

**Quality and Productivity Commission  
31<sup>st</sup> Annual Productivity and Quality Awards Program  
"Celebrating Quality Service"**

**2017 APPLICATION**

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

**NAME OF PROJECT:** Wait Time Reduction LAC Clinic Tower Pharmacy

**DATE OF IMPLEMENTATION/ADOPTION:** MAY 29, 2015  
(Must have been implemented at least one year - on or before July 1, 2016)

**PROJECT STATUS:**  Ongoing  One-time only

**HAS YOUR DEPARTMENT PREVIOUSLY SUBMITTED THIS PROJECT?**  Yes  No

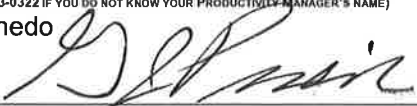

**EXECUTIVE SUMMARY:**

The primary project objective was to reduce the amount of time patients spend waiting to pick up prescription medications at the Clinic Tower Pharmacy. As the largest pharmacy in Los Angeles County DHS, the CT outpatient pharmacy fills 30,000 prescriptions per month. Prior to project initiation, average patient wait time was in excess of 120 minutes. Review and reconstruction of established workflows, education and engagement of key department stakeholders, and creating focus on both the patient's care and customer satisfaction, in concert with consistent staff feedback were primary levers to success. The most recent data demonstrates an average wait time of 32 minutes, a reduction of 73%.

**BENEFITS TO THE COUNTY**

(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$	\$	\$	\$	<input checked="" type="checkbox"/>

**ANNUAL = 12 MONTHS ONLY**

<b>SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS</b> Clinic Tower Pharmacy 1200 North State Street #A1C109 Los Angeles CA 90033		<b>TELEPHONE NUMBER</b> 323-409-6763
<b>PROGRAM MANAGER'S NAME</b> Catherine Bell, PharmD – Pharmacy Supervisor Wilbert Ho, PharmD – Pharmacy Supervisor		<b>TELEPHONE NUMBER</b> 323-409-6751 and 323-409-6753  <b>EMAIL</b> CBELL2@DHS.LACOUNTY.GOV WHO@dhs.lacounty.gov
<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b> (PLEASE CALL (213) 893-0322 IF YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER'S NAME) Gerardo Pinedo 	<b>DATE</b> 06/30/2017	<b>TELEPHONE NUMBER</b> 213-240-8104  <b>EMAIL</b> gpinedo@dhs.lacounty.gov
<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b> Mitchell H. Katz, MD 	<b>DATE</b> 06/30/2017	<b>TELEPHONE NUMBER</b> 213-240-8101

**Quality and Productivity Commission**  
**31<sup>st</sup> Annual Productivity and Quality Awards Program**  
**“Celebrating Quality Service”**

**2017 APPLICATION**

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

**NAME OF PROJECT:** Wait Time Reduction LAC Clinic Tower Pharmacy

**1<sup>st</sup> FACT SHEET – LIMITED UP TO 3 PAGES ONLY:**

**Challenges:**

The institutional challenge placed before us was to enhance each patient’s experience at our health center by improving service provided by each department. In May of 2015, it was visually apparent that our customers were waiting in very long lines to pick up their prescription medications.

DHS pharmacies had implemented a new computer system, Cerner-Eterby (CE), in 2013. Shortly thereafter, significant changes to the prescription refill system were introduced to the many pharmacies throughout DHS. Our pharmacy was tasked to send 90% of refill prescription orders to a remote location for filling and subsequent delivery back to us for processing and dispensing to our patients. This required significant change in both staff and patient service expectations. Then, in early 2015 we were faced with integrating additional new processes created by the Orchid Electronic Medical Record and e-prescribing. At the same time, the facility was dealing issues related to the discharge process, medication reconciliation and patient retention. Medicare and quality metrics began to appear on DHS dashboards. The pharmacy could impact each of these in a positive manner. It was clear that patients were often choosing to have their prescriptions filled at a non-DHS pharmacy. Things had to change.

Another major challenge was to create a new customer service platform. Patients now had a choice and we needed to make sure that our pharmacies became the pharmacy of choice and not the last resort.

**Solutions:**

**A. Work flow redesign**

The work flow system laid out by CE architecture was completely new. Migration of prescription refills to an outsourced location was new. DHS patient care becoming part of the ACA was new. HCAPS and public accountability was new. The pharmacy staff had a lot of learning to do.

