to answer the main research question: "What are the possibilities for the Centrum Apotheek Enschede to respond to the changes in the environment, taking into account its special position and the wishes of the customers?". The possibilities are discussed below.

5.1 Information

The PEST analysis described the increasing need for information and the survey showed that providing information is a strength of pharmacies. This is consistent with the conclusions of Duchateau, Peters & Van der Veer (2005). They concluded that people in Twente prefer most of the times their pharmacy when looking for information, only when asking why a certain medicine is prescribed, people prefer a general practitioner in stead of the pharmacy. The preference of the customer for pharmacies when needing information is a strength, although not specifically for the Centrum Apotheek. As mentioned in the paragraph on the 7M model, medical technology should support the mission of the organization. An option mentioned there is the installation of a robot, which is said to create more time at the desk (KennisCentrum Robotisering, 2007). This option could improve the possibility to give information, because the assistant does not need to walk away from the desk and has the possibility to give more information and therefore support this strategy. If a (specific) customer does not have a need for information it saves time, which improves the speed of the medicine distribution.

The need and appreciation for knowledge, as shown from the PEST analysis and confirmed by the survey, is an important strength and opportunity for pharmacies in general and is a useful strategy.

5.2 Internet

The increasing importance of the internet and the opportunities of this trend are discussed in the PEST analysis. Most respondents seem not very interested in internet services, but there is a small but reasonable group that does have interest. A quarter of the respondents would use email to ask a question and almost half appreciates the possibility of digitally handing in prescriptions. Also half of the respondents prefer a pharmacy that is reachable via the internet. Looking for information on health on the internet is done frequently by the respondents. Also the need for information is linked to the increasing use of internet on health subjects. Information on internet is frequently used and often seen as reliable. The need for internet services was also measured in the research of Duchateau, Peters & Van der Veer (2005), where the need for internet services was very low. Although the internet services are also considered least important of the services mentioned at the end of the survey, they are still found to be important. The reliance of internet pharmacies is perceived lower than the reliance of regular pharmacies. The respondents also did not care to get their medicines from internet

pharmacies. These results are also consistent with the results of Duchateau, Peters & Van der Veer (2005). Because there is not much trust in the internet pharmacies, the competition over the internet is (at the moment) minimal. However, if the market share of internet pharmacies rises, as expected, this may become a threat. By increasing the attention for the internet services the Centrum Apotheek offers, customers may stay loyal when competition is increasing.

The Centrum Apotheek could use the possibilities of their site to offer the patients reliable information on health or medicine. The Centrum Apotheek already has all these services mentioned available on their website but the use of these services may rise if the services become better known and these services could be more visible on the site. Options for this are putting a link on the homepage of the Centrum Apotheek).

5.3 Prevention

Customers seem to have less interest in prevention as the government. Not only the interest for the subject is minimal, the willingness to pay is very low. The trends in the PEST analysis seem not to be appreciated yet and adopted by the public. About a third of the respondents say they would use the prevention activities if offered, but a third disagrees. This doubt is reflected in the SWOT analysis, in which the trend of prevention is something that should be decided on. The advantages and disadvantages of prevention should be considered (for example reliability of the tests, additional costs and extra income).

The success of the blood sugar test of the KNMP is however opposed to this result. This free test is organized twice and has been a success both times. It is possible prevention has to gain more interest with the public. This provides the time to investigate the option of prevention. Questions such as 'What are possible tests or services to offer' and 'is there interest with other pharmacies for these activities?' can be researched. It might be possible to organize such activities in cooperation with relevant stakeholders, such as insurers and general practitioners. Insurers could take care of the financial aspect, while the general practitioners could make sure the information is correct and optimal. The cooperation between all parties will decrease the mutual rivalry, described in the PEST analysis, between the pharmacies and GP's.

5.4 Services

The shift from medicine supplier to service provider is described in the PEST analysis. The survey also shows that service is important to the customer of a pharmacy. Considering the results of the survey, the level of service (of the Centrum Apotheek) can be said to be sufficient. More service could attract more customers, however it seems the services suggested in the survey are not these services. The broad opening hours are an important service, but because of the position of the Centrum Apotheek and the shareholders, it is not possible to explicitly advertise this fact. The consulting hours will not get much interest from the customer, the need is low and only a small part is willing to pay for the service. It could attract extra customers because of the extra service, but it is questionable that the extra costs would match the extra income. When presuming the trends found in the PEST analysis are not yet fully developed, it is possible the customer simply does not know what services he wants exactly.

The most interesting option seems to be the conversations on medication (medication review). There is a reasonable amount of interest for this service, and the position of the pharmacy as an information distributor would be confirmed by this. Here too it might be a useful option to cooperate with insurers. This cooperation with insurers is already done by the pharmacy 'Pillen en Praten' with CZ, where the insurer pays money for each medication review (www.pw.nl).

