Top Tips for increasing productivity in your pharmacy

Enabling growth and staying ahead of change
Community pharmacy – trying to stay ahead

- Government Cost Reductions
- Trend towards reducing number of items prescribed
- Increased need for Community Pharmacy to demonstrate they can offer reliable and consistent extended services
- Evidence to suggest there is potential for capacity release in dispensaries – enabling cost reduction and or growth
- Trend towards establishment of Primary Care ‘super-hubs’ with Pharmacies incorporated
  - Need for Community Pharmacy to ensure part of this movement
- Serious threat to Community Pharmacy of NOT acting now – cost increase / profit erosion
- Need to find time to handle Quality Payments
- Online Pharmacy competition
There are some BIG questions

- How do we cope with the cuts?
- What about when more cuts come?
- How do we find time to do new things when we’re already so busy?
- How can I increase revenues?
- What can I do to improve the situation?
- How do I engage and lead my team in making change happen and stick?
The answers lie in freeing up capacity

Velresco’s recent pilot study for the NPA found:

• An average of over 60 hours per month of dispensary time
  – Delivering more without stressing the team!

• Enabling the Pharmacist to delegate over 40 hours per month
  – Using just half this time for MUR, NMS and Flu jabs could yield up to £15000 extra per year
  – Leaving 20 hours for team development, extended services, leadership, strategic thinking…
So just how do we find this spare capacity?
Introducing v-Flow™

Velresco’s game-changing software enables:

• Deep, detailed observations to be captured ‘real-time’
• Study time to be halved – getting to benefits delivery faster
• Instant analysis and report production with one click
Velresco’s v-Flow™ enabled service

Week 1  Week 2  Week 3 / 4 …
Set Up  Observe  Report

Gather initial thoughts from stakeholders

Observe key processes and what is inhibiting ‘best’ performance

Observe ‘real’ performance (Role-based Activity, Process variability, Location analysis, etc.)

Validate ‘raw data’ and engage with front line team

Gather insight, build options assessment and feed back – ensure clear and committed to changes

v-Flow™ product
Overlaid with Team’s Psychological Journey

Week 1
- Connect and build trust

Week 2
- Demonstrate Evidence

Week 3 / 4 …
- Build ownership of changes to ways of working

- Empathise with stakeholders needs
- v-Flow™ product
- Emphasis on deep, detailed understanding of routine operation
- Connect with Team to understand what motivates current operational behaviours
- Excite the team with the ‘art of the possible’, accelerating acceptance of study findings and recommendations
- Agree changes to roles and behaviours which enable recommended ways of working to become the ‘new habit’ – helping change stick!

Vision Led Change™ simulation

Your NPA represents, supports, protects

8
We can use v-Flow™ for 3 key purposes

1. Improving process effectiveness
   - Identification of opportunities to remove wasted effort and reduce processing time
     • Examines all aspects affecting the process

2. Identifying potential for capacity release through effective role-use / delegation
   - For any given role, v-Flow™ can help determine how much time is CORE to that role and what should be delegated
     • E.g. what should a pharmacist really be doing?

3. Right-sizing the dispensary team
   - By timing active elements of the processes, accurately, the right resource requirement can be calculated
     • Enabling customers to be served correctly, as promised
It is important to define activities

<table>
<thead>
<tr>
<th>CORE</th>
<th>ENABLING</th>
<th>INHIBITING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Those process activities which TRULY add value</td>
<td>Those process activities which are necessary but which do not directly add value, but enable it</td>
<td>Those activities which add no value at all and waste time altogether</td>
</tr>
<tr>
<td>e.g. Accuracy and clinical check</td>
<td>e.g. Replenishing paper in a printer</td>
<td>e.g. Re-packing an erroneous MDS pack</td>
</tr>
<tr>
<td>Those activities done by a role-holder which only they should do</td>
<td>Those activities a role-holder should delegate if possible</td>
<td>Those activities which a role holder may have to do but which do not add value</td>
</tr>
<tr>
<td>e.g. A Pharmacist doing an MUR</td>
<td>e.g. A Pharmacist dispensing items or clearing down a work area</td>
<td>E.g. A Pharmacist dealing with a broken printer</td>
</tr>
</tbody>
</table>
NPA pilot study