1. Flow charts were created to identify required steps using the new CE application. New roles for staff (clerical, technician and pharmacist) were created and overlaid on the flow template. Continuous CQI and staff education and feedback are now operational routine.
2. Integration of remote filling of refill prescriptions was slow to be adopted. Utilization of dedicated staff specifically tasked with processing refills finally achieved its goal to allow the on-site pharmacy to focus on patients waiting for new prescription medications.
3. Pharmacist participation in provider care teams (anticoagulation, HIV, hepatitis C, 5P multispecialty clinic, infusion center, emergency department) has created opportunities for improvement in the medication use process and patient education.

**Quality and Productivity Commission**  
**31<sup>st</sup> Annual Productivity and Quality Awards Program**  
**“Celebrating Quality Service”**

**2017 APPLICATION**

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

**NAME OF PROJECT:** Wait Time Reduction LAC Clinic Tower Pharmacy

Additionally, adoption of a new provider status by the Board of Pharmacy (Advanced Practice Pharmacist) will allow development of further innovative roles for the pharmacist as part of the medical home.

**B. e-Prescribing and ORCHID**

Moving paper prescriptions through the process continued to be problematic. ORCHID now allows for e-prescribing providing information to the provider and legible prescriptions to the pharmacist. Collaboration with and support of the medical staff has been consistent and key.

**C. Discharge wait team**

Increased focus on expediting patient access to their discharge prescription medications and pharmacist consultation became the focus of a physician, pharmacist, and nursing project team. New workflows were developed to expedite the processing of prescriptions, addressing pertinent issues in real time, and clarification of the prescription intent with the provider. Once received, a “wait team” proceeds in processing, filling and verifying all waiting prescriptions. Discharged patients are directed to a specific location and receive their medications and pharmacist consultation.

**D. Customers and Service Recovery**

During initial implement of new work flows and staff responsibilities, we engage the supervisors and pharmacy staff. Weekly meetings provide information to all staff. An identified need was to center staff priority to patient care and the patient experience. We needed to move our focus away from the prescription vial to the face in front of us. We consistently remind staff that patients have a choice and we want to be the “pharmacy of choice” and not last resort.

**Benefits:**

**A. Staff engagement**

As the staff became more engaged they also became more accountable. To the patient and to each other. Decisions related to handling common situations encountered became routine as ownership increased. We became more helpful and less demanding of our patients. Pharmacy staff began to ask to join the wait team. Staff were able to see the program become successful and they quickly wanted to become part of the solution.

**B. Service recovery**

We have enhanced the overall patient experience (less patient complaints). If needed, the pharmacy supervisors are immediately available to provide staff support, patient information, and provide immediate service recovery.

**Quality and Productivity Commission**  
**31<sup>st</sup> Annual Productivity and Quality Awards Program**  
**“Celebrating Quality Service”**

**2017 APPLICATION**

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

**NAME OF PROJECT:** Wait Time Reduction LAC Clinic Tower Pharmacy

**C. Health center as the medical home**

Patient-centered care required a change from prescription-based task. Creating a culture change to identify issues important to the patient is important to our success. Decreasing the expected patient wait time allows our staff to set an expectation for their customer base. “Thirty to forty-five minutes for your prescription”. It allows us to over deliver more than half the time. Now we can focus on the other half.

