



**DON'T STOP  
THINKING  
ABOUT  
tomorrow**





## Making work flow the background music for innovation

by Jennifer Jelinek, CPhT

photos by Terry Scroggins

"You don't seem busy!" When we hear that from visiting pharmacists, we take it as a compliment. When they learn we may have dispensed 500 prescriptions with one pharmacist, the reply is, "No way!" This mirage is a result of how we have constructed our work flow at J&D TrueCare Pharmacy, Inc., in Warsaw, Mo.

Flying flawlessly in the background, work flow should allow you to focus on other profitable opportunities such as medication therapy management, vaccinations, adherence, disease state management, long-term care services, and transition of care relationships. Several years ago my pharmacist (store owner Don Grove, RPh), envi-

sioned a way to verify prescriptions much faster than we were currently doing it. As he would imagine it, I would draw it out and redesign his ideas where they were more practical. In the last three years, with software work flow and technology advances, we continue to imagine newly designed work stations and augmentation strategies to increase speed and accuracy. Recently, we realized that Albert Einstein quote (above) had become true for us. We no longer had a coming attraction; it had arrived. As a successful independent pharmacy in its 34th year of business, our approach to work flow encompasses employee contribution, technology, turbulence reduction, and refined work stations.

***'Imagination  
is everything.  
It is the preview  
of life's coming  
attractions.'***

Albert Einstein

These four areas are necessities to perfectly executed work flow. Every change or implementation that contributes even the tiniest amount to increasing accuracy, speed, patient/employee satisfaction, or cost reduction is a work flow victory! This translates to an increased yearly net profit of \$135,000.

Eradicating complacency is paramount. We have become blind to things we do every day. Sometimes nostalgia is to blame. For example, we had a "little black box" that held daily charge tickets. It originally was black, but had been yellow for years. We even took the time to label the yellow box the "black box" before finally giving up





our bad habit, which always confused new employees. We continued placing these tickets in a mislabeled box before realizing we were duplicating what our software was doing for us. At one time, it made sense to have our “doctor faxes” located next to the pharmacist. And because they were always there, that is where they remained. Someone finally asked, “Why do we traverse the pharmacy to file these at the pharmacist station when the pharmacist never refers to them?” A simple move to keep them at the entering technician station made them readily accessible for patient questions and allowed them to be filed where they were printed. Stop, think, and fix it!

### **EMPLOYEE CONTRIBUTION**

The best processes will yield poor results 100 percent of the time if your team is not involved, trained, and engaged. Our pharmacy team meets regularly to train, discuss successes and failures, and gather ideas. Employees have the ability to recognize each other with “Spot Awards” for

outstanding contributions. For example, an employee made it her mission to get our “will call” prescriptions picked up each month, and monitored her own success. Her coworker recognized this accomplishment in a Spot Award. She was rewarded in one of our team meetings with a personal item meaningful to her. Management also rewards outstanding contributions in creative ways. For example, employees are rewarded for their individual contributions to the growth of our adherence program. This reward was based on criteria established by management that ended in a win-win-win for the pharmacy, the employee, and the patient.


Employees are placed in positions where they thrive, resulting in eventual ownership of their piece of the process. There is also cross-training to back fill each position in an emergency. If you don't have the gift of knowing where an employee thrives, a reputable personality evaluation is an accurate and inexpensive tool. The results

***J&D TrueCare Pharmacy owner Don Grove, RPh, and managing technician (and author) Jennifer Jelinek, CPbT.***

provide insight to maximize the employee's strengths along with contributing to his/her personal fulfillment. We have given our employees the tools they need to grow, which in turn help the store succeed. For our technicians, the duty list is aligned in pay ranges by difficulty and experience of levels 1, 2, and 3. The power to plateau or grow is in the individual's hands. Exactly what we expect and measure is clearly defined. Your chain is only as strong as your weakest link. Strengthen these links through training or remove them.