5.5 Internationalization

The trend of internationalization creates possibilities, as already described in the SWOT analysis. This trend is particularly useful for pharmacies near the border, such as the Centrum Apotheek. It may be worth to research the options the internationalization creates. The Centrum Apotheek is already frequently visited by Germans, and the increasing amount of German students at the University of Twente creates possibilities. A possibility to react on this trend is for instance to see if there is a different need for products or information (in German). This is an easy and cheap option and is therefore easy to carry out. It is however not clear if (and how much exactly) this would increase the amount of German customers, and is therefore a possible object for research.

5.6 Recommendations

The previous has lead to a number of recommendations. Most recommendations support the strategy of information specialist.

Pharmacy

The position as an information supplier is a strong position and can be emphasized by mentioning the specializations and creating more time for giving information.

- Installing a robot to create more time at the desk

Internet

Optimize the use of the internet site of the Centrum Apotheek and increase the knowledge of the internet services.

- Increase the visibility of the services and information offered (links on the home page)
- Increase the knowledge about the services and the information offered (for example spread flyers among customers)

Prevention

Prevention is an interesting option (on a longer term). For offering this service to the customer it could be done in cooperation with general practitioners and insurers (for the financial aspect).

Services

The service level of the Centrum Apotheek seems sufficient; there is not much need for more services. Medication reviews is a possibility worth researching, but this may be more interesting on the long term.

Internationalization

Research the wishes of the German customers to adapt to the trend of internationalization.

5.6 Conclusions

The research has resulted in a possible strategy for the Centrum Apotheek and gives an answer on the main question of this research "What are the possibilities for the Centrum Apotheek Enschede to respond to the changes in the environment, taking into account its special position and the wishes of the customers?". The strategy of profiling the Centrum Apotheek as an information specialist is a good one, pharmacies are already frequently visited for information and the Centrum Apotheek already offers a lot of information, as well as in the pharmacy itself and on the website. The Centrum Apotheek is limited by the influence of the shareholders. Their share in the organization offers the possibility to influence the organization and they will not allow the Centrum Apotheek to become an important competitor. This reduces the possibilities of what the Centrum Apotheek can do, for example emphasizing the specialization about urology.

By profiling the Centrum Apotheek on the short term as an (information) specialist and optimize the possibilities of the website, also the competition from the internet can be faced. The trend of internationalization seems to be an interesting option, but it is difficult to say what will be the extra value of adapting the product offering to the wishes of the German customers. This is therefore something worth researching. As an extra service medication counseling could be offered. Finally, on the longer term the trend of prevention could be researched and activities on this subject could be organized.

6 Discussion

At the end of this thesis some issues regarding this research will be discussed. Finally some ideas for further research are discussed.

6.1 Discussion

A remark about the research can be made about the method of strategic planning. Strategic planning has a limitation when the analyses are performed by one person (Mason, 1969). In that situation the view of the person on the organization and the environment of the organization has an influence on the results of the process.

Other remarks on the research are about the survey. When the survey was handed out and filled in some things were noticed.

- Some elderly people (about 70 years and older) were obviously not used to filling in surveys. Two or three respondents needed help, in spite of the instructions at the beginning of the survey. It is possible more respondents had trouble filling in the survey but did not ask for help. However, this did not create strange or inconsistent answers, which makes it likely this caused few problems.
- Because the survey was spread in the Centrum Apotheek, it is possible this biased the answers on what is important for a pharmacy. The opening hours for example were seen as most important factor on choosing a pharmacy. Because the Centrum Apotheek has very convenient opening hours, this might attract people that think broad opening hours are important. A way to avoid this bias could be to work with stratified samples, to make sure there are as much customers as passers-by.

6.2 Further research

Although the previous chapter described the possibilities for further research for the Centrum Apotheek, some more, general research could be done on the subject. Possible research objects are the market of OTC products, which is more similar to a 'regular' market. Also the factors for choosing a pharmacy and the choice of visiting which pharmacy could be researched.

This research used the three markets model to describe the environment of the Centrum Apotheek. With the products that are not paid for by the insurers, the situation changes and the model is not applicable. This market is a different market; financing and services are linked more directly. The expectations and needs of the customer could be different in this situation. If this is true, the customers should be approached differently.

The factors that are important on choosing a pharmacy are not complete. This research gives a short overview of some relevant factors, but it is likely more factors are of influence. This could be an interesting subject for further research. In this research the factors mentioned were already showed to be relevant. Also less relevant factors could be added. It might provide a clearer picture of the relevant factors if there is more difference in the importance of the factors. The research of Franic, Grauer &

Law (2005) used a method that made a distinction between factors that are perceived to be different, but this method is difficult for respondents. This kind of question provides however a lot of information. A different approach might provide more reaction.

