

A SOCIO ECONOMIC APPROACH TO MANAGEMENT (SEAM) : AN ATTRACTIVE TOOL TO MONITOR CHANGES IN A CLINICAL PHARMACY ENVIRONMENT

BACKGROUND

AIM

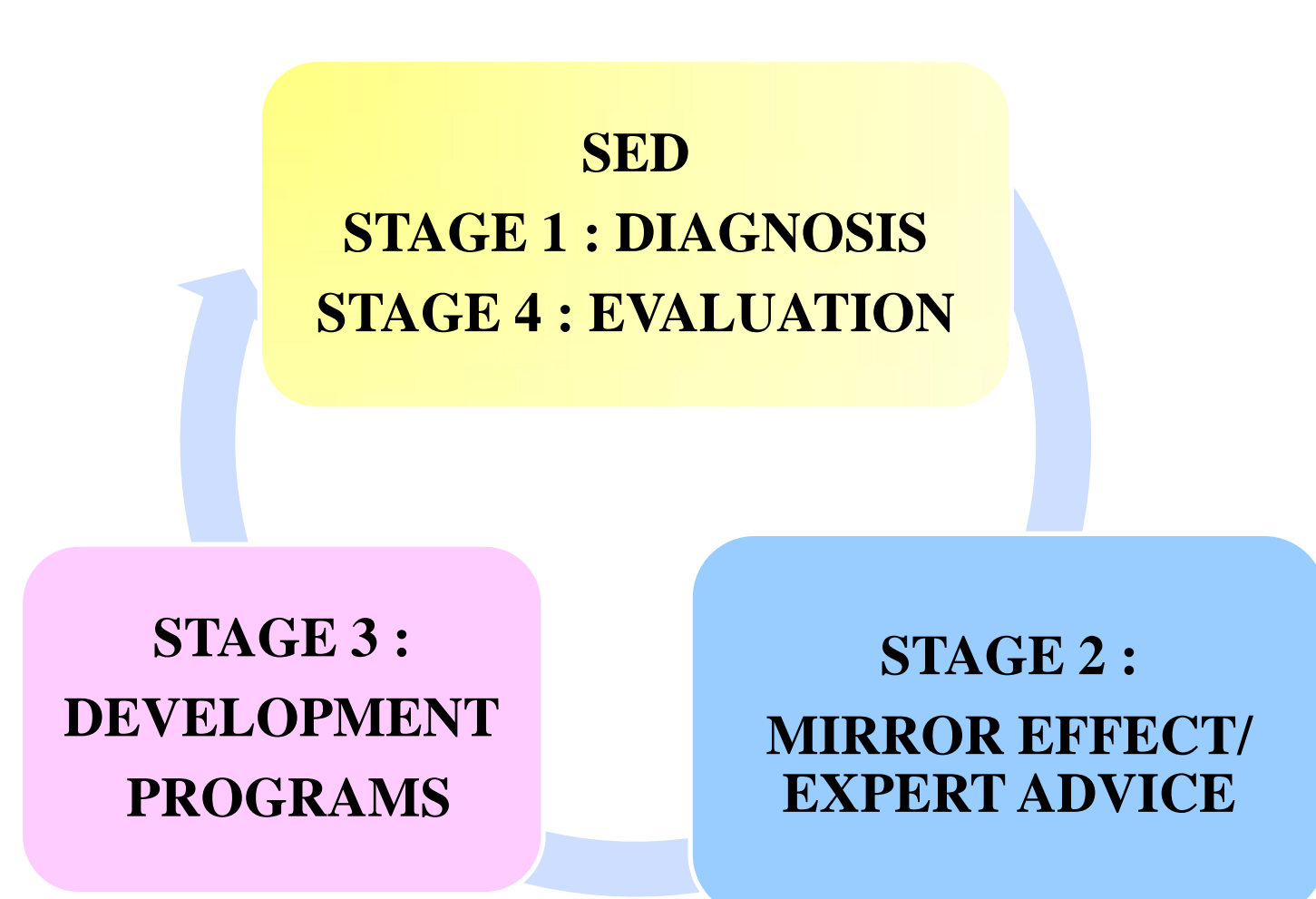
- Organizations have become more complex in hospitals
- In the context of change, Management is particularly critical

TO DEVELOP AND IMPROVE CLINICAL PHARMACY SERVICES BETWEEN THE PHARMACY AND THE CARDIOLOGY DEPARTMENTS USING SEAM.

