



Improving the Process of Prescription Request in Diabetes and Metabolism Centre Level 4

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BACKGROUND

Diabetes and Metabolism Centre (DMC) Level 4 is visited by patients with chronic conditions like chronic kidney diseases, high blood pressure, and hypertension. These conditions requires patients to be on long term medication to control their condition. They are also subjected to a variety of different types of medications.



Patients sometimes return to the clinic to request for additional prescription when they run out of medication or have misplaced their prescription before utilizing the full term. The clinic receives **about 160 to 200 prescription request a month**. For each walk-in requests, it takes **20 minutes to 30 minutes to get a prescription ready**. These ad-hoc requests are additional workload to the nurses who are managing phone queries and other request.

AIM

- Reduce disruption to physician's consultation during clinic session.
- Reduce time taken for nurses to prepare the prescription for patients
- Reduce patients' complaints who walk-in for prescription but is required to wait

METHODOLOGY

OBSERVATION was done in the clinic over a one week period. The following was observed:

1. Patients walk in and approach the nursing station to request for prescription
2. Very often, attending physician of patient making request is not present in the clinic.
3. Nurses scrambles from room to room to find an available physician who is able to help prepare the prescription
4. Consultation is disrupted and there is time delay for physicians when nurses approached them for help.
5. Nurses get distracted from other work in the nursing station and may miss calls while looking for physicians for help.



TROUBLESHOOTING of the problems observed led to key issues:

1. There is no proper workflow for the nurses to follow for patient's request for prescription
2. Patient's expectation of waiting time for prescription is not managed

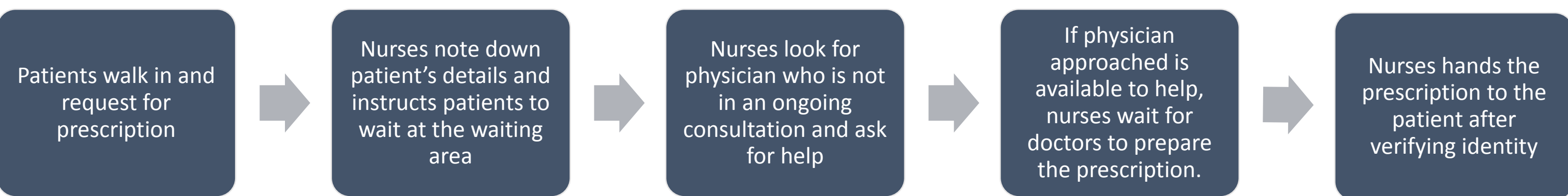
DISCUSSION with clinical departments to plan and execute a standard workflow for all physicians and nurses to follow. Workflow include the following targets:

1. To manage the expectations of patients who walk in for prescription
2. To allow the physicians in the clinic to prepare the prescription without interruption to their consultation
3. To allow the nurses to prepare the prescription with minimal disruption to other patient's requests and management of critical results

SOLUTION

1. Implementation of a workflow that leads to a win-win for nurses, physicians and patients.

PREVIOUSLY...



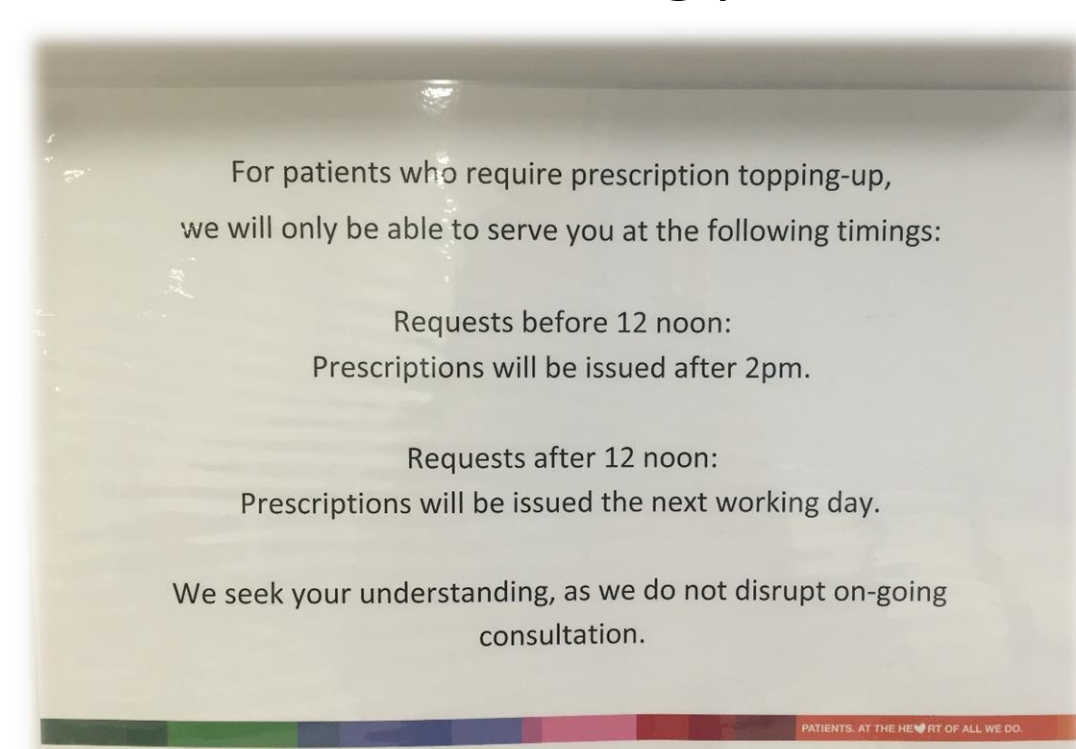
- Nurses take up to 15 minutes to wait for an available physician to prepare the prescription per request. This is idle time spend away from their work station.
- Physician takes an average of 8 minutes to prepare a prescription in between their consultation. This causes longer waiting time for patients present for their consultation.

