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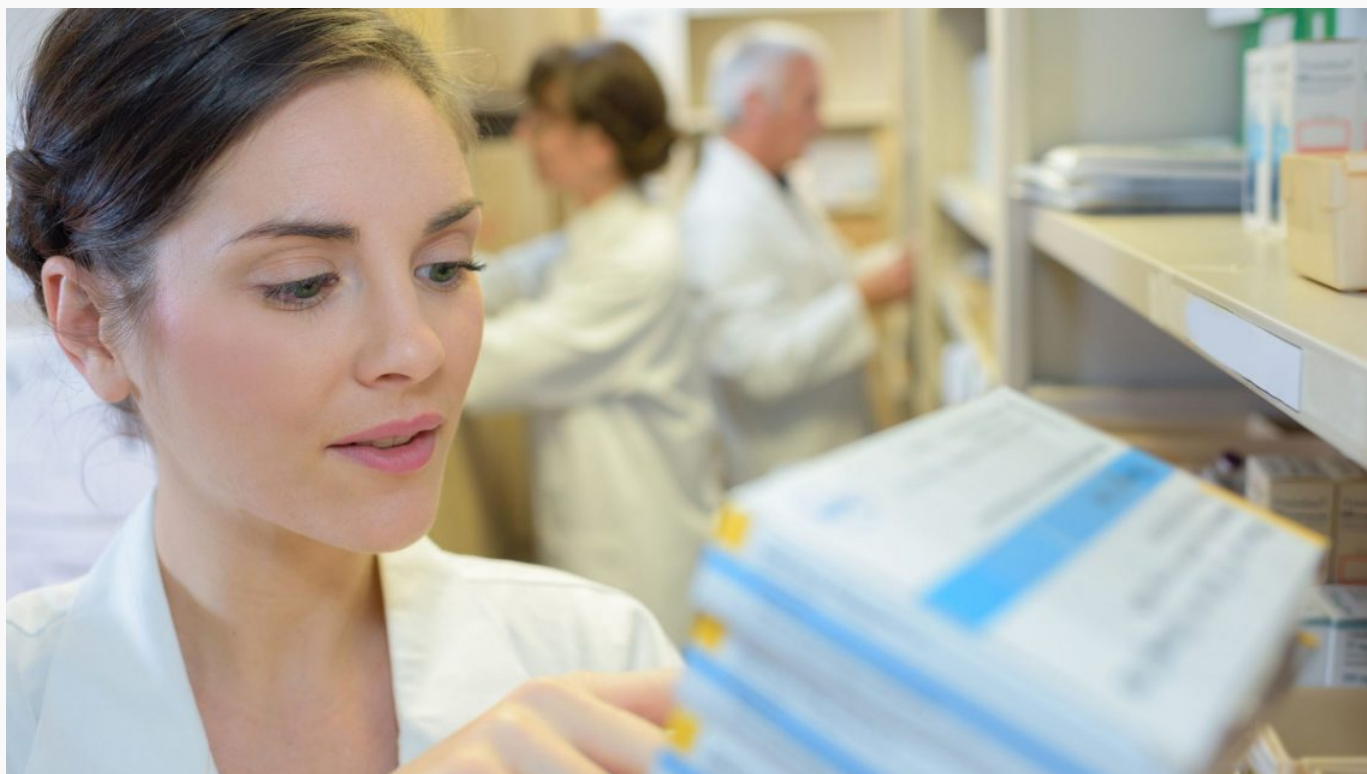
COLUMNS

APPLYING PRODUCTION-LINE PHILOSOPHY TO PHARMACY?



GUEST AUTHOR — 03/12/2018

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How assembly line theory can help maximise efficiency and effectiveness in community pharmacy, by Glenn Guilfoyle

Readers of the trade press over recent months will have had opportunity to digest the [nine pathways espoused in CP2025](#).

One of these pathways describes the importance of improving business operations and, in particular, observing workflows and reviewing procedures to look for opportunities for improvement.

