Water from a Rock: How to Expand Services Without Increasing FTEs
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Disclosure

• The speaker has no actual or potential conflict of interest in relation to this program
Objectives (Pharmacists)

- Explain the process for requesting and justifying additional resources as well as potential reasons for denial
- List common opportunities for improvement in hospital pharmacy efficiency
- Name the key stakeholders for implementation of clinical services
- Describe methods available to provide services with partial resources
Objectives (Technicians)

• List common opportunities for improvement in hospital pharmacy efficiency
• Explain activities that pharmacy technicians can perform without pharmacist oversight
Agenda

• The formal request for FTEs – and when to give up!
• **Finding innovative ways to meet your needs**
  – Creating efficiencies
  – Identifying and prioritizing needs
  – Stakeholders
• **Implementing a novel workflow to expand pharmacy services**
Agenda

- Ask for time
- Find time
- Use the time you found
The FTE Ask

- Significant variability depending on your health-system
- Ranges from simple ask to formal business plan
- Depending on financial climate, difficulty may vary
- Multiple attempts may be effective
Why FTEs Are So Hard To Get

• FTEs, especially pharmacists, are expensive
  – Benefits cost
  – Orientation
  – Ongoing training
• The return on investment is non-existent
• Everyone is concerned about population health, and downsizing is costly and tough on morale
• It’s not always about the money
  – FTEs also contribute to:
    • Credit rating
    • Risk/liability
    • Oversight and management needs

Moody’s Investors Service. March 5, 2012.
They Said No – Now What

• Communicate the long-term plan
• Don’t give up
• Understand where financial pressures are coming from
• Begin investigating where your needs for expansion lie
Finding Time

- Remove/reduce unnecessary tasks
- Leverage technician-driven processes
- Implement technology solutions
- Outsource
- Take a look at the schedule
Unnecessary Tasks

• Implement LEAN methodology
• Start with things that have been in place for years
• Common areas for improvement
  – Over-processing items for convenience sake
    • Pharmacy-created boxes and/or kits
    • Tagging and/or relabeling items
  – Understand the true purpose for all tasks not vital to patient care
    • “Compliance standard” vs over-analysis
  – Traveling to an area several times to complete similar tasks
    • Example: refill in AM, expire at noon, empty return bin in PM

Leverage Technician-Driven Processes

• Automated dispensing cabinet vs. floor stock
• Maximize restocking and dispensing that can be done before checking
• Utilize technicians for non-dispensing functions
  – Report analysis
  – Compliance-related tasks
  – Documentation

Implement Technology Solutions and Outsource

• These cost money – understand the financial pressures of your organization

• Automation
  – Seek out opportunities to reduce or remove pharmacist checks

• Repackaging and compounding
Scheduling

- Save this for last
  - Previous efficiency gains and the plan for the new service may impact scheduling needs

- Evaluate peak workload times against the schedule
  - Change times as necessary to meet needs

- Reschedule non time-critical task to lower productivity times

- Caution! – don’t lose sight of existing activities that must get done when you do this step
Developing the Service

• Engage Stakeholders

• Create the Process

• Roll it Out
Engage Stakeholders

• Carefully evaluate stakeholders
• Include anyone that could be impacted by the service
  – Especially if they want or need something from you
• Engage early
• Allow stakeholders to weigh in on priority items or patients
• Keep the leadership that denied your FTE ask informed
What To Do With the (little) time you found

• You will never find enough time to do what you want

• Be innovative, not only in WHAT you do, but HOW you do it
  – The Innovators Hypothesis

• Be specific, and create a process that:
  – Meets the stakeholders needs
  – Lives within the restrictions of your time

• Establish goals that you can meet
  – Target something specific that you want to impact
  – Start SMALL
How to roll it out

• Make it sustainable
  – The goal is justification of FTEs, but it has to work without them

• Make this a big deal – if it feels like a pilot, it will be treated like one
  – Communicate this like a new service line

• Prep your staff to participate in and support the service
Case – Doctors Hospital

- 263 Licensed Beds
- 80,000 ED visits/year
- Deployed pharmacist in ICU
- Requests from nursing/physicians to expand clinical coverage
Finding Efficiencies

• Remove/reduce work
  – Retired unnecessary boxes that required manual checks
  – Pared down items that did require manual checks to only necessary items
• Maximized technology to remove manual manipulation
  – RFID checking of anesthesia carts
  – Implementation of automation dispensing cabinets
• Outsourcing
  – Repackaging
  – Compounding
• Rewrote technician schedule to meet demands of the day
  – Optimized ADC par levels to remove one fill daily
The New Clinical Pharmacy Service

- Net gain – 3.5 hours of RPh time Monday-Friday
- Engaged quality, physician leadership, and nursing leadership
  - Determined patient population and services to target
  - Added in physician group and nursing from floor to discuss implementation
- Targeted improvement of discharge transition
  - Seated/phone rounds with physician
  - Focus on therapies preventing discharge and medication reconciliation
- Pharmacist stationed in the target unit from 10:30AM-2PM
- Expansion of role to more traditional drug therapy management as efficiencies were gained in the new role
Other Considerations

• This process can take a LONG time – establish a vision and maintain it
• Because any new work will be done by current staff, finding the right person and establishing training will be vital to success
• Communicate updates to all of your stakeholders
• As necessary, tweak the process to make the most of your time
• Evaluate outcomes and use this service as justification for the next ask
“Innovation has nothing to do with how many R & D dollars you have”... ... “It's not about money. It's about the people you have, how you're led, and how much you get it.”

Steve Jobs
Questions
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