Another subject worth researching is the behavior of people with regard to visiting pharmacies. The increased competition in health care and with pharmacies should make people more aware of their ability to choose. What is not clear is how often people go to a pharmacy that is not their own, or how often people switch pharmacies. Are people aware of the possibility to go to the pharmacy they want (in stead of for instance the one recommended by their general practitioner or specialist)? This could be assessed in further research.

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Attachment 1 Construction survey

	General attitude	Need	Influence on choice	Willingness to pay
1 Service	- Ik word liever snel geholpen dan dat ik extra informatie over mijn medicijnen krijg (8)	- Ik heb behoefte aan meer service van mijn apotheek (5) - Ik zou het prettig vinden om af en toe een gesprek te hebben over mijn medicatie (7)	- Ik zou eerder kiezen voor een apotheek die veel service biedt (6)	- Ik ben bereid bij te dragen in kosten voor goede service (9)
6 Tests /checks	- Preventie (bijvoorbeeld gezondheidstests of bloeddrukmetingen) is een taak van de apotheek (21)	- Ik heb behoefte aan preventie-activiteiten van mijn apotheek (22)	- Ik zou gebruik maken van preventie-activiteiten van mijn apotheek (24) -Ik zou eerder kiezen voor een apotheek die aan preventie doet dan voor een die dat niet doet (23)	- Ik ben bereid om bij te dragen in de kosten voor preventie-activiteiten (25)
7 prevention	- Ik vind een spreekuur over bijvoorbeeld stoppen met roken, alcoholgebruik of depressies bij de taken van een apotheek passen (10)	- Ik heb behoefte aan zo'n spreekuur (11)	- Ik zou eerder voor een apotheek kiezen die zo iets organiseert dan een apotheek die dat niet doet. (12)	-
12 + 19 Information	- Ik vind Internet een goede bron voor informatie over gezondheid (14)	- Ik gebruik Internet regelmatig om informatie over gezondheid of medicijnen op te zoeken (13)	- Ik ga voor informatie over mijn medicijnen het liefst naar de apotheek (1)	-
15 + 16 Specialist	-	- Ik heb behoefte aan ziekte-specifieke informatie van mijn apotheek (2)	- Ik ga liever naar een apotheek die gespecialiseerd is in mijn ziekte dan naar een algemene apotheek (3)	-
17 Internet pharmacy	- Ik vind internetapotheken (alleen via Internet te bereiken) net zo betrouwbaar als andere apotheken (19)	-	- Ik bestel mijn medicijnen liever bij een internetapotheek dan bij een 'gewone' apotheek (20) - Kortingen zijn voor mij een reden om voor een andere apotheek te kiezen (4)	-

18 Communication

- Ik vind Internet een goede manier om in contact te komen met mijn apotheek (15)
- Het inleveren van (herhaal)recepten via Internet vind ik handig (17)

- Ik zou e-mail gebruiken om een vraag aan de apotheek te stellen over bijvoorbeeld medicatie (16)

- Ik zou eerder voor een apotheek kiezen die ook via Internet te bereiken is (18)

-

Attachment 2 Survey before pre-test

VRAGENLIJST

Voor mijn afstudeeronderzoek bij Gezondheidswetenschappen aan de Universiteit Twente ben ik aan het onderzoeken wat mensen van een apotheek verwachten en welke factoren meespelen in de keuze voor een apotheek. Daarom zou ik willen vragen of u onderstaande vragen in wilt vullen.

Het gaat om uw eigen mening, foute antwoorden zijn er dus niet. Het zal ongeveer tien minuten van uw tijd kosten.

Alle gegevens worden uiteraard anoniem verwerkt.

Hartelijk dank!

Berti Moonen

Algemeen

Geslacht: man/vrouw

Dag & tijdstip van bezoek:.....

Leeftijd:

Nationaliteit:

Hoe vaak komt u per jaar gemiddeld in een apotheek? 0-4 keer 5 keer of vaker

Kunt u aangeven in hoeverre u het eens bent met onderstaande stellingen?

1 geeft aan dat u het helemaal oneens bent, 5 dat u het helemaal eens bent met de stelling.

Als u niet weet wat er met de vraag bedoeld wordt, kruis dan 'weet niet' aan.

