

# “Improving Medication Safety & Operational Efficiency by Utilizing 5S Methodology in the Pharmacy Department”

Jennie Melham Medical Center, Pharmacy Department, Broken Bow, NE

## Background

- 23 Bed Critical Access Hospital located in central Nebraska
- Melham leadership provided introductory 5S Methodology training to department managers.
- The Pharmacy Department utilized 5S methodology to improve efficiency and safety with in the pharmacy.

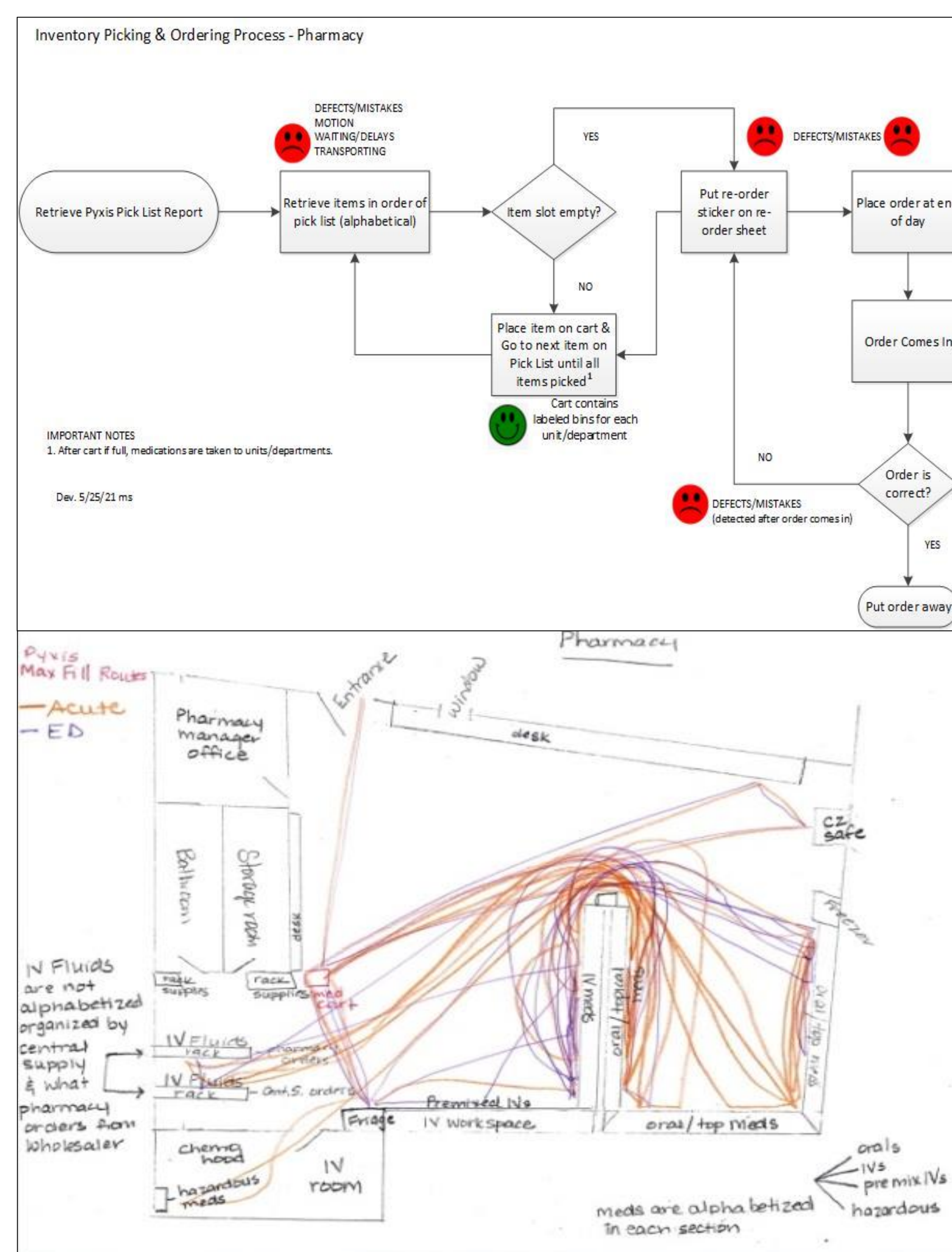


## Aims

- Increase efficiency by matching physical layout to pick list order & decrease maximum fill pick time to < 1 hour
- Decrease time to put away order to ≤ 10 minutes.
- Achieve a 5S audit score ≥ 80, “Good Foundation”
- Reduce opportunity for mispicks and ordering mistakes.

## Plan

- Evaluate the current physical layout of the Pharmacy and its impacts on processes related to Pyxis restocking, inventory control.
- Follow the 5S methodology to clean and organize to improve Pyxis restocking, inventory control, reduce excess movement while restocking or searching for items, decrease opportunity for and medication errors related to mispicked medications.