Provide a comfortable and inviting work atmosphere. Most pharmacy technicians stand all day. What do they stand on? Do they have personal touches like family pictures surrounding them? What does their break area look like? The break room at J&D Pharmacy has a computer, giving





our employees an outlet for Internet use without carrying as much risk at technician work stations. For a small price, there's also a stocked refrigerator and pantry to provide the employees a quick snack on the days they really need it. Aside from the big things, what little things can you do for your employees that whisper to them that you care?

Do you have an over-the-counter staff and a group of technicians, or do you have a pharmacy team? Don't forget the importance of your front-line employees. Does your culture provide your front-end employees the tools to take ownership for helping patients and improving your bottom line, or does it foster a disconnect between the front-end and pharmacy department?

A patient services coordinator can fill a huge void when technician ratios limit you. Without ever performing the technical tasks of dispensing, this invaluable "people" person can manage adherence patients, schedule MTM appointments, organize vaccination clinics, provide luncheons for nursing homes or other clients, and take blood pressure readings. Carefully constructed patient information sheets are also turned over to this person. Along with updating the conventional patient information, the coordinator can follow up on any of our other available services that we know interests the patient. This person can also keep work flow running smoothly, and allowing the new patient to receive personal attention. This position could

be someone with nursing experience, who could also provide other health-related services such as diabetes education, without the burden of an additional pharmacist salary.

Pharmacists should also be aligned with their passion, whether it be in clinical duties or production. On a busy day with two pharmacists on duty, your process will run much smoother when one is clearly checking prescriptions, while the other jumps on counseling, phone calls, and other clinical outliers.

### **TECHNOLOGY REIGNS**

The technology you provide for your now superior employees can be their best friend or their biggest foe. New technology being considered for your pharmacy should first pass a number of due diligence tests. It must first prove it will both be financially viable and a value to your productivity. You should know exactly how it will work in your processes from A-Z before implementation. Your entire staff should be given the opportunity to voice their concerns, ask questions, and provide their input. Again, carefully planning how a newly implemented technology will affect all processes in the big picture and planning for those effects will make all of the difference between an improved work flow and a waste of time and money. Once a new technology is in place, there should also be a well-thought-out plan for

maintaining it. A robot may pass all the financial and production viability tests and your implementation may be flawless. However, if you put no planning into how the robot will be maintained, and it makes errors because it is out of calibration, the result will be lower productivity and stressed out employees.

We believe there are a few technology no-brainers for most independent pharmacies. First, install an integrated voice response system. I was shocked to read that only 31 percent of independent pharmacies surveyed in the *2013 NCPA Digest*, sponsored by Cardinal Health, were utilizing a telephone IVR. Even those holding on to the value of a real person answering the phone (I am one of those people) can offer the first option of being transferred to a staff member. For us personally, the IVR handles a significant portion of our calls. Approximately 10 percent of our prescriptions for the day are on the IVR from the night before, allowing us to get those prescriptions ready without interruption prior to opening our doors. Our patients are allowed the convenience of calling on their schedule instead of ours. Headsets for the technicians not dealing directly with the public are a must. They allow the technician to move and type freely, improving and encouraging multi-tasking while aiding in personal comfort and avoiding workers' compensation claims.







***Clockwise from top: Choosing the right software is a must; a well-stocked break room provides a nice respite during the day; magnetic fobs enhance security within the pharmacy.***

Your choice of pharmacy software could be one of your most important decisions you'll make, and you shouldn't be afraid of changing if it doesn't provide the solutions you need. After 20 years with the same company, we chose a different software provider about 10 years ago. There are certainly some stand-out "must haves." Number one is an electronic ordering solution. Work flow is a moot point if you can't manage your cost of goods. Inventory control is certainly a topic within itself, but having the ability to manage a perpetual inventory efficiently via an electronic interface with our wholesalers through our pharmacy



software is both time and cost saving. Our processes decrease our inventory significantly, allowing us to average 18 turns, compared to the 12.7 noted in the *2013 Digest*.