MATERIALS AND METHODS

- Socio economic approach to management (SEAM) was created in order to monitor the time needed to transform an enterprise in a competitive environment.
- The SEAM demonstrates that this is always a difference between the situation expected by the actors (employees, managers, customers) and the current situation.
- This difference is characterised by six dysfunctions (working conditions, work organization, time management, integrated training, Communication/Coordination/Cooperation, strategy implementation).
- These dysfunctions results in the identification of hidden costs.

- Antoine Beclere is a teaching hospital of 450 beds.
- The project involved the department of cardiology, Pharmacy and Hospital Direction.
- Duration : 3 years.



- Socio Economic diagnosis (SED) was carried out through semi-directed interviews (SDI) to identify dysfunctions (D).
- Verbatims (> 300) grouped into key idea (KI) and classified in themes and sub-themes of D according to the ISEOR grid*.
- Calculation of frequencies for Key Ideas (KI)
- Identification of interviewees by main staff categories and department (e.g staff or management/ Pharmacy – Cardiology – Direction).

- The mirror effect makes all participants more aware of the need to prevent dysfunctions, instead of repairing them once they have occurred.
- During the mirror effect, the findings are presented orally together with the assessment of hidden costs in order to collect opinions and observations.
- The oral presentation opens the manager's eyes to the risks the department undergoes when reluctance to learn from the dysfunctions is observed

RESULTS

STAGE 1: DIAGNOSIS

SED 2009

- 30 SID
- 62 collaborators
- 352 verbatims
- 55 Key Ideas

106: WORKING HOURS

KEY IDEA N 10:
RESPECT OF PHARMACY OPENING HOURS IS CONTROVERSIAL

VERBATIMS:

- « Pharmacy is closed from 1 till 2 p.m, there is no restricted pharmaceutical service » (management, direction)
- « Due to Pharmacy organization (dispensing schedule time), we have to get down again to the pharmacy » (Staff, cardiology)
- « Orders received out of due time cause extra hours work » (management, pharmacy)

FREQUENCY: 13 %

201: TASKS DISTRIBUTION and FUNCTIONS

KEY IDEA N 13:
DRUG CABINET MANAGEMENT IN CLINICAL WARDS IS NOT FULLY EFFECTIVE

VERBATIMS:

- « On Monday, it is chaos, patients admitted on Sunday don't have their medicines. Everything must be done in a hurry, we are scared of making mistake » (management, cardiology)
- « Unit dose dispensing is inefficient. The nurse has to do pharmacist technician's tasks again ». (management, pharmacy)

FREQUENCY: 26 %

STAGE 2

MIRROR EFFECT

Meetings to feedback to all professionals

EXPERT ADVICE

- Define tasks and job description

- Give Pharmacy a key role in medication use process

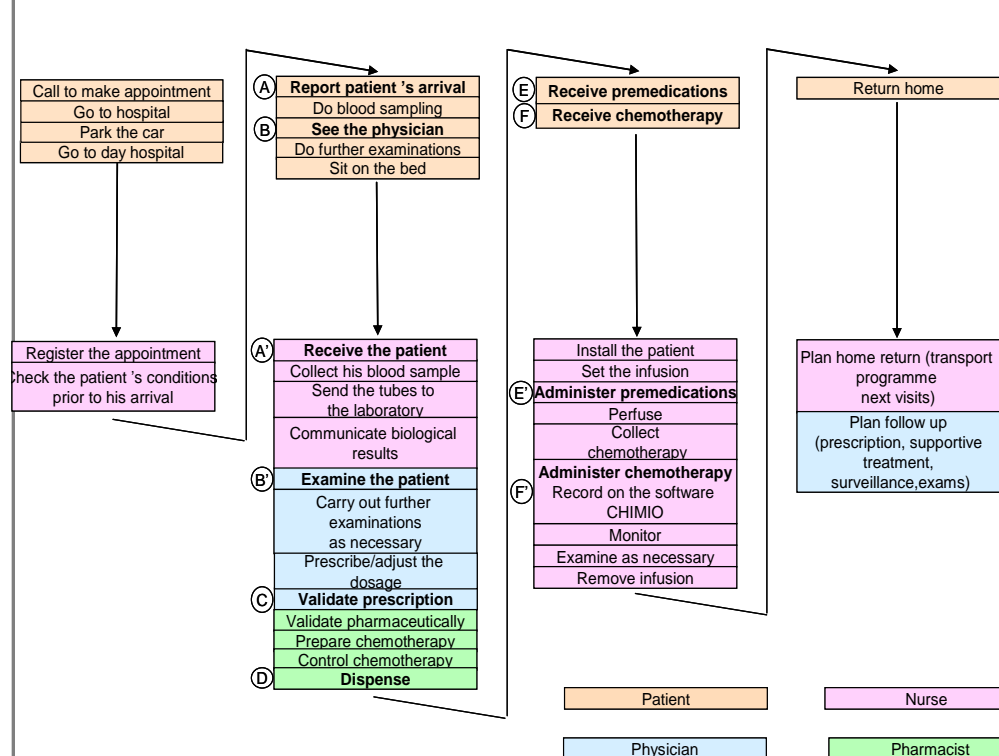
- Provide communication and training plans

