



Sprucing Up  
your Pharmacy's  
**'FRONT  
LAWN'**

# First impressions do make a difference

By Chris Linville

If you are outside of an independent pharmacy and analyzing its physical appearance as you approach and walk through the door, an effective analogy might be the front lawn of your home.

That's how Gabe Trahan sees it.

"When you pay your taxes, you pay mostly for the structure, on your house, and a little bit on your property," he says. "But when you go to sell your house, if you don't mow your lawn and trim the shrubs, and keep it looking neat and clean, the value of your house takes a hit.

"Now, take the front end of your store. That's the first thing people walk through. In most cases, they can't get to your pharmacy counter until they walk through your 'front lawn,' through the front of your store. If it has a poor inventory, if it's a little dim in there, if the lights are a little dark, if the aisles are a little narrow, that makes an impression."

Trahan has spent more than 23 years working within the pharmacy universe in numerous positions. Currently he is director of retail services for Burlington Drug Co., Burlington, Vermont, and also has his own independent consulting business. Previously, he was the general manager of a chain of 14 independently-owned pharmacies, and has extensive experience in store design, layout and merchandising.

As a front-end "fixer," Trahan has traveled extensively throughout North America and the Caribbean to help pharmacies create a better shopping experience and improve their bottom line. He has walked through countless pharmacy "front lawns" in stores as small as 800 square feet, to as large as 15,000 square feet. When not on-site at a pharmacy, he is often heard spreading the gospel of proper front end strategies at trade shows, conferences, and seminars.

Many of the solutions Trahan suggests are relatively simple and can be done at minimal or no cost. It may include changing or adjusting exterior signage, enhancing traffic patterns by widening aisles, removing unneeded fixtures, evaluating pricing strategies and displays, and a bit of "Marketing 101."

In his travels, Trahan hears a recurring theme. "It seems like no matter where I go, pharmacists will

whisper to me, 'This isn't fun anymore. Margins are disappearing, I'm working harder, but it's getting more complicated; I'm tired.'

"Well, I've heard that for years, and I don't disagree that it's a little tougher. When things get tough, they kind of shy away from the things in which they aren't necessarily well versed. Let's face it. A pharmacist is phenomenal at what they do, but they may not be great at running the front of the store."

Trahan points out a few common quick fixes he sees when visiting independent pharmacies.

"Pricing is one," he says. "If the pricing is wrong—if your Suave shampoo is 25 cents more than somebody else, or 50 cents more—customers are going to assume that the whole store is expensive. It's not right, but that's the way it is. There are some price sensitive items out there. And if the front of the store is high on these items, they have to believe that the rest of the pharmacy is going to be the same. If the front of the store is a little messy, and not well inventoried, why would they think the pharmacy is going to be any different? The same person owns it and runs it.

"So if you want to keep your front end looking good for any reason, it's because the reflection it's giving the consumer coming through the front door. And unfortunately, (too many pharmacists) are giving up on the front end."

## STEPPING INSIDE

Trahan takes a visitor on a hypothetical tour of generic pharmacy in what could be Anytown, USA. When he walks in, Trahan looks to see how the lighting is, and how uncluttered (or cluttered) it is. He also looks at the inventory.

"If I see a lot of 'ones' and twos' of everything on the shelf, it looks like they are going out of business," Trahan says. "It amazes me that I can walk into some stores—and this is no joke—and I'll see six greetings cards of the same card that says, 'Happy Birthday on your 100th Birthday.' And then they may have two or three to choose from. They may have twelve 100th birthday cards. But then they'll have one Advil, 50-count liquid gel."

Continuing on, Trahan observes the floor plan, breaking the store down by what he describes as "the most valuable real estate." He says, "What's the first thing I see when I walk in? Usually it's an end cap. What does that end cap say about the rest of the store? Is it well signed? Is it clean? Is it full? If it isn't, it's just like the rest of the store, I have to assume."

Before



GABE TRAHAN

After



*Something as simple as new signs make a pharmacy noticeable and welcoming.*

Then, turning to his left and his right, Trahan asks, “Is it a mess? Is it clean? Is it straightened? Is it well signed? And then I look and see if the aisles are wide enough to allow two customers to go up and down without pressing up against somebody—a lot of stores just have way too many fixtures.”

Trahan also looks at the core department areas, which typically carry items such as analgesics and cough and cold medicines. “I ask, who decided to size this?” he says. “In some cases they are way too big. And they are too big because the departments were decided by the size of the fixtures.”

### FIX THE FIXTURES

Another trend that Trahan notices seems to be a fixation on fixtures. He recalls a story about working with a client in the Bahamas.

“As an independent, the owner had a successful store, and decided to move to a much bigger location,” Trahan says. “The guy who did his floor plan was the same guy who sold his fixtures to him. And—lo and behold—the store was full of fixtures. So prior to my arrival he sent me his floor plan to review. We ended up cutting out the fixtures, customizing the store, and we getting it down to where it should be, not what it could be (a cold, uninviting store, with too many fixtures).”

Deciding what the right size is for a store is a primary challenge for many pharmacy owners, Trahan says. Having large departments as the chains do is not necessary. Having the core business in the right spot and in the right size for the customers is the key.

“Just because a fixture is 30 feet long, it doesn’t mean you need 16 feet of hair care products and 14 feet of skin care—which I see often,” he says. “You decide what you need. Independents are so scared to have a hole on their shelves. But what they don’t know is that one of everything is a hole on their shelves.”

