

Evaluation of Patient Experience with a Model of Coordinated Telematic Pharmaceutical Care Between Hospital and Rural Pharmacies in Spain [Letter]

Fajrillah Kolomboy¹*, Baharuddin Condeng*, Lenny Duyoh*

Department of Nursing, Poltekkes Kemenkes Palu, Palu, Indonesia

*These authors contributed equally to this work

Correspondence: Fajrillah Kolomboy, Faculty of Nursing, Poltekkes Kemenkes Palu, Thalua Konchi Street Number 09, North Palu, Palu, Center Sulawesi, Indonesia, Email fajrillah73@gmail.com

Dear editor

We have read the paper by Ramón Morillo-Verdugo et al on Evaluation of Patient Experience With A Model of Coordinated Telematic Pharmaceutical Care Between Hospital and Rural Pharmacies in Spain.¹ This research introduces a new model in the world of telepharmaceuticals by developing a model called Capacity- Motivation- Opportunity (CMO) specifically designed to monitor patient treatment through telepharmacy.¹ Telepharmacy is a long-distance pharmaceutical care procedure that is used worldwide to control patient health.² Utilization of telepharmaceutical technology enables pharmacists to provide pharmaceutical services clinic to patients while maintaining distance and minimizing face-to-face meetings.³

The study conducted by Ramón Morillo-Verdugo et al aims to determine the benefits of the Capacity-Motivation-Opportunity (CMO) telepharmaceutical care model to improve the patient experience of hospital drug prescriptions. The author found the results that the CMO model was able to improve patient experience and satisfaction compared to the traditional model where implementation in use was easier to practice.¹ However, telepharmacy practice still has some limitations, namely consultation and counseling by pharmacists that are more focused on increasing patient compliance and clinical outcomes, there are not many telepharmacies that provide education and information about self-management and education related to patient illnesses directly. Another limitation is that telepharmacy is more vulnerable to privacy and security risks, telepharmacy providers must be responsible for ensuring regulatory compliance, patient confidentiality and system security at all times.⁴

The study conducted by Ramón Morillo-Verdugo et al used a prospective cohort study of outpatients receiving telepharmacy based on CMO-based pharmaceutical care where each patient was followed for 48 weeks on face-to-face and telematics visits, scheduled and unscheduled at the patient's request.¹ This method is already able to measure the effectiveness of the CMO model, however we recommend proceeding to the post-hoc analysis to find out to what extent higher levels of understanding of telepharmaceutical services are seen among patients with higher education levels compared to primary and secondary levels in service cases related to therapy side effects.⁵ In addition, the CMO model should pay attention to the critical needs that support pharmacists in maintaining their knowledge of modern telepharmaceutical procedures and their expertise in offering pharmaceutical services so that patients feel safe during consultations and can ultimately improve presence of pharmacists as qualified health workers.⁴

In conclusion, we agree that telepharmacy with the CMO-PC model has improved patient experience, patient satisfaction, and offers other advantages over traditional models, which are tailored to patient needs.¹ However, we recommend that in the future this telepharmacy can be developed by adding several steps to ensure that the use of



telepharmaceutical services continues to develop and improve. Pharmacist associations need to advocate for laws and regulations on telepharmacy that can guarantee the safety, privacy and legacy of telepharmacy education not only for pharmacists but also for patients. This is useful for facilitating communication between pharmacists and patients as well as being a strong, safe, and needs-based telepharmaceutical platform whose benefits can be felt directly by patients.⁴

Disclosure

All author reports no other conflict of interest in this communication.

References

1. Morillo-verdugo R, Morillo-lisa R, Espolita-suarez J, Delgado-sanchez O. Evaluation of patient experience with a model of coordinated telematic pharmaceutical care between hospital and rural pharmacies in Spain: a proof of concept. *J Multidiscip Healthc.* 2023;16:1037–1046. doi:10.2147/JMDH.S406636
2. Margusino-Framiñán L, Llamazares CMF, Negro-Vega E, et al. Outpatients' opinion and experience regarding telepharmacy during the COVID-19 pandemic: the enopex project. *J Multidiscip Healthc.* 2021;14:3621–3632. doi:10.2147/JMDH.S343528
3. Iftinan GN, Wathoni N, Lestari K. Telepharmacy: a potential alternative approach for diabetic patients during the COVID-19 pandemic. *J Multidiscip Healthc.* 2021;14:2261–2273. doi:10.2147/JMDH.S325645
4. Iftinan GN, Elamin KM, Rahayu SA, Lestari K, Wathoni N. Application, benefits, and limitations of telepharmacy for patients with diabetes in the outpatient setting. *J Multidiscip Healthc.* 2023;16:451–459. doi:10.2147/JMDH.S400734
5. Salah H, Alsamani O, ElLithy MH, Abdelghani LS. Pharmaceutical services department strategies and patient perception to maintain healthcare services during COVID-19 crisis. *Saudi Pharm J.* 2022;30(11):1639–1645. doi:10.1016/j.jsps.2022.09.006

Dove Medical Press encourages responsible, free and frank academic debate. The content of the Journal of Multidisciplinary Healthcare 'letters to the editor' section does not necessarily represent the views of Dove Medical Press, its officers, agents, employees, related entities or the Journal of Multidisciplinary Healthcare editors. While all reasonable steps have been taken to confirm the content of each letter, Dove Medical Press accepts no liability in respect of the content of any letter, nor is it responsible for the content and accuracy of any letter to the editor.

Journal of Multidisciplinary Healthcare

Dovepress

Publish your work in this journal

The Journal of Multidisciplinary Healthcare is an international, peer-reviewed open-access journal that aims to represent and publish research in healthcare areas delivered by practitioners of different disciplines. This includes studies and reviews conducted by multidisciplinary teams as well as research which evaluates the results or conduct of such teams or healthcare processes in general. The journal covers a very wide range of areas and welcomes submissions from practitioners at all levels, from all over the world. The manuscript management system is completely online and includes a very quick and fair peer-review system. Visit <http://www.dovepress.com/testimonials.php> to read real quotes from published authors.

Submit your manuscript here: <https://www.dovepress.com/journal-of-inflammation-research-journal>

<https://doi.org/10.2147/JMDH.S417424>