STAGE 3: DEVELOPMENT PROGRAMS

- Establishing skills grid of Pharmacy collaborators to maintain Pharmaceutical care standards.

Macro process	SUPPLY/STORE				PREPARE/ PROCESS				SUPPORT			
Process	Identify, control pharmaceutical products	Receive	Validate the content and manage the stock	Prepare, provide pharmaceutical articles	Risks management	Administer	Monitor	Administer	Monitor	Administer	Monitor	
Activities	Identify, control pharmaceutical products	Receive	Validate the content and manage the stock	Prepare, provide pharmaceutical articles	Risks management	Administer	Monitor	Administer	Monitor	Administer	Monitor	
Actors	Common products (parenteral nutrition)	Common products (parenteral nutrition)	Common products (parenteral nutrition)	Common products (parenteral nutrition)	Common products (parenteral nutrition)	Common products (parenteral nutrition)	Common products (parenteral nutrition)	Common products (parenteral nutrition)	Common products (parenteral nutrition)	Common products (parenteral nutrition)	Common products (parenteral nutrition)	
PHARMACIST TECHNICIAN 1	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	
PHARMACIST TECHNICIAN 2												
PHARMACIST TECHNICIAN 3												
PHARMACIST TECHNICIAN 4	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	
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PHARMACIST TECHNICIAN 6	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	
PHARMACIST TECHNICIAN 7												
PHARMACIST TECHNICIAN 8												
PHARMACIST TECHNICIAN 9	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	
PHARMACIST TECHNICIAN 10												
PHARMACIST TECHNICIAN 11	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	PT	

- Lean Management : « Optimizing clinical pathway of patients receiving chemos »



- To improve ward drug cabinet supply chain to lower emergency drug requests.

STAGE 4: EVALUATION

SED 2012

- 23 SID
- 48 collaborators
- 508 verbatims
- 75 Key Ideas

106: WORKING HOURS

KEY IDEA N 10:
RESPECT OF PHARMACY OPENING HOURS IS CONTROVERSIAL

VERBATIMS:

- « I find that most PT visit our clinical ward since pharmacy was closed in the morning » (Manager, Pharmacy)
- « No problem with the closure of the pharmacy in the morning » (Staff, Cardiology)

FREQUENCY: 30%

IMPROVEMENT: 5 verbatims/7

New « opening Hours » well ACCEPTED

201: TASKS DISTRIBUTION and FUNCTIONS

KEY IDEA N 13:
DRUG CABINET MANAGEMENT IN CLINICAL WARDS IS NOT FULLY EFFECTIVE

VERBATIMS:

- « The organization has been improved for the drug cabinet » (Staff Cardiology)
- « We spend much more time in the ward since 2009 » (Manager, Pharmacy)
- « In the clinical ward, the staff is more aware of the added value of Pharmacist technician » (Manager, Pharmacy)
- « The new organization does not work very well: we prepare the medicines for the patients and also the patients if it has not been done during the day » (Staff cardiology)

FREQUENCY: 91%

IMPROVEMENT: 9 verbatims/21

Role of Pharmacy technician appreciated

302: RELATIONSHIP WITH OTHER HEALTHCARE DEPARTMENT

KEY IDEA N 26:
COMMUNICATION BETWEEN PHARMACY AND WARDS IS NOT EFFECTIVE

VERBATIMS:

- « We don't have any contact with the pharmacist technicians » (Staff, cardiology)
- « The pharmacy department could inform us about the availability of drugs » (management, cardiology)
- « The communication between pharmacy and clinical ward is the most important dysfunction » (management, cardiology)