Apotheek

	Helemaal oneens	helemaal eens					weet niet
1 Ik ga voor informatie over mijn medicijnen het liefst naar de apotheek	1	2	3	4	5	<input type="checkbox"/>	
2 Ik heb behoefte aan ziekte-specifieke informatie van mijn apotheek	1	2	3	4	5	<input type="checkbox"/>	
3 Ik ga liever naar een apotheek die gespecialiseerd is in mijn ziekte dan naar een algemene apotheek	1	2	3	4	5	<input type="checkbox"/>	
4 Kortingen op medicijnen zijn voor mij een reden om een andere apotheek te kiezen	1	2	3	4	5	<input type="checkbox"/>	

Service (bijvoorbeeld thuisbezorging of medicatiebegeleiding)

	Helemaal oneens	helemaal eens					weet niet
5 Ik heb behoefte aan meer service van mijn apotheek	1	2	3	4	5	<input type="checkbox"/>	
6 Ik zou eerder kiezen voor een apotheek die veel service biedt	1	2	3	4	5	<input type="checkbox"/>	
7 Ik zou het prettig vinden om af en toe een gesprek te hebben over mijn medicatie	1	2	3	4	5	<input type="checkbox"/>	
8 Ik word liever snel geholpen dan dat ik extra informatie over mijn medicijnen krijg	1	2	3	4	5	<input type="checkbox"/>	
9 Ik ben bereid bij te dragen in de kosten voor goede service	1	2	3	4	5	<input type="checkbox"/>	
10 Ik vind een spreekuur over bijvoorbeeld stoppen met roken, alcoholgebruik of depressies bij de taken van een apotheek passen	1	2	3	4	5	<input type="checkbox"/>	
11 Ik heb behoefte aan zo'n spreekuur	1	2	3	4	5	<input type="checkbox"/>	

- 12 Ik zou eerder voor een apotheek kiezen die zoiets organiseert dan een apotheek die dat niet doet. 1 2 3 4 5

- | <u>Internet</u> | Helemaal oneens | 1 | 2 | 3 | 4 | 5 | helemaal eens | weet niet |
|--|-----------------|---|---|---|---|---|---------------|--------------------------|
| 13 Ik gebruik internet regelmatig om informatie over gezondheid of medicijnen op te zoeken | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 14 Ik vind internet een goede bron voor informatie over gezondheid | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 15 Ik vind internet een goede manier om in contact te komen met mijn apotheek | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 16 Ik zou e-mail gebruiken om een vraag aan de apotheek te stellen over bijvoorbeeld medicatie | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 17 Het inleveren van (herhaal)recepten via internet vind ik handig | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 18 Ik zou eerder voor een apotheek kiezen die ook via internet te bereiken is | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 19 Ik bestel mijn medicijnen liever bij een internetapotheek dan bij een 'gewone' apotheek | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 20 Ik vind internetapotheken net zo betrouwbaar als andere apotheken | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |

- | <u>Preventie</u> | Helemaal oneens | 1 | 2 | 3 | 4 | 5 | helemaal eens | weet niet |
|---|-----------------|---|---|---|---|---|---------------|--------------------------|
| 21 Preventie (bijvoorbeeld gezondheidstests of bloeddrukmetingen) is een taak van de apotheek | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 22 Ik heb behoefte aan preventie-activiteiten van mijn apotheek | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 23 Ik zou eerder kiezen voor een apotheek die aan preventie doet dan voor een die dat niet doet | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 24 Ik zou gebruik maken van preventieactiviteiten van mijn apotheek | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |
| 25 Ik ben bereid om bij te dragen in de kosten van preventieactiviteiten | 1 | 2 | 3 | 4 | 5 | | | <input type="checkbox"/> |

Kiezen van een apotheek

Welke factoren vindt u belangrijk bij het kiezen van een apotheek en in hoeverre vindt u dat apotheken van elkaar verschillen op die factoren? Enkele factoren zijn al genoemd, maar u mag er zelf nog meer bijzetten.

Voorbeeld: U vindt de inrichting van een apotheek niet belangrijk, maar vindt wel dat er veel verschil is in de inrichting van apotheken. Dan omcirkelt u in de eerste kolom de 1 en in de tweede kolom een 5.

	Onbelangrijk					Belangrijk					Geen verschil					Veel verschil				
1 Locatie van apotheek	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
2 Service.....	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
3 Openingstijden.....	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
4 Privacy.....	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
5 Productaanbod.....	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
6 Vriendelijkheid.....	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
7.....	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5

Van welke producten vindt u het belangrijk dat u ze bij uw apotheek kunt kopen? Als u iets mist, kunt u het aanvullen.

	Onbelangrijk					Belangrijk					Onbelangrijk					Belangrijk					
Blessureproducten	1	2	3	4	5	1	2	3	4	5	Zelftests	1	2	3	4	5	1	2	3	4	5
Hulpmiddelen	1	2	3	4	5	1	2	3	4	5	Huidverzorging	1	2	3	4	5	1	2	3	4	5
Mondverzorging	1	2	3	4	5	1	2	3	4	5	Cosmetica	1	2	3	4	5	1	2	3	4	5
Wondverzorging	1	2	3	4	5	1	2	3	4	5	Parfum	1	2	3	4	5	1	2	3	4	5
Voedingssupplementen	1	2	3	4	5	1	2	3	4	5	.....	1	2	3	4	5	1	2	3	4	5

Welke service vindt u belangrijk bij uw apotheek? Ook hier kunt u dingen aanvullen.

