Effectiveness and efficiency in the dispensary
Unearth the opportunity by reviewing workflow practices

SIGNIFICANT IMPROVEMENTS IN THE EFFECTIVENESS AND EFFICIENCY OF PROCESSES WITHIN THE DISPENSARY OF MOST PHARMACIES ARE VERY POSSIBLE SAYS WORKFLOW ANALYST GLENN GUILFOYLE.

KEY POINTS

- The dispensary workflow of many Australian community pharmacies has been analysed to consider whether their processes are efficient or effective.
- This analysis demonstrates there are significant opportunities to improve dispensary efficiency and effectiveness.
- These opportunities involve: reducing script waiting time; encouraging customers to wait while their script is being processed and adding value to their experiences while they wait; increasing the time customers are effectively engaged during their visit; and re-engineering work processes and staff accountability.

Remember the cute little anecdote from the Stephen Covey classic, The 7 Habits of Highly Effective People… the one about the cadre of machete-cutters cutting their way through the jungle?

The cutters continuously figure out ways to cut more methodically and in better teamwork unison so as to cut their way through the jungle more quickly. Suddenly, one of the cutters climbs one of the jungle trees to peer out to the horizon. ‘Hey guys, we are cutting in the wrong direction!’ came the exaltation from above. ‘Shut up!’ resounded the chorus from below, ‘we are cutting more quickly and making faster progress!’

In recent years I have observed and studied the workflows of numerous dispensaries and have pondered this Coveyism more than once. Positioned on ‘the other side’ from me is the pharmacist, working in and making a living from the dispensary. My work has led me to consider whether such pharmacists have asked themselves:

- What does dispensary effectiveness mean to you?
- What should it look like?
- What about its efficiency versus what it could be?
- How would your answers compare to the answers of your waiting customers if we asked them?
- Can dispensary effectiveness and efficiency, from the perspective of both you and your and your customer, co-exist in mutual harmony?
- Have you ever deliberated these question and answers?

I have a view on these considerations but it’s important that you understand that my perspective is that of a non-pharmacist. I am, for my sins, a trained and qualified workflow analysis specialist. And the company I represent, The Next Level, has studied dispensary workflows of numerous dispensary sites over the past three years.

And I believe that our learnings are important to pharmacists in part because not being a pharmacist affords me impartiality. But before I share with you what I believe to be some ‘gob-smacking’ statistics from our work, allow me first to posit some definitional parameters.

**ACTIVITY VALUE CATEGORISATION: WHEN THE CUSTOMER HAS GONE AND THE SCRIPT IS BEING PROCESSED**

‘Value add’ is where the customer is engaged by a member of the dispensing team and the dispensing team member is proactively initiating consultation and conversation in support of health solution advisory.

‘Value neutral’ is where the customer is engaged, but the customer is initiating conversation or consultation, or the customer and dispensing team member are engaging in non-value adding, non-value destroying or risk management discussions.

‘Risk management’ is where the dispensing team member is advising the customer how to take the dispensed medication effectively and safely.

‘Value destroying’ is any example of process failure, most notably waiting. This would also include time spent involved in out-of-stock discussions.

**ACTIVITY VALUE CATEGORISATION: WHEN THE CUSTOMER IS AT THE DISPENSARY**

‘Black space’ is time spent when the script is actively being processed.

‘White space’ is time spent when the script is sitting idle and not being actively worked.

**WORKFLOW PERFORMANCE DEFINITIONS**

‘Average duration of script customer lifecycle’ is measured in minutes: seconds and shows the average duration of the customer...