The linking pin between management science and community pharmacy practice was Jos van der Werf. He outlined the first research proposal which ultimately led to this thesis. He started with a relatively simple idea and a clear concept of what such a study would involve. This idea and concept has been the ‘Leitmotif’ throughout the study. The basic idea was that pharmacies either stress pharmaceutical activities, financial activities, or customer activities; a triangle. Furthermore, it was presupposed that the community pharmacy sector intended to shift towards customer activities.

The aim of the study was to provide help for pharmacy managers in such a process of change. A design similar to that of Joan Woodward (1965) was selected; she decided to carry out a survey and some case studies in her study. We thought that a similar design would provide us with rich data and good learning experiences. It was expected that a survey would provide a stable and general picture of the sector with respect to the triangle. Some follow-up case studies were planned in order to study the process of change in detail. As you have been able to see in this thesis, this first idea and concept have been worked out throughout the study. Besides the usefulness of the results, this design has given me the opportunity to work with quantitative and qualitative methods. I could recommend it for all management scientists since it makes you aware of the specific advantages and limitations of each method.

Management science is about real life, and indeed, as Schön pointed out, we are in “a swamp of confusing messes” (1983: 42), from which we have to learn our lessons for the sake of management and science. That explains the relatively good match of management science and pharmacy practice. Both fields deal with complexity and dynamics of managerial actors in connection with their environment. The major difference with classical pharmaceutical science is the aspect of isolation, for example, bacteria can be isolated from the environment in order to study their behaviour. In neither management science nor in pharmacy practice can isolation in this sense be regarded as fruitful. The core issue of these fields is interaction; this feature, among others of course, made the data rather ‘messy’.

Quantitative methods were very helpful in clearing up some of this mess. Once a method has been found, the results are within one’s reach. You are always quite sure that in the end there will be a number waiting to be explained. Numbers truly are magic: they seem to reduce complexity. The major problem with these methods was selection. The relevancy of the selected method in the light of the research question is vital; although it is obvious I stress it again. Quantitative methods, although very complicated sometimes, can be helpful for certain research questions, for me however the real ‘brain cracker’ and the biggest learning experience came from the analyses of the qualitative data. It was a ‘brain cracker’ because one seems to have no real tool to distil conclusions from the data; no numbers are waiting at the end. How
could I find a tool which was relevant for my thesis, applicable as a good sieve, and which did not violate the messages from the data? The answer was simple: a good theory. The learning experience related to this quest for a suitable sieve. If we were using SSM for the collection of data it seemed appropriate to use SSM as a methodology for analysis as well. Other related theories were added to give a more accurate view over the material. Although this seems a trivial point, the usability of a good theory for the purpose of analyses did surprise me. I used theory as a booster for the analyses. I learned that theory provides you with a good map through a ‘mess’ of data and is truly indispensable for the analyses of qualitative data.

This study has given me many ideas for possible future research, some of which are presented here. From the point of view of management science, the role of the authorities within health care is a rather tricky one; complicated and emotionally charged. That is exactly what makes this field special and interesting for another study. New studies about the management of the ‘messes’ of problems observed within community pharmacy practice could improve our knowledge about this evolved subject. Moreover, it would be interesting to study how managers within health care manage their relationships, especially in terms of the ongoing change within health care. I believe that the process of changing the cost of health care for society is one which will never end and is hard to manage. It appears quite certain that pharmacy managers, as well as other managers within health care, will have to learn how deal with a changing environment. Structural changes are now again being proposed by the authorities. Further study could possibly support these managers and improve the structure of these ‘messes’ of relationships in which they seem to be involved in. Moreover, with respect to SSM, I would suggest to study the usability of the term ‘emergent properties’ in practice for analyzing data. The layered structure itself and the link between several layers would be the subject of such a study. I believe that the purposefulness of activities of individuals, departments and/or organizations will be an intriguing future subject of study.