Having enough of the core products is critical, Trahan says.

“That’s the first thing I look for. People seem to think they are impressing me when they show me a 24-foot hair care display, when all they needed was eight feet with some inventory. A 24-foot hair care with two pieces of everything isn’t nearly as good as an eight foot area with the inventory managed with the best sellers well stocked.”

By all means, Trahan says, avoid scenarios where you have to inform a customer that a popular item is not available.

“Telling a customer that they can get it tomorrow is the same thing as saying, ‘Why don’t you go shop somewhere else, because right now I don’t have it,’” Trahan says. “Because you’ve just asked a busy person to go home and come back the next day for something. That ought to be extremely rare, because in most cases, these customers are going to drive by five other drug stores and find what they need. So have the core size categories, and have them well stocked.”

### PROPER PLACEMENT

Along with having enough quantity of key items, having it strategically located is another important factor. Trahan says that a number of core departments should be near

each other. These include analgesics, cough and cold, antacids, laxatives, first aid, and foot care, to name several. Health and beauty supplies—such as toothpaste, deodorant, skin care, hair care, feminine hygiene, and oral hygiene—should all be together on the same side of the store.

Trahan says that inventory has to be analyzed. Is it based on customer demand? Do they know what their best sellers are? Do they have a solid inventory? And where are these categories placed?

“I’ll say to somebody, ‘Well, you’ve got a 12-foot oral hygiene display, that’s not too bad. That seems like a good size for the business you tell me you’re doing,’” Trahan says. “But it’s in between the C&C and the analgesics—you’ll need to move it. And he’ll say, ‘Yeah, but that’s a lot of work.’ I’ll respond, ‘Well you only have to move it once.’ I can’t tell you how many times I hear that from people.”

In his opinion, Trahan can’t stress the core business enough.

At the 111th Annual NCPA Convention and Trade Exposition last October in New Orleans, Gabe Trahan presented two workshop seminars sponsored by **Activant Solutions Inc.** The first was “Merchandising in the Early Years: How to Create a Dynamic Store Front End,” and “How to Become an Exceptional Merchandiser.”

“People forget that they are a drug store first,” he says. “One of the biggest dangers, and a lot of people do it, is that they go out on to the shelf, and they say, ‘Alright, let’s pull everything that hasn’t sold in six months.’ And then their shelves have been picked over and they’re no longer a pharmacy. They’re a convenience store.”

Trahan says it’s only natural that there are peaks and valleys in sales, and owners need to recognize that and be patient.

“There are times when some things are going to sell better than others,” he says. “But to go and pull stuff off that hasn’t sold in six months, it’s like a dog chasing its own tail,

## PHARMACY REMODEL BROUGHT GRUMBLING—AND ADDED SALES

Pharmacy consultant Gabe Trahan recalls a client several years ago who had a successful pharmacy but was looking to expand the business. When customers opened the door, it was a short stroll to the pharmacy counter. Next to the pharmacy was a video store, which eventually closed. So the pharmacy owner leased the property, but didn’t get the desired results.

According to Trahan, “He filled it up with cards and he filled it up with gifts, but business still didn’t go up. The reason was that through main door was a 20-foot walk to the pharmacy. And people were so used to shooting in, getting their prescriptions, and shooting back out, that he could have put something for free on the other end of the store, and no one would have noticed.”

The owner asked Trahan for ideas. “He said his idea with leasing the video store was to expand his cards and gifts,” he says. “I said, ‘Okay, but nobody even knows you have them.’”

What they did was “drastic,” Trahan says. The pharmacy was left as it was, but the fixtures were turned around, the aisles widened, and a third of the card selection was cut, the goal being making the store much more comfortable to shop.

“It actually caused him not to sleep at night (being so stressed about the changes),” Trahan says, explaining

that they also switched the main entrance, moving it to the door that went to the old video location—meaning people had to travel the length of the store.

“We had to stop making it so easy for people to walk 20 feet, get their prescriptions, and leave,” he says. “The store still wasn’t that big—it was less than 4,000 square feet. We were asking them to walk the length of a Wal Mart, but we had to get traffic in every corner. It became a very roomy store.”

Still, as Trahan says, “People complained every minute. ‘Why did you move everything around?’” Another complaint was, “Geez, you moved everything again. It was too funny because it was the first time he had ever remodeled.”

But an interesting thing happened. The pharmacy’s sales went up 37 percent over a six-month period, compared to the six months of the year before. Things that had never sold before started selling.

“When you remodel you are breathing new life into your store,” Trahan says. “But a majority of customers are going to complain initially.”

Trahan says that for the owner, the additional revenue was worth some discontent. “He said to me, ‘That’s okay, let ’em complain.’”

—CL

*Before*



GABE TRAHAN

*After*



*Cutting fixtures and clutter improves the view and the shopping experience.*

and after awhile people aren't going in for you to get the basic items. Let's face it, when people are sick, they don't want to play Russian roulette. They don't want to guess if they are going to have it. They're going to go where they know they have it."

Still, all is not lost with an underwhelming front end. To put a positive spin, with some TLC the potential upside is lucrative.

"The more problems there are is good news for you," Trahan says with a laugh. "Because if there are a lot of things that need to be taken care of, and you're still making money right now, just think how good it's going to be when I take care of everything on our list." [ap](#)

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