FREQUENCY: 73%

402: TASKS SCHEDULING

KEY IDEA N 32:
MEDICINES MANAGEMENT AT THE PHARMACY IS POORLY ORGANIZED

VERBATIMS:

- « We aren't enough on Thursday when the weekly orders comes in and we have to store it » (Staff pharmacy)
- « We help each other, but it is totally inefficient due to poor organization » (Staff, Pharmacy)
- « Dysfunctions at pharmacy rely on organisation and methodology » (management, direction)

FREQUENCY: 30%

EXPERT ADVICE

- Define tasks and job description

- Give Pharmacy a key role in medication use process

- Provide communication and training plans

302: RELATIONSHIP WITH OTHER HEALTHCARE DEPARTMENT

KEY IDEA N 26:
COMMUNICATION BETWEEN PHARMACY AND CLINICAL WARDS IS NOT EFFECTIVE

VERBATIMS:

- « Any request I made to the pharmacy, I was satisfied » (Manager Cardiology)
- « We don't know well the pharmacist technicians » (Staff, Cardiology)

FREQUENCY: 100 %

IMPROVEMENT: 15 verbatims/28

Communication greatly improved

402: TASKS SCHEDULING

KEY IDEA N 31:
ATTENDANCE OF PHARMACY STAFF IN CLINICAL WARD IS NOT SUFFISANT

VERBATIMS:

- « There is not enough attendance of pharmaceutical staff in the clinical ward. The pharmacy resident and the student spend some time especially for the anticoagulant consultation but not much for the permanent pharmacy staff » (Manager, Pharmacie)
- « The cardiology department has suffered from lack of pharmacy attendance in the departement » (Manager, Pharmacy)

FREQUENCY: 39 %

IMPROVEMENT: 7 verbatims/9

501: TRAINING ADAPTATION TO JOB

KEY IDEA N 42:
EDUCATION OF STAKEHOLDERS ABOUT MEDICINES MANAGEMENT IS NOT EFFECTIVE

VERBATIMS:

- « CPE training for Pharmacy and clinical ward must be repeated » (management, pharmacy)
- « NOT many prescribers attended training sessions on Medication Use Process » (management, cardiology)

FREQUENCY: 20%

608: MANAGEMENT METHODS

KEY IDEA N 54:
THE MANAGERIAL CULTURE IS NOT WELL DEVELOPPED AND TECHNICALLY CENTRED

VERBATIMS:

- « physicians and pharmacists only intervene when there is a problem » (management, pharmacie)
- « Hospital is reluctant to organization » (Management, Hospital Direction.)
- « How the sisters will stop being like « fireman » and put in place some quantitative controls? » (Management, Hospital Direction.)

FREQUENCY: 20%

504: TRAINING FEATURES

KEY IDEA N 45:
TRAINING MUST BE REASSESSED

VERBATIMS:

- « Courses or lecture on medicines on the Thursday at lunch time are very much appreciated » (Staff, Pharmacy)
- « E-learning for training on nosocomial disease, [...] It is absolutely useless but it only makes sense for the accreditation » (Staff, Cardiology)
- « Education on pharmacotherapy is not appropriate » (Manager Cardiology)

FREQUENCY: 65 %

IMPROVEMENT: 4 verbatims/15

608: MANAGEMENT METHODS

KEY IDEA N 54:
THE MANAGERIAL CULTURE IS NOT WELL DEVELOPPED AND TECHNICALLY CENTRED

VERBATIMS:

- « The process oriented management made things improving » (Management, Pharmacy)
- « The big difference : there is before and after the arrival of the new chief-pharmacist » (Management, Cardiology)
- « We used to rely on people, now we rely on processes » (Management, Pharmacy)

FREQUENCY: 100 %

IMPROVEMENT: 16 verbatims/25

Improvement of pharmacy management

CONCLUSION

- SED 2012 showed improvement in all ISEOR items particularly within Work organization, Communication/Coordination/ Cooperation and strategy development domains.
- « Mirror effects » were very fruitful and allowed consideration and recognition to the entire staff.

- SEAM permits to re-allocate time associated to dysfunctions to activities with much higher professional added value.
- It is an attractive approach to monitor the time needed to transform our low quality clinical pharmacy services in a competitive environment of modern and reactive Pharmaceutical Care services.