Your software should allow you to scan original prescriptions immediately at point of entry to prevent having to pass on any paper and allow for electronic verification. Any required "hard copy" stickers should auto print at entry to allow for immediate filing of the original prescription. No more after-the-fact matching up, double checking, and filing hundreds of prescriptions. As a well-trained entry technician places originals

in labeled sections, the time-consuming process of filing hard copies is completed with few exceptions.

Utilizing a "queue" system allows technician positions to be clearly defined. Prescriptions are easily prioritized in time order or by label note specifications. Breaking up the entering and the counting functions using an electronic queue prevents passing along paperwork and notes, and preventing piles of prescriptions on a counter top getting lost or out of order.

Touchscreen capability versus that pesky mouse allows us to save seconds that add up in our point-of-sale processes. All-in-one computers allow for a streamlined look and provide more space for function by eliminating bulky towers. Bin management allows completed prescriptions to be checked into trackable numbered bins ready for pick-up. Front-end staff is able to package by priority and can take the time to match up tickets and bottles during down time. Medication leaflets also print at bin management, lessening the chance for this information to be separated or forgotten in the process. Bin management tickets allow clerks to quickly ring up the patient in one scan versus a separate scan for every prescription. This process also lessens the frequency that unpaid prescriptions walk out the door as a result of missed labels scanned in a hurry. The patient no longer has to wait as long at



checkout, leaving plenty of time at the register to add a good privacy check such as date-of-birth verification. If a clerk doesn't notice a patient waiting in the store, an electronic message board gives the patient the opportunity to see their name appear in a recently ready queue. This message board also serves as a marketing opportunity for other services provided by our pharmacy.

Using a tablet for delivery allows your staff to access where your delivery driver is on the GPS map, what deliveries have been made, and can plot the most effective route for the day's stops. No more calling delivery people to find out where they have been and then calling patients back. The electronic signature also allows us to instantly confirm delivery, thus eliminating the manual check-in when the driver returns to the pharmacy.

Magnetic fobs allow for quick programming of staff members who have access to your pharmacy, and at what hours. Your computer link can track who came in and when, 24/7. The fob can be conveniently worn on a lanyard.

Double up by using the fob instead of a narcotic cabinet key. These fobs can be used to access the cabinet much quicker, while at the same time resulting in more accountability and tracking. You'll never have to call a locksmith again after an employee leaves your employ. This should also help your pharmacist-in-charge feel more secure with increased Drug Enforcement Administration regulations.

Electronic educational resources are certainly a growing part of our future. RxWiki is a fantastic and FREE resource for NCPA members ([www.ncpanet.org/digitalpharmacist](http://www.ncpanet.org/digitalpharmacist)). It is a comprehensive, easy-to-read resource for medications and conditions. As a bonus, your pharmacy name appears in the app. (See page 38.)

### **TURBULENCE REDUCTION**

Turbulence, a disruptive slow down, comes at us from all directions. Instead of letting problems, slowdowns, and unpredictability dictate our day, we constantly do what we can to gain control. Adherence is the most powerful tool for taking charge of your day. We currently fill 21 percent of our sales in one of two

types of adherence programs offered to our retail customers. Scheduling needs can now be better predicted by time of day and by the time of the month. We can schedule more staff early in the morning before we open. Adherence prescriptions combined with what was called into the IVR and prescribed electronically account for about 35 percent of our day's volume and can be dispensed before we open or soon after. This leaves more of our day to focus on the patients who are waiting without always being in such a stressful rush.

Other benefits of adherence include just-in-time inventory, customer satisfaction, and measurable quality-of-care. As an added bonus our work flow management strategy allows more of our employees to work earlier shifts, something they value. A solid adherence program is an absolute must.

Having good plans of action in place for other turbulence adds up to a smooth work flow process. Technicians should know who should and how to handle insurance rejections, underpaid claims, and physician questions with very little interruption. There can be a positive solution for what is normally a negative problem. We all run out of something sometime. It is an inconvenience in our work flow and for our patients. It is also necessary to "special order" costly items. Instead of simply apologizing and asking the patient to come back for the out-of-stock item, we provide them a notice of what they are owed and when it is expected. That same notice serves as a coupon for a free \$1 item when they return to pick up what is owed to them. This notice has corrected confusion and frustration about what is owed. (Some patients actually hope we run out so they can get the consolation prize.)