WITH IMPLEMENTED WORKFLOW



- Nurses consolidate requests without taking time away from their workstation.
- Physicians present share the workload of prescription request without affecting ongoing consultation with their own patients present.

2. Cut off time for prescription requests with respective collection time is set. Signage are put up in the clinic informing patients to manage their expectation.



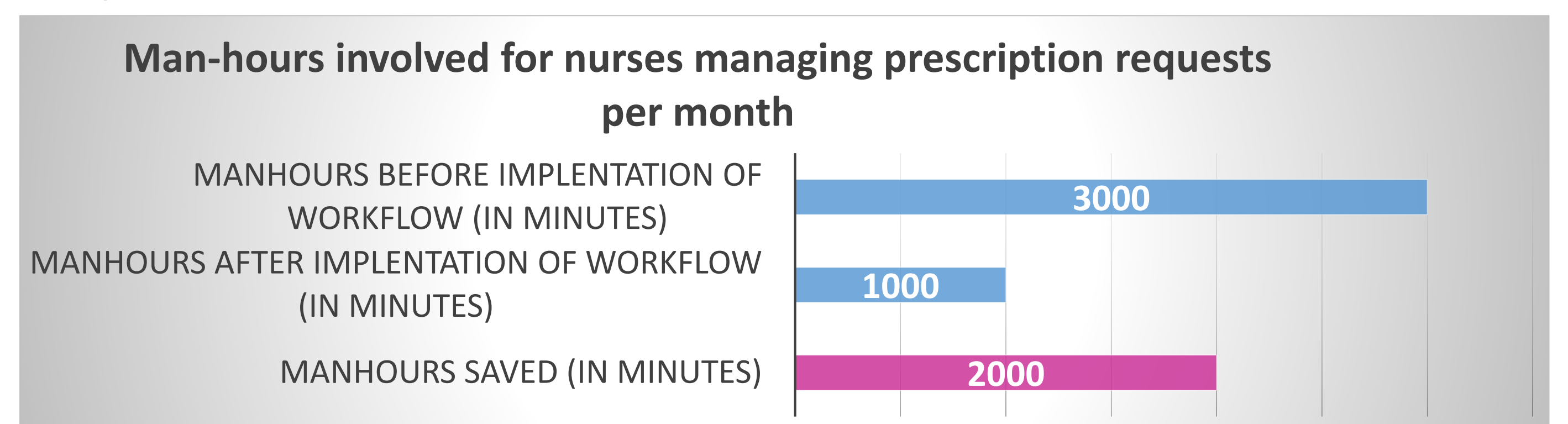
Signage informing patients of collection time of prescription with explanation

The cut off time and collection time are agreed with departments and the clinic to manage patient's expectation.

It also help to remind patients who may need to make a future prescription request to call and make their request before coming down after the collection time to save waiting time in the hospital.

RESULTS

- ✓ Nurses save time away from their workstations to manage other requests and important nursing duties.



Assuming 200 prescription requests in a month, the man-hours saved with the implemented workflow will be:

$$(200 \text{ requests} \times 15 \text{ minutes}) - (200 \text{ requests} \times 5 \text{ minutes}) = \underline{2000 \text{ minutes (approx. 33 hours)}}$$

This greatly reduce the idle time nurses spent away their workstation which can be spend on other nursing duties.

- ✓ Reduction in time delay cause by disruption of consultation for prescription request during clinic session.

With the implemented workflow, all requests are managed after the clinic session. Hence, reduction in time delay during clinic session will be:

$$200 \text{ requests} \times 8 \text{ minutes} = \underline{1600 \text{ minutes (approx. 26 hours)}}$$

- ✓ Patients' expectation are managed over time.

With the signage placed around the nursing stations, it helps the nurses to manage the patient's expectation of waiting time for their prescription requests and explain about the wait. Patients are then encouraged to make their requests by phoning in instead of walking in.

CONCLUSION

Without a standard workflow in place, nurses have no directives of what to do or who to look for a request that occurs on a daily basis. It also creates unnecessary stress and time wastage for both the physicians and nurses themselves.



For the **nurses**, man-hours are saved from the idle time they spent in carrying out the prescription requests one by one as the requests come in. It also greatly reduce the idle time they spend away from their workstation which could be spent on other nursing duties and mending the phone for patients' queries.



For the **physicians**, no time is waste during clinic session to prepare the prescriptions for the prescriptions requests. Priority of the physicians' time during the clinic session is given to patients who has appointments for consultation. By allowing the physicians to share the workload of the prescription requests at the end of the clinic sessions, it makes the task more efficient and less stressful.



For the **patients**, with proper explanations, most are able to understand the workflow in place and would gladly return to collect their prescription according to the cut off time. Overtimes, these regulars of the clinic start to call the nurse to inform of their requests rather than walking in, hence reducing their own waiting time for their prescription request.

The workflow has successfully save time and increase in efficiency on tasks and time spent for all 3 parties.