In considering how you might apply this to your pharmacy, it is useful to revisit the basic fundamentals of assembly line theory. A quick “wikipeep” reminds us:

An assembly line is a manufacturing process in which parts are added as the semi-finished assembly moves from workstation to workstation, where the parts are added in sequence until the final assembly is produced.

By mechanically moving the parts to the assembly work and moving the semi-finished assembly from work station to work station, a finished product can be assembled faster and with less labour than by having workers carry parts to a stationary piece for assembly.

According to Henry Ford:

1. ***Place the tools and the men in the sequence of the operation so that each component part shall travel the least possible distance while in the process of finishing.***
2. ***Use work slides or some other form of carrier so that when a workman completes his operation, he drops the part always in the same place—which place must always be the most convenient place to his hand—and if possible have gravity carry the part to the next workman for his own.***
3. ***Use sliding assembling lines by which the parts to be assembled are delivered at convenient distances.***

Assembly lines are common methods of assembling complex items such as automobiles and other transportation equipment, household appliances and electronic goods.

So how does this apply to the dispensary?

Our studies at The Next Level – spanning more than 300 real-time observational data collections and analyses of customer engagement and script processing – indicate more often than not, optimal applications from assembly line theory are absent.

Our pharmacist conversations indicate perceived “non applicability”, that the dispensary processes serve people, not make widgets; are health-oriented not production-oriented; are individual not en masse.

I agree with all that. Counterintuitively, that is exactly why retail pharmacy should adopt and tailor assembly line principles. Think of your key production points as follows:

- Script In (ideally separated from Script Out)
- Tech processing bench (ideally a no-pharmacist zone)
- Pharmacist checking bench (ideally within a few steps at most from both the Tech processing bench and the Script Out counter)
- Meds for collection bay (ideally within a few steps from the Pharmacist checking bench and the Script Out counter)
- Script out (ideally separated from Script In but proximal to OTC counter)

If these production stations can be physically laid out in an assembly line (or inverted U shape) then you afford yourself the best chance of one-way production flow.

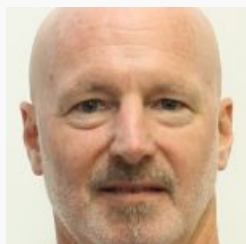
This affords you the best chance of rostering for skills specialisation at each station.

In turn, this affords you the best chance of maximum efficiency at the first four stations mentioned above, as well as maximum effectiveness (customer engagement) at the last five stations mentioned above.

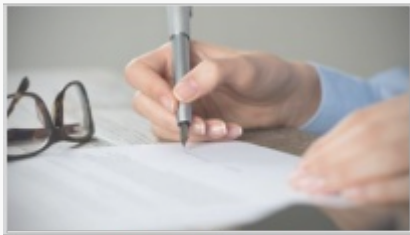
Counterintuitively or otherwise, this is why an assembly line set up is best for serving people as well as making widgets; health orientation as well as production orientation; individual as well as en masse.

Too often pharmacy teams give themselves no chance of consistent one-way production flow with all these associated benefits because “Rafferty’s Rules” apply at the serving counters, i.e. customers are served at any of the back counters that they or staff choose.

Glenn Guilfoyle is principal of The Next Level. Contact him [here](#) or by calling 0418 519 755 .



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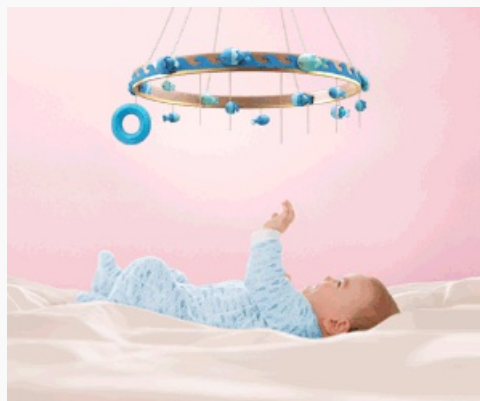


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POLL

How many hours should pharmacy owners be required to work in each of their pharmacies? *

- ☐ There should be no mandatory work requirements for owners
- ☐ <150 hours
- ☐ 250 hours
- ☐ 350 hours
- ☐ >350 hours