### **INNOVATIVE WORK STATIONS: COMING ATTRACTIONS**

Innovative work stations can meld your people with your technology.

#### **Don Grove's Top Reasons for Work Flow and Redesign**

1. **Increased net profit result** from increased speed and productivity of pharmacists and technicians by decreasing your second-largest expense, wages.
2. **Better utilization** of individual pharmacist skills. Production pharmacist frees the clinical pharmacist to work in their expertise.
3. **Increased accuracy** assures patients they are being well taken care of and gives fellow health care providers the assurance of safety in this pharmacy, which will increase referrals.
4. **Employee satisfaction levels** increase dramatically and help to hire and retain best of class employees.
5. **Redesign of point-of-sale** reduces the fishbowl viewing of pharmacy staff. This allows more freedom of interaction between pharmacist and technicians, more privacy on the phone with health care providers, and less HIPAA concerns.
6. **Inventory carousels** increase technician retrieval speed while increasing selection accuracy and replacing metal fixtures with more décor friendly fixtures.
7. **Maximum speed** and reduced anxiety of all employees is accomplished by the urgency colored bags or transparent prescription retaining devices staying consistent, with a balance of patient urgency and receipt of prescription orders.

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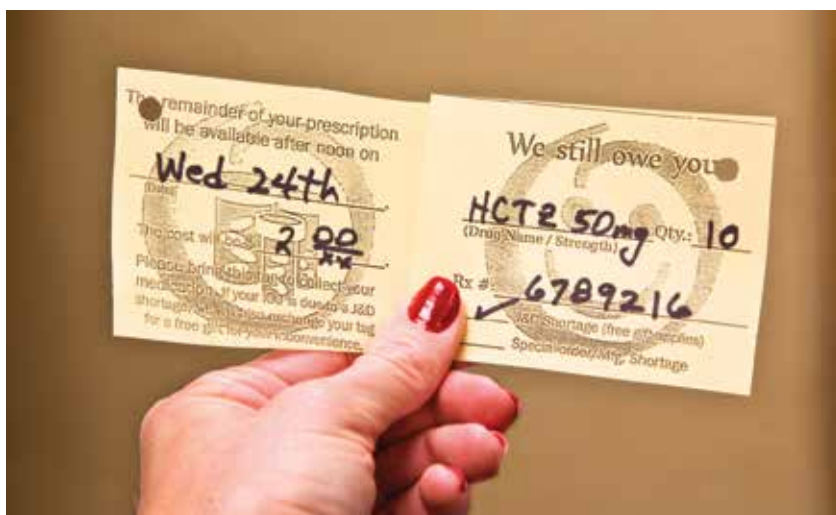




This is a place to plan every detailed motion efficiently. Some of our innovations include thinking round versus rectangular and going vertical versus horizontal. Carousels will save steps while increasing retrieval time and accuracy. Eliminate those prescription buckets that are always the wrong size, tip over, won't stack properly, and hide your tickets. Transparent plastic prescription hanging bags with handles will free up horizontal work space for pharmacists. By adding priority color coding and ticket and auxiliary label pouches, they are converted into expandable saddle bags designed to maximize speed and accuracy. Add a tall carousel that keeps the bags in alphabetical order so the employees can now dispense according to color coded urgency before the patients arrive.



The entering technician sits in an open window and receives prescriptions from all sources, including patients, IVR, fax, e-scripts, pharmacy app, or a website. Prescriptions are entered and scanned into an electronic holding queue for the counting tech to "pick" by color coded urgency.



**Technician Vania Caswell uses a bead-set, allowing her to move freely and multi-task. At bottom, "special order" cards can help reduce frustration when items are out of stock.**



Of course, we have a second window for the overflow so patients don't have to wait.