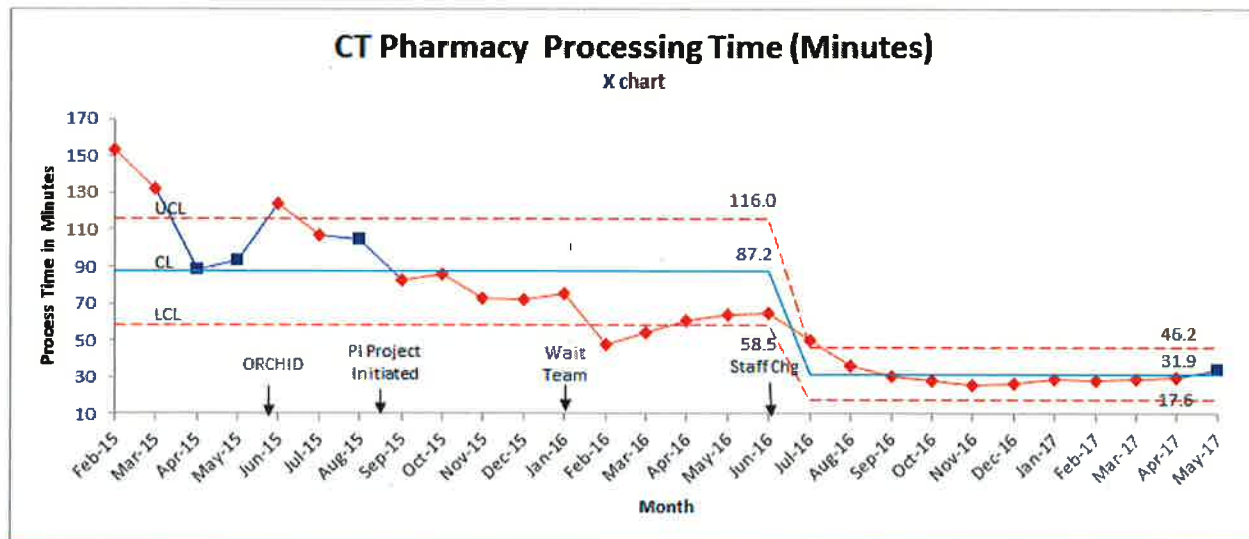
We have seen a reenergized staff, decrease in patient complaints, increase in staff job satisfaction. We hope our efforts realize:

- Increased patient utilization of LAC+USC pharmacies
- Cost savings for DHS by increasing use of 340B drugs
- Increased medication compliance
- Perfect medication reconciliation processes
- Better patient outcomes

**Measures of Success**

- A. Patient weight time: 32 minutes
- B. Central fill utilization: 90% of refills to refill center
- C. Increase in total prescription volume at LAC USC: >10%
- D. Decreased patient and provider complaint volume
- E. Increased pharmacist participation in direct care provision

We celebrate the successes of our pharmacy staff. This has helped keep staff engaged and excited about the upcoming challenges that arise.



**Quality and Productivity Commission**  
**31<sup>st</sup> Annual Productivity and Quality Awards Program**  
**“Celebrating Quality Service”**

**2017 APPLICATION**

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

**NAME OF PROJECT:** Wait Time Reduction LAC Clinic Tower Pharmacy

**Linkage to the County Strategic Plan – 1 page only.** Which County Strategic Plan goal(s) does this project address? Explain how. Use Arial 12 point font.

Goal I: Make Investments That Transform Lives

Strategy I.2: Enhance Our Delivery of Comprehensive Interventions.

I.2.2. – Steamline Access to Intergrated Health Services:

Pharmacy services is critical for patient care. By assisting patients in getting their medication to at LAC+USC in a prompt manner without delays in service or care we are assisting in streamlining the access to an integrated health care system. We are now working more as a team. Patients experience is improving and with it patient’s health outcomes will also be improving. As issues arise we have a process in place to help address them. We have access to the patients chart to assist with evaluating problems. The goal is to help the patient and with our new process we have seen patient care improve at LAC+USC.

**Quality and Productivity Commission**  
**31<sup>st</sup> Annual Productivity and Quality Awards Program**  
**“Celebrating Quality Service”**

**2017 APPLICATION**

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

**NAME OF PROJECT:** Wait Time Reduction LAC Clinic Tower Pharmacy

**COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFITS TO THE COUNTY):** If you are claiming cost benefits, include a calculation on this page. Please indicate whether these benefits apply in total or on a per unit basis, e.g., per capita, per transaction, per case, etc. You must include an explanation of the County cost savings, cost avoidance or new revenue that matches the numbers in the box. Remember to keep your supporting documentation. Use Arial 12 point font

**Cost Avoidance:** Costs that are eliminated or not incurred as a result of program outcomes. Please indicate whether these are costs to the County or to other entities.

**Cost Savings:** A reduction or lessening of expenditures as a result of program outcomes. Please indicate whether these were expenditures by the County or by other entities.

**Revenue:** Increases in existing revenue streams or new revenue sources to the County as a result of program outcomes.

(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$	\$	\$	\$	<input checked="" type="checkbox"/>

**ANNUAL = 12 MONTHS ONLY**