	Onbelangrijk					Belangrijk					Onbelangrijk					Belangrijk					
Medicatiebegeleiding	1	2	3	4	5	1	2	3	4	5	Gezondheidstests	1	2	3	4	5	1	2	3	4	5
Telefonisch bereikbaar	1	2	3	4	5	1	2	3	4	5	Bezorging	1	2	3	4	5	1	2	3	4	5
Internetdiensten	1	2	3	4	5	1	2	3	4	5	.....	1	2	3	4	5	1	2	3	4	5

Tot slot

Heeft u nog opmerkingen over een van bovenstaande vragen?

.....

Heeft u nog wat toe te voegen over het onderwerp?

.....

Heeft u in het algemeen nog opmerkingen?

.....

Hartelijk dank voor uw tijd en medewerking!

Attachment 3 Questions pre-test

Evaluatie vragenlijst

1 Wat vond u in het algemeen van de vragenlijst?

.....
.....

2 Waren er vragen die u niet begreep of lastig vond?

.....
.....

3 Zaten er moeilijke woorden in?

.....
.....

4 Heeft u nog opmerkingen over de vragenlijst?

.....
.....

Attachment 4 Results pre-test

1 Wat vond u in het algemeen van de vragenlijst?

- Goed, makkelijk in te vullen
- Goed
- Goed
- De weet niet-categorie was slecht te zien
- Leuk

2 Waren er vragen die u niet begreep of lastig vond?

- Bij het invullen van de factoren van de keuze voor een apotheek snapte ik eerst niet goed wat de bedoeling was, maar dat was omdat de eerste lastig was, daarna ging het goed
- Ja, over het productaanbod en de wondverzorging.
- Nee
- Nee
- Nee

3 Zaten er moeilijke woorden in?

- Nee
- Nee
- Nee
- Nee
- Nee

4 Heeft u nog opmerkingen over de vragenlijst?

- Bij het beginverhaal: bedanken voor deelname
- Nee
- Nee
- Idee om mee te nemen waarom mensen naar de apotheek gaan en of ze er ook gewoon spullen kopen.
- Nee

Algemeen

- (2) Vond het moeilijk apotheken te vergelijken, is altijd bij dezelfde geweest. Zei ook nog meer vragen lastig te vinden, maar wist niet welke.
- (3) Vroeg of ze beide kolommen moest invullen
- (4) Ik heb weinig tot geen ervaring met andere apotheken dus moeilijk vergelijken. Ik kom alleen voor recepten
- (4) Ik maak niet echt een overweging om andere apotheek te kiezen. Ik denk dat afstand het belangrijkste is.
- (5) Het zou een idee zijn om iemand vast in dienst te hebben om informatie te geven, bijvoorbeeld als je uit het ziekenhuis komt. Het overdondert je vaak en het is wel handig dan ergens terug te kunnen komen
- (5) Het lijken allemaal wel goede ontwikkelingen, maar het is allemaal toekomstmuziek dus moet nog even eraan wennen
- (5) Preventie is een goede taak voor de apotheek omdat het laagdrempeliger is dan de dokter.

Attachment 5 Survey

VRAGENLIJST

Voor mijn afstudeeronderzoek bij Gezondheidswetenschappen aan de Universiteit Twente ben ik aan het onderzoeken wat mensen van een apotheek verwachten en welke factoren meespelen in de keuze voor een apotheek. Daarom zou ik willen vragen of u onderstaande vragen in wilt vullen. U zou mij er enorm mee helpen.

Het gaat om uw eigen mening, foute antwoorden zijn er dus niet. Het zal ongeveer tien minuten van uw tijd kosten.

Alle gegevens worden uiteraard anoniem verwerkt.

Hartelijk dank!

Berti Moonen

Algemeen

Geslacht: man/vrouw

Dag & tijdstip van bezoek:.....

Leeftijd:

Nationaliteit:

Hoe vaak komt u per jaar gemiddeld in een apotheek? 0-4 keer 5 keer of vaker

Kunt u aangeven in hoeverre u het eens bent met onderstaande stellingen?

1 geeft aan dat u het helemaal oneens bent, 5 dat u het helemaal eens bent met de stelling.

Als u niet weet wat er met de vraag bedoeld wordt, kruis dan 'weet niet' aan.