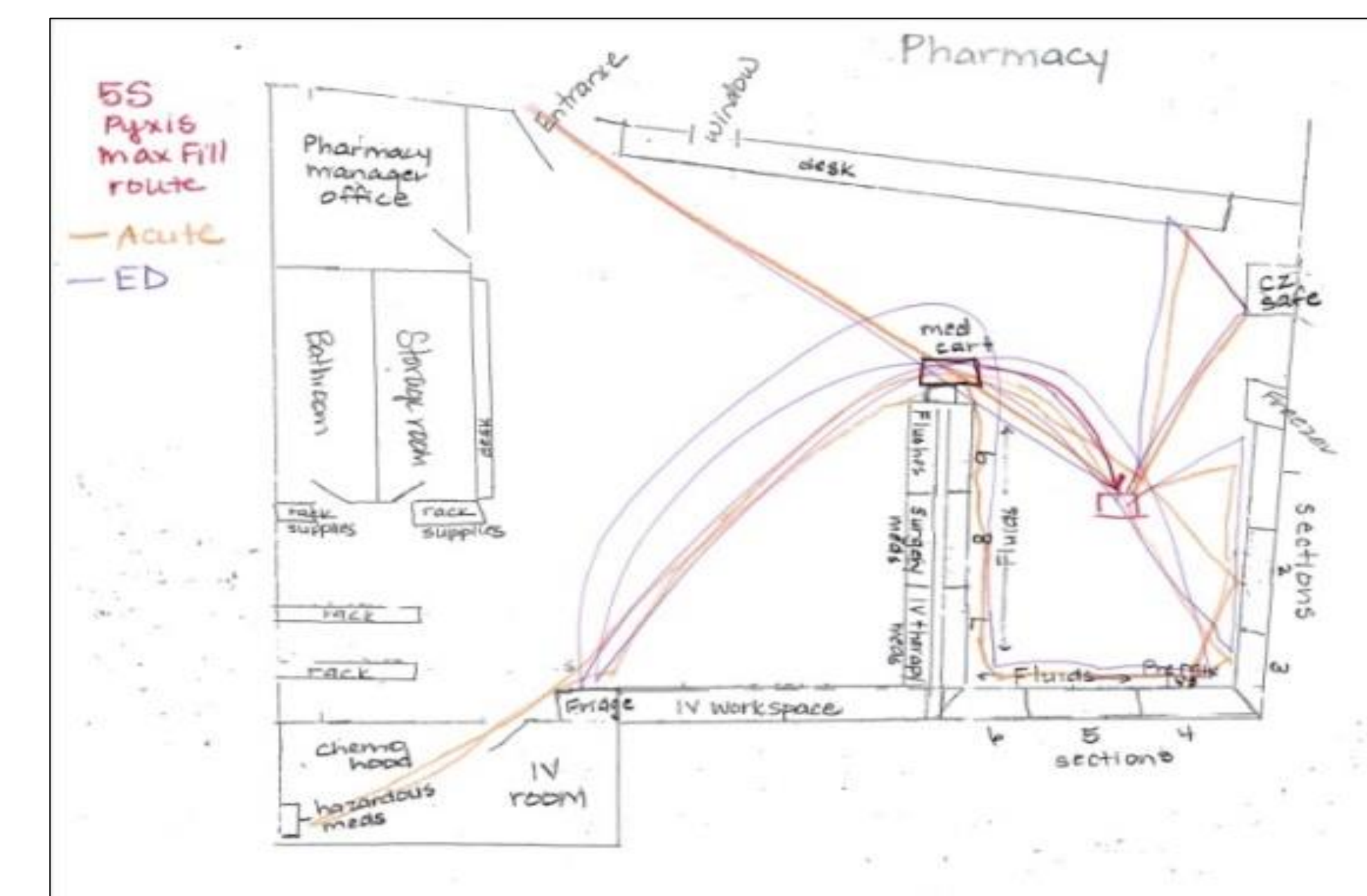


## Measure

- 5S Physical Areas Audit Tool pre- & post-5S
- 5S Spaghetti Map pre- & post-5S
- Record maximum fill pick times pre- & post-5S
- Reclaimed space (in square feet)

## Results

- 40 point increase in 5S Physical Area Audit to 94, “Doing Very Well.”
- Decreased maximum fill pick times by 50%
- Reclaimed 108 sq. feet in the pharmacy department
- Entire Pharmacy team engaged in the 5S project



## Next Steps

- Maintain orderliness and cleanliness with standardized cleaning schedule.
- Continue to encourage departments to utilize 5S methodology to improve processes in clinical and non-clinical areas.

## 5S Project Team

Jennifer Schaaf, PharmD, RP, Pharmacy Manager  
 Deborah Atkins, Certified Pharmacy Tech, LPN, CPhT  
 Lexie Booker, Certified Pharmacy Tech, CPhT

Pharmacy 5-21-21

5S Audit (Physical Areas)

Purpose: To audit physical work areas ensuring workplace organization & standards are being met.  
 Who: 5S Champion. The audit team by consensus.  
 Direction: For each statement, circle the appropriate score. Total the scores, review with process worker and/or department manager.

	Very Poor	Poor	Good	Very Good	Excellent
<b>Sort</b>					
1	1	2	3	4	5
2	1	2	3	(5)	5
3	1	2	3	(4)	5
4	1	(2)	3	4	5
5	1	(2)	3	4	5
Total Sort: 17					
<b>Set in Order</b>					
1	1	2	(3)	4	5
2	1	(2)	3	4	5
3	1	(2)	3	4	5
4	1	(2)	3	4	5
5	1	(2)	3	4	5
Total Set in Order: 17					
<b>Shine</b>					
1	1	2	(3)	4	5
2	1	(2)	3	4	5
3	1	(2)	3	4	5
4	1	(2)	3	4	5
5	1	(2)	3	4	5
Total Shine: 17					
<b>Standardize</b>					
1	1	2	(3)	4	5
2	1	(2)	3	4	5
3	1	(2)	3	4	5
4	1	(2)	3	4	5
5	1	(2)	3	4	5
Total Standardize: 17					
<b>Sustain</b>					
1	1	2	3	4	5
2	(1)	2	3	4	5
3	1	(2)	3	4	5
4	(1)	2	3	4	5
5	1	(2)	3	4	5
Total Sustain: 17					
Total of all 5 categories: 54					

Scoring Guidelines:  
 90-100: Doing Very Well  
 80-90: Good Foundation  
 70-79: Some Good Things Happening but More Needs to be Done  
 60-69: Not Much Happening to Keep Pace with Competition  
 < 60: Not so Good

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