*Per year

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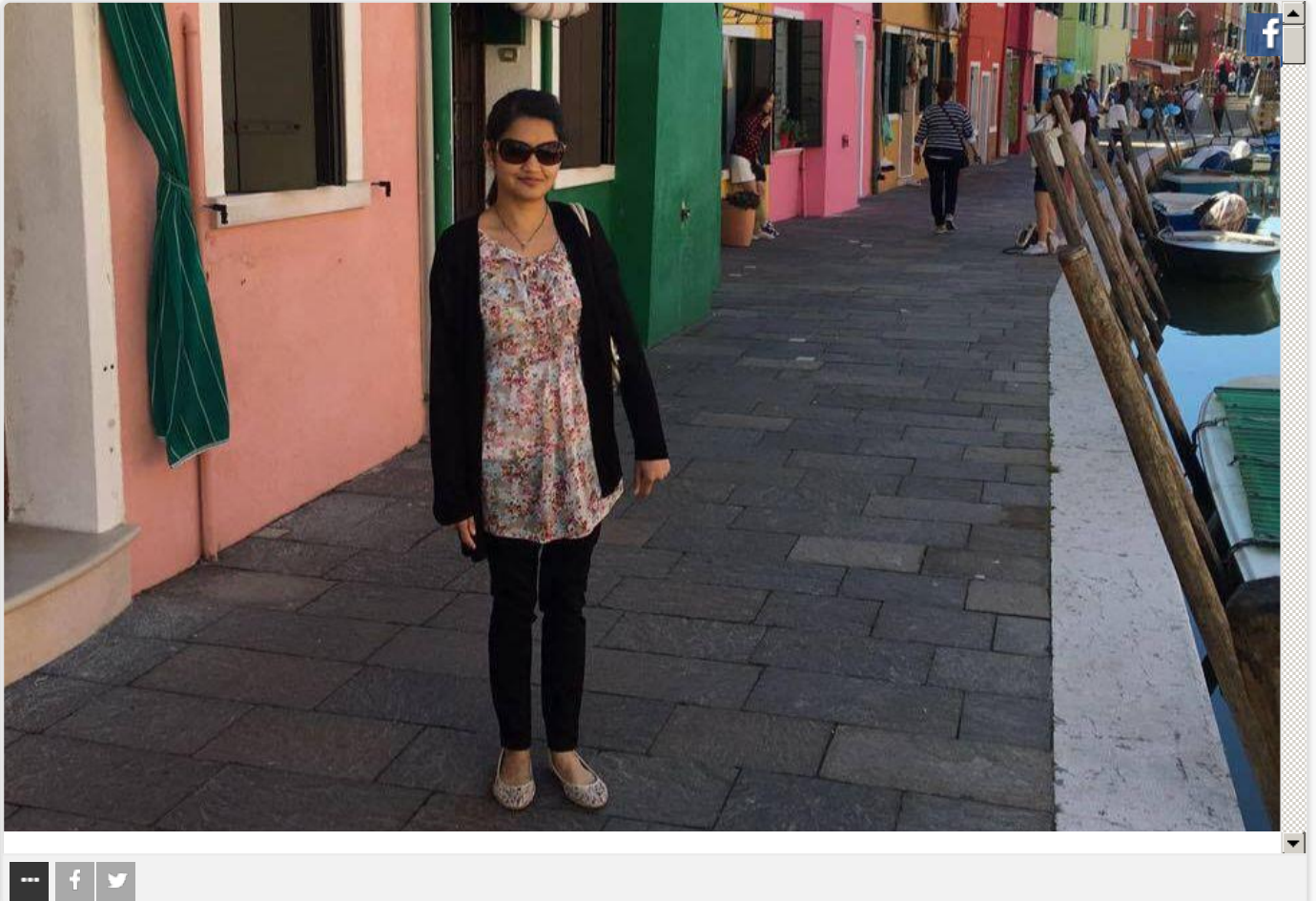


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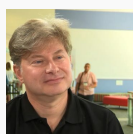
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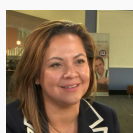
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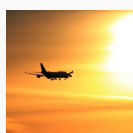
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