Apotheek

	Helemaal oneens	helemaal eens					weet niet
1 Ik ga voor informatie over mijn medicijnen het liefst naar de apotheek	1	2	3	4	5	<input type="checkbox"/>	
2 Ik heb behoefte aan ziekte-specifieke informatie van mijn apotheek	1	2	3	4	5	<input type="checkbox"/>	
3 Ik ga liever naar een apotheek die gespecialiseerd is in mijn ziekte dan naar een algemene apotheek	1	2	3	4	5	<input type="checkbox"/>	
4 Kortingen op medicijnen zijn voor mij een reden om een andere apotheek te kiezen	1	2	3	4	5	<input type="checkbox"/>	

Service (bijvoorbeeld thuisbezorging of medicatiebegeleiding)

	Helemaal oneens	helemaal eens					weet niet
5 Ik heb behoefte aan meer service van mijn apotheek	1	2	3	4	5	<input type="checkbox"/>	
6 Ik zou eerder kiezen voor een apotheek die veel service biedt	1	2	3	4	5	<input type="checkbox"/>	
7 Ik zou het prettig vinden om af en toe een gesprek te hebben over mijn medicatie	1	2	3	4	5	<input type="checkbox"/>	
8 Ik word liever snel geholpen dan dat ik extra informatie over mijn medicijnen krijg	1	2	3	4	5	<input type="checkbox"/>	
9 Ik ben bereid bij te dragen in de kosten voor goede service	1	2	3	4	5	<input type="checkbox"/>	
10 Ik vind een spreekuur over bijvoorbeeld stoppen met roken, alcoholgebruik of depressies bij de taken van een apotheek passen	1	2	3	4	5	<input type="checkbox"/>	
11 Ik heb behoefte aan zo'n spreekuur	1	2	3	4	5	<input type="checkbox"/>	

- 12 Ik zou eerder voor een apotheek kiezen die zoiets organiseert dan een apotheek die dat niet doet. 1 2 3 4 5

- | <u>Internet</u> | Helemaal oneens | helemaal eens | | | | weet niet |
|--|-----------------|---------------|---|---|---|--------------------------|
| 13 Ik gebruik Internet regelmatig om informatie over gezondheid of medicijnen op te zoeken | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 14 Ik vind Internet een goede bron voor informatie over gezondheid | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 15 Ik vind Internet een goede manier om in contact te komen met mijn apotheek | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 16 Ik zou e-mail gebruiken om een vraag aan mijn apotheek te stellen over bijvoorbeeld medicatie | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 17 Het inleveren van (herhaal)recepten via Internet vind ik handig | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 18 Ik zou eerder voor een apotheek kiezen die ook via Internet te bereiken is | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 19 Ik vind internetapotheken (alleen via Internet te bereiken) net zo betrouwbaar als andere apotheken | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 20 Ik bestel mijn medicijnen liever bij een internetapotheek dan bij een 'gewone' apotheek | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |

- | <u>Preventie</u> | Helemaal oneens | helemaal eens | | | | weet niet |
|---|-----------------|---------------|---|---|---|--------------------------|
| 21 Preventie (bijvoorbeeld gezondheidstests of bloeddrukmetingen) is een taak van de apotheek | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 22 Ik heb behoefte aan preventie-activiteiten van mijn apotheek | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 23 Ik zou eerder kiezen voor een apotheek die aan preventie doet dan voor een die dat niet doet | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 24 Ik zou gebruik maken van preventieactiviteiten van mijn apotheek | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |
| 25 Ik ben bereid om bij te dragen in de kosten van preventieactiviteiten | 1 | 2 | 3 | 4 | 5 | <input type="checkbox"/> |

Kiezen van een apotheek

Welke factoren vindt u belangrijk bij het kiezen van een apotheek? Enkele factoren zijn al genoemd, maar u mag er zelf nog meer bijzetten.

	Onbelangrijk			Belangrijk	
1 Locatie van apotheek	1	2	3	4	5
2 Service.....	1	2	3	4	5
3 Openingstijden.....	1	2	3	4	5
4 Privacy.....	1	2	3	4	5
5 Productaanbod.....	1	2	3	4	5
6 Vriendelijkheid.....	1	2	3	4	5
7.....	1	2	3	4	5

Van welke producten vindt u het belangrijk dat u ze bij uw apotheek kunt kopen?

Als u een product mist, kunt u het aanvullen.

	Onbelangrijk			Belangrijk			Onbelangrijk			Belangrijk	
Blessureproducten	1	2	3	4	5	Zelftests	1	2	3	4	5
Hulpmiddelen	1	2	3	4	5	Huidverzorging	1	2	3	4	5
Mondverzorging	1	2	3	4	5	Cosmetica	1	2	3	4	5
Wondverzorging	1	2	3	4	5	Parfum	1	2	3	4	5
Voedingssupplementen	1	2	3	4	5	.....	1	2	3	4	5

Welke service vindt u belangrijk bij uw apotheek? Ook hier kunt u dingen aanvullen.