• 8 dispensaries took part in the pilot programme
• Key personnel from each organisation attended the Vision Led Change™ workshop
• Each Dispensary then received a personally-presented, extensive report with findings and recommendations specific to each dispensary
• Velresco distilled the generic ‘Top Tips’ for all NPA members to benefit from – that’s what we’ll focus on now
We’ll now focus on the Top Tips…

Implementing these ‘top tips’ could enable you to save **up to** and average of:

- **63 hours a month** from improving dispensing processes
- **41 hours a month** from delegating ‘non-core’ tasks away from the pharmacist
- **16 hours a month** from improving your dispensary layout

* Based on 3000 scripts with 3 items per script.
Top Tip 1- Collection of pre-assembled prescriptions by patients

| Moving from a 2-step ‘matrix coded’ to an alphabetical stow system reduces collection time |
|---------------------------------|-------------------------------------------------------------------------------------------------|
| **Description**                 | Stapling / clipping the script to the bag and stowing alphabetically makes it faster to find when a customer comes to collect their script |
| **Saving**                      | It takes 25 seconds LESS time per prescription if bags are stowed alphabetically with the script attached to the bag – assuming 3000 prescriptions are collected per month, that saves **21 hours per month** |
| **Tips for implementation**     | • Make sure everything is ready for collection when it should be  
• Analyse your patients list and divide space to allow comfortable storage of prescription bags  
• Allow more spaces / split those letters which have high volumes |
## Top Tip 2 – Pre-dispensing prescriptions and stowing bags alphabetically

<table>
<thead>
<tr>
<th>Description</th>
<th>Attaching scripts to prescription bags and stowing alphabetically reduces overall processing time</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
<td>Stapling / clipping the script to the bag and stowing alphabetically is faster than stowing bags and then filing scripts separately</td>
</tr>
<tr>
<td><strong>Saving</strong></td>
<td>This saves 7 seconds per script – assuming 3000 scripts, this saves 6 hours per month</td>
</tr>
</tbody>
</table>
| **Tips for implementation** | • Analyse your patients list and divide space to allow comfortable storage of prescription bags  
• Allow more spaces / split those letters which have high volumes  
• Pharmacist (if doing this task) to delegate to MCA / Dispenser |
Top Tip 3 – Pre-dispensing prescriptions in advance of expected collection

<table>
<thead>
<tr>
<th>Make sure pre-dispensed prescriptions are <em>always</em> ready for collection</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
</tr>
<tr>
<td><strong>Saving</strong></td>
</tr>
</tbody>
</table>
| **Tips for implementation**                      | • Get patients to request prescriptions from GPs  
• Liaise with GPs to ensure scripts with Pharmacy by required time to allow timely dispensing  
• If needed, use overtime to get ‘on the front foot’ (temporary) |
### Top Tip 4 – Combining ‘endorse, print labels’ and ‘assemble / dispense’ steps into one

<table>
<thead>
<tr>
<th>Multi-tasking, using the time normally spent waiting for labels being printed</th>
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<td><strong>Description</strong></td>
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| **Tips for implementation** | • Communicate this as an expectation  
• Provide any training / coaching, where necessary  
• Make sure commonly required items are stored in easy reach to maximise time saving |
# Top Tip 5 – Combining ‘accuracy check’ and ‘bag items’ into one

<table>
<thead>
<tr>
<th>Description</th>
<th>Making efficient use of time, associated with unnecessary movements</th>
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<tbody>
<tr>
<td>We observed some Pharmacists putting checked items immediately into the bag, and others putting items down after the check until all items were checked – then picking them up again and putting into the bag (effectively 2 steps instead of 1)</td>
<td></td>
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<tr>
<td>Saving</td>
<td>We observed a saving of over 50 seconds per script where this was done. Assuming only ¼ of scripts are applicable (larger ones are more difficult to pack) this saves the Pharmacist <strong>10 hours per month</strong></td>
</tr>
</tbody>
</table>
| Tips for implementation                                                    | • For those scripts with fewer items, implement this practice  
• Where there are larger scripts with items which vary in size, it may be necessary to continue with separate steps to be able to pack the bag properly |
Top Tip 6 – Speeding up Acute (walk-in) prescriptions (v-Flow extracts)