When the prescriptions are removed from the queue and the labels are printed, the completed prescriptions are placed in a transparent hang up bag according to colors. A waiting patient receives a color-coded red bag where urgent care technicians fill their prescriptions first. Soon to arrive patients are given a yellow-coded bag to be processed after the urgent prescriptions are handled. Green is environmentally friendly and corresponds to most of our adherence prescriptions, where the patient will not normally come in until the next day. Let your technicians enjoy the day and their work, knowing there is no urgency. A rainbow colored-coded bag warns the technician and pharmacist that it contains something unusual. It might be an antibiotic that needs to be mixed, medication that needs to be refrigerated, a special order, a medication that costs more than a Hawaiian vacation, a patient who hasn't agreed to pay, or an insurance problem that needs to be resolved. This proactive process lessens the stress level of ALL employees.

Each technician has their own beautifully crafted, customized work station with two bag hanging areas for empty stock bags and prescription filled bags. Bottle bays and touch screen computers never leave their side, while inventory carousels carrying the fast movers are only a step away. After prescription bags are delivered to the separated pharmacy work station and hung in alphabetical order on a bag carousel, the pharmacist can also work according to color urgency. After verification, the pharmacist moves them to the bin management holding area, where the OTC staff can again bag according to urgency. Tickets are clearly seen on the outside of the bags and easily retrieved, a much

more efficient task than searching the 20-40 baskets that never used to be in alphabetical order. Auxiliary labels in the back pouch prevent errors and unintended consequences.

Medication should be as condensed, organized, and as close to your counting technician as possible. Conventional pharmacy shelving is horizontal, stretching across valuable floor space and conducive to long walks. Converting to round inventory carousels may allow a smaller footprint and faster return time. Each inventory level spins independently, allowing several technicians to work on the same carousel. Close proximity of all medications makes drugs easy to pick. Carousels allow for many creative layouts customized to our volume. In our case, automation is warranted for our top drugs. Drugs housed in automation or carousels are visibly noted on prescription labels. This allows the technician to pick and prepare other medications while the robot works on the fast movers. Specially made drug dividers keep our inventory organized. Mingling stock bottles can be a big contributor to costly inventory errors. How many times have you told a patient you were out of stock or had to re-order a product, only to find it on your shelf later? These unique dividers are an inexpensive solution to an expensive problem.

Once again, the pharmacist verification work station allows one pharmacist to work independently. He or she is always one or two steps from both a counseling window and the bin management holding area. The pharmacist will be able to do a visual assessment of prioritized bagged prescriptions and evaluate where they stand in completing all prescriptions. A vertical carousel holding the prescription bags is placed between the two pharmacist stations or next to the single work station. Again, each carousel level spins independently of the other.

Most independent pharmacies allow technicians to enter prescriptions. At the verification later by the pharmacist, a mistake is discovered, creating turbulence. The prescription must now be reversed and filled again correctly. To help avoid this, we have the initial inputted prescription screen sent to the pharmacist prior to sending to the insurance carrier. This requires extra time up front and reduces verification time toward the end of the work flow. It has increased our accuracy and saves us money on insurance edits, time and frustration if one thing is wrong, such as quantity or a physician's name. Our software includes the ability to turn off this function when only one pharmacist is available. After a quick preview, the pharmacist sends the prescription on to insurance. The second pharmacist then checks the final product, assuring four people checks and two IT scan checks. Voila—speed, accuracy, and little-to-no turbulence with numbers approaching 300-500 verifications per pharmacist, instead of 120-150 in a typical pharmacy.

## NETWORKING AND LEARNING

We have been very fortunate to network with other successful pharmacies, software providers, pharmacy business solution groups, and business consultants that contribute to our operations, along with support staff in finance, marketing, and IT. Networking and learning from others as much as possible has always been a strong part of our culture. It is our hope that a portion of our experience will impart useful information for your pharmacy.

Not changing what works, yet constantly evaluating and changing what doesn't, will hopefully keep our work flow running as a quiet backdrop to a successful independent pharmacy well into the future. ■

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