	Onbelangrijk			Belangrijk			Onbelangrijk			Belangrijk	
Medicatiebegeleiding	1	2	3	4	5	Gezondheidstests	1	2	3	4	5
Telefonisch bereikbaar	1	2	3	4	5	Bezorging	1	2	3	4	5
Internetdiensten	1	2	3	4	5	.....	1	2	3	4	5

Tot slot

Heeft u nog opmerkingen over een van bovenstaande vragen?

.....
.....

Heeft u nog wat toe te voegen over het onderwerp?

.....
.....

Heeft u in het algemeen nog opmerkingen?

.....
.....

Hartelijk dank voor uw tijd en medewerking!

Attachment 6 Results survey

	1 Ik ga voor informatie over mijn medicijnen het liefst naar de apotheek	2 Ik heb behoefte aan ziekte-specifieke informatie van mijn apotheek	3 Ik ga liever naar een apotheek die gespecialiseerd is in mijn ziekte dan naar een algemene apotheek	4 Kortingen op medicijnen zijn voor mij een reden om een andere apotheek te kiezen
N	98	94	94	93
Helemaal oneens	2,0 %	13,8 %	13,8 %	47,3 %
Oneens	8,2 %	18,1 %	11,7 %	15,1 %
Neutraal	23,5 %	26,6 %	22,3 %	12,9 %
Eens	19,4 %	18,1 %	22,3 %	6,5 %
Helemaal eens	46,9 %	23,4 %	29,8 %	18,3 %
	5 Ik heb behoefte aan meer service van mijn apotheek	6 Ik zou eerder kiezen voor een apotheek die veel service biedt	7 Ik zou het prettig vinden om af en toe een gesprek te hebben over mijn medicatie	8 Ik word liever snel geholpen dan dat ik extra informatie over mijn medicijnen krijg
N	93	94	91	99
Helemaal oneens	28,0 %	14,9 %	17,6 %	30,3 %
Oneens	23,7 %	9,6 %	25,3 %	17,2 %
Neutraal	23,7 %	18,1 %	18,7 %	13,1 %
Eens	8,6 %	21,3 %	16,5 %	17,2 %
Helemaal eens	16,1 %	26,2 %	22,0 %	22,2 %
	9 Ik ben bereid bij te dragen in de kosten voor goede service	10 Ik vind een spreekuur over bijvoorbeeld stoppen met roken, alcoholgebruik of depressies bij de taken van een apotheek passen	11 Ik heb behoefte aan zo'n spreekuur	12 Ik zou eerder voor een apotheek kiezen die zoiets organiseert dan een apotheek die dat niet doet.
N	92	96	92	82
Helemaal oneens	30,4 %	28,1 %	63,0 %	36,6 %
Oneens	17,4 %	17,7 %	13,0 %	18,3 %
Neutraal	23,9 %	13,5 %	12,0 %	17,1 %

Eens	12,0 %	15,6 %	4,3 %	11,0 %
Helemaal eens	16,3 %	25,0 %	7,6 %	17,1 %
	13 Ik gebruik Internet regelmatig om informatie over gezondheid of medicijnen op te zoeken	14 Ik vind Internet een goede bron voor informatie over gezondheid	15 Ik vind Internet een goede manier om in contact te komen met mijn apotheek	16 Ik zou e-mail gebruiken om een vraag aan mijn apotheek te stellen over bijvoorbeeld medicatie
N	99	99	92	92
Helemaal oneens	25,3 %	11,1 %	19,6 %	27,2 %
Oneens	9,1 %	8,1 %	20,7 %	10,9 %
Neutraal	20,2 %	26,3 %	22,8 %	19,6 %
Eens	15,2 %	22,2 %	16,3 %	18,5 %
Helemaal eens	23,2 %	25,3 %	13,0 %	16,3 %

	17 Het inleveren van (herhaal-) recepten via Internet vind ik handig	18 Ik zou eerder voor een apotheek kiezen die ook via Internet te bereiken is	19 Ik vind internetapotheken (alleen via Internet te bereiken) net zo betrouwbaar als andere apotheken	20 Ik bestel mijn medicijnen liever bij een internet-apotheek dan bij een 'gewone' apotheek
N	90	96	86	91
Helemaal oneens	17,8 %	21,9 %	47,4 %	59,3 %
Oneens	5,6 %	11,5 %	23,3 %	19,8 %
Neutraal	12,2 %	13,5 %	8,1 %	12,1 %
Eens	17,8 %	18,8 %	4,7 %	1,1 %
Helemaal eens	40,0 %	27,1 %	9,3 %	1,1 %