Example 1:
Fast response policy in place for acute ‘walk-in’s
Avg. wait time 3 min

Example 2:
No fast-response policy in place for walk-ins
Avg. wait time 7 min
## Top Tip 6 – Speeding up Acute (walk-in) prescriptions

<table>
<thead>
<tr>
<th>Description</th>
<th>We observed average wait time for acute (walk-in) scripts processing at just under 8 minutes. Of this, the script was sat without activity 38% of the time, meaning the ACTUAL processing time was 4 minutes 30 seconds. Customers were encouraged to return or left voluntarily to pick up items later. If patient not present for handout, this led to additional activities (stow and retrieve; not necessary is patient stays)</th>
</tr>
</thead>
</table>
| Benefits | • Focusing attention on Acute scripts as priority reduces wait time and encourages patients to stay – may increase retail / OTC sales  
• Avoid extra processing time |
| Tips for implementation | • Set a policy that ‘Acutes are responded to immediately  
• Nominate an accountable person to prioritise ‘walk-in’ and establish a verbal (other other) cue to commence processing as soon as received – accelerating delivery to the patient |
Top Tip 7– Pharmacist Activity study: (v-Flow extract – high level view)
Top Tip 7– Pharmacist Activity study – second level (v-Flow extract)

- Checking
- Hand out and advise
- Public consultations and advice
- Dealing with clinical queries
- Clinical admin
- Private consultations
- Checking
- Processing script
- Break
- Controlled and special drug ad...
- Management and supervision
- Stock handling
- Serving customers front of store
- Rework
- Other
- Interruption
- Waiting and downtime

[Chart showing various activities with percentages]

High Level Analysis
Low Level Analysis
Dynamic Analysis
Show Summary
### Top Tip 7 – Pharmacist to delegate non-core activities

<table>
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<tr>
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<tbody>
<tr>
<td>Ensuring the Pharmacist concentrates effort on CORE activity – by delegating as much non-core activity as possible to their team</td>
<td></td>
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<tr>
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<tr>
<td>Achieving and maintaining a situation, to support the Community Pharmacy Forward View, where Pharmacists do not carry out non-core tasks</td>
<td></td>
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<tr>
<td>We observed an average of 22% of Pharmacist time as ‘enabling’ activity. 58% of this as ‘processing’ of scripts. By just delegating this, Pharmacists could save <strong>25 hours per month</strong></td>
<td></td>
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</table>

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<tr>
<td>There is much more potential to delegate more, dependent on capacity – to redirect effort to new and extended services fro growth in revenue</td>
<td></td>
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<table>
<thead>
<tr>
<th>Tips for implementation</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Implement changes to processes to free up capacity in dispensary team</td>
<td></td>
</tr>
<tr>
<td>Delegate non-core tasks with clear expectations</td>
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</tbody>
</table>
## Top Tip 8 – Improve dispensary layout

### Ensuring everything is where it should be and that process movements flow

<table>
<thead>
<tr>
<th>Description</th>
<th>Poor dispensary layout can lead to pharmacy staff making too many movements when picking medications for prescriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Saving</strong></td>
<td>Pharmacists can save even more time by delegating any replenishment activities&lt;br&gt;Our experience suggests a minimum of <strong>16 hours per month</strong></td>
</tr>
<tr>
<td><strong>Tips for implementation</strong></td>
<td>• Place equipment and consumables at the location where they are required in the process&lt;br&gt;• Make a junior member of staff responsible for checking and replenishing all equipment which uses consumables (from printers to staplers, bottle drawers to bad holders and so on)&lt;br&gt;• Ensure critical assets are maintained in working order&lt;br&gt;• Set out the movement flow for key processes in a logic flow and avoid cross-over of movements</td>
</tr>
</tbody>
</table>
For details of extra support

• For further details on the Top tips visit www.npa.co.uk/velresco-tips

• If you would like information on how Velresco could help free up capacity in your pharmacy visit www.npa.co.uk/increaseproductivity
  – Here you will find details on the various Velresco programmes that are available exclusively to NPA members