	21 Preventie (bijvoorbeeld gezondheids-tests of bloeddrukmetingen) is een taak van de apotheek	22 Ik heb behoefte aan preventie-activiteiten van mijn apotheek	23 Ik zou eerder kiezen voor een apotheek die aan preventie doet dan voor een die dat niet doet	24 Ik zou gebruik maken van preventieactiviteiten van mijn apotheek	25 Ik ben bereid om bij te dragen in de kosten van preventieactiviteiten
N	89	88	85	89	92
Helemaal oneens	28,1 %	26,1 %	23,5 %	20,2 %	42,4 %
Oneens	21,3 %	19,3 %	16,5 %	14,6 %	16,3 %

Neutraal	25,8 %	31,8 %	36,5 %	28,1 %	18,5 %
Eens	13,5 %	12,5 %	12,9 %	22,5 %	13,0 %
Helemaal eens	11,2 %	10,2 %	10,6 %	14,6 %	9,8 %

Attachment 7 Remarks survey

Resp. nr.	Opmerkingen
2	Belangrijk bij kiezen apotheek → info medicamenten
13	Goed gestelde vragen, goed over nagedacht
14	Zie apotheek als afgiftepunt van medicijnen niet als toevoeging huisarts
19	Succes
20	Extra service belangrijk → openingstijden: 5
21	Belangrijk bij kiezen apotheek → deskundigheid
22	Soms duurt het te lang
27	Soms te maken met zeer lange wachttijden
28	Belangrijk bij kiezen apotheek → info
30	Heb geen internet
31	- (vraag 4) Kortingen zijn belachelijk, gezondheidszorg moet voor iedereen gelijk zijn - (vraag 5) Centrum Apotheek is goed - Ik vind dat een apotheek deskundig moet zijn op het gebied van medicijnen en het liefst vriendelijk personeel. Al die poespas eromheen hoeft niet. Centrum Apotheek bevat mij erg goed op het gebied van medicatie en vriendelijkheid
33	Vind het belachelijk dat je bijv. je zorgpas bent vergeten om deze op te halen. Dit overkwam mijn doodzieke zoon toen hij langer dan 1 jaar niet geweest was en er geen gegevens meer in de computer stond. Slechte zaak!
38	- Belangrijk bij kiezen apotheek → 24 uur per dag bereikbaar - Ik vind het heel belangrijk dat een apotheek dag en nacht bereikbaar is
42	- Opmerkingen vragen: openingstijden zijn van groot belang voor werkenden. - Opmerkingen algemeen: de service en het "meedenken" over problemen zijn m.i. ook zeer relevant
47	Succes!
48	- Service belangrijk: bezorging behoeftige → 5, - Succes
49	Heb geen internet
51	- Factoren bij kiezen apotheek: kortere wachttijd → 5. - Opmerkingen over vragen: geen goede vragen
53	Te lang wachten
54	Factoren bij kiezen apotheek: wachttijd → 5
55	Het is vaak onduidelijk waarom er lang gewacht moet worden. Misschien kan daarover meer info
60	- Factoren bij kiezen apotheek: parkeerplaats → 5

	- Inleveren herhaalrecepten via internet → als er is goed systeem!!!
63	<ul style="list-style-type: none"> - Vraag 3, 7, 8: afhankelijk van de ernst van de ziekte - Vraag 14: vertrouwde apotheken info op internet lijkt mij noodzakelijk. Sites zijn vaak bedoeld voor “klantenwerving” en verliezen derhalve aan objectiviteit - Vraag 25: op termijn lijkt me dit trouwens kostenbesparend, dus als ik eerst bijdraag en later als consequentie de verzekering minder kosten heeft wil ik dit wel terugzien in lagere verzekeringskosten - Factoren bij kiezen apotheek → registratie bijwerkingen/kennis van waarschuwingen van experts - Opmerkingen over bovenstaande vragen: Actief vergaren van bijwerkingen van producten door de cliënt te vragen naar de effecten van vorige medicijnen
66	Vragenlijst voor mij niet valide, ben zelf arts
75	Overige opmerkingen: Belangrijk om deze test te doen. Klasse!
76	Overige opmerkingen: Vragen over internet zijn voor mij niet belangrijk, zie mijn leeftijd
80	<ul style="list-style-type: none"> - Heb geen internet, gebruik telefoon voor vragen - Overige opmerkingen: wanneer je hulpmiddelen of blessureproducten aanschaft duidelijk maken dat ze niet geruild kunnen worden of eventueel een ruimte in de winkel om te passen voor je iets koopt
83	Geen internet
86	Factoren bij kiezen apotheek → wachttijd
87	<ul style="list-style-type: none"> - Vraag 25: moet in basispakket zitten, - Overige opmerkingen: klant persoonlijk kennen is belangrijk
95	Factoren bij kiezen apotheek → parkeren
96	Factoren bij kiezen apotheek → kennis van zaken
106	Overige opmerkingen: Geen klachten en geen internet