TEAT TO DICS A BI-MONTHLY MAGAZINE FOR PHARMACY TECHNICIANS & PHARMACY ASSISTANTS



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Project improves medicines access for remote Bay of Plenty patients

Patients in some remote settlements of Eastern Bay of Plenty now have better access to their prescription medicine, thanks to a project undertaken by Te Whānau-ā-Apanui Community Health Centre in Te Kaha.

The health centre covers a 150km section of coastline from Hawai to Pōtaka and is an hour's drive from the nearest pharmacy in Ōpōtiki. The physical distance is further complicated by a low level of technology infrastructure, often resulting in long delays between patients being prescribed non-urgent medicine and receiving it.

The aim of the project was to have 90% of Te Kaha patients receive their non-urgent medicine within 48 hours of it being prescribed, in keeping with expectations for prescriptions generated in Ōpōtiki.

Funding for the project

The project was one of nine funded in 2019 by Whakakotahi – the Health Quality & Safety Commission's quality improvement programme. The programme helped primary care teams implement quality improvement projects in an area of patient care considered important to patients, the community and the providers. Projects aligned with the commission's strategic priorities of equity, integration and consumer engagement. Equity was given greater importance in the 2019 selection criteria.

The Te Whānau-ā-Apanui Community Centre project, along with two others, received additional support from PHARMAC Te Pātaka Whaioranga as part of its commitment to medicines equity.

The health centre is one of only three in the country with special medical area status. It operates without a primary health organisation, is funded by Bay of Plenty District Health Board and services are free to all residents within the rohe (area). Around 1,500 predominantly Māori patients are registered with the health centre.

Understanding the issues

Process mapping allowed the project team to fully understand the complicated process involved in getting a prescription from the health centre to the pharmacy for dispensing.

"So many people were involved. It was no wonder things were falling through the cracks," says project team supervisor Dr Emily Gill.

Dr Gill says doctors were all doing slightly different things with prescriptions, thinking they were being helpful, but it meant prescriptions were going missing.

For example, when working remotely, Dr Gill assumed when she pressed print on her computer that the prescription was printing in the Te Kaha clinic for reception to then fax it to the pharmacy, but she couldn't verify that. She was also couriering prescriptions to the pharmacy without realising that they may not be opened for several days.

Changing the process

As the project evolved, the health centre's receptionist, Ripeka Te Haara, in discussion with project lead Kiritahanga Savage, created a filing system to record prescriptions faxed to the pharmacy and a form to help the pharmacy reconcile prescriptions received with the medicine that was delivered to patients. She would also phone the pharmacy to check that every prescription had been received. This was key to achieving improvement in the system, and now all prescriptions go through this process.

The project team decided to focus its improvement measures on prescriptions generated for its patients seen at the Waihau Bay GP clinic – a further hour away from Te Kaha, and therefore two hours from the pharmacy at Ōpōtiki. Its patients had the most logistical challenges in accessing their medicines because the clinic only operates on a Tuesday.

"There were more errors for this group because we were taking prescriptions back to the main clinic at Te Kaha for processing. However, sometimes we would fax them directly to the pharmacy, but Te Kaha staff didn't know they'd been faxed," says Dr Gill.

Now, every time a prescription is generated, it gets funnelled through one person. This changed the situation very quickly, with many more Waihau Bay patients receiving their medicines within 48 hours of them being prescribed.

Other factors that contributed to the positive result included continual data collection, engagement with patients, data sharing, and feedback from patients, iwi representatives, the courier company and the Waihau Bay store, where patients can collect medicines couriered by the pharmacy.

Positive outcomes

While data is still being analysed, Dr Gill says at least 80% of Te Kaha patients are now receiving their non-urgent medicine within 48 hours of it being prescribed. The number of medicine queries have decreased from more than one a day to only one or two per week.

Staff who were initially sceptical about the new process because of the time it involved can now see the value in it and are some of the most supportive quality improvement advocates.

"We're now all very sold on the idea of quality improvement, but we also know we need more support to leverage that," says Dr Gill.

This project was undertaken as part of the Health Quality & Safety Commission's Whakakotahi primary care quality improvement programme. It was also supported by PHARMAC Te Pātaka Whaioranga via its commitment to medicines equity. For more information see pharmac.govt.nz/about/what-we-do/equity.



HEALTH AND SAFETY TIPS

IN THE PHARMACY WORKPLACE

As a pharmacy technician or assistant, you are an important part of the pharmacy environment. With your extensive experience at the frontline of pharmacy, you are well-placed to have input on creating a safer, healthier and more satisfying workplace.

A safe workplace relies on staff raising ideas and suggestions on how to improve safety. Think through your day-to-day workflow and try to pinpoint processes or tasks that could be made safer, and make a note of these.

For example, workplace clutter and a complicated physical layout in the pharmacy can be a barrier to a safe and productive workplace. Keep the physical layout of the workplace in mind when pinpointing improvements. Staff meetings or morning stand-ups are often a good forum to raise these points.

"Workplace health and safety is not solely about physical risks – mental and social risks, like stress and fatigue, are equally important."

Documenting incidents and health and safety-related near misses also enables pharmacies to evaluate what happened, what the underlying causes were and what improvements can be made to prevent a reoccurrence. Make sure you know or are aware of the processes for reporting such incidents.

Once you become more familiar with the incident reporting processes, you can guide and assist newer or more junior staff members with this process. Positive change can come about from raising near misses and incidents – ultimately, work systems and processes are made safer and more sustainable.

However, workplace health and safety is not solely about physical risks – mental and social risks, like stress and fatigue, are equally important, and these can even trigger the physical incidents and near misses.

Common sources of mental fatigue include professional stress, major life changes and overall uncertainty. While challenges at work can be helpful for development and growth, it should not be confused with stress, a real and serious health issue which can cause low morale and disengagement, among other things. To combat this, you should set achievable expectations of yourself, attempt to better control your pace of work, and actively engage with your manager to effectively understand what is required of you.

Keep updated on new developments at your workplace, such as changing systems and processes. If you are aware of developments happening around you, you are better prepared overall. Work at a sustainable pace, and don't hesitate to ask for help when you need it. Once more secure in your role, you can help to guide and mentor newer staff.

SUMMARY

Your frontline technician or assistant duties mean you are well-placed to pinpoint unsafe aspects of the work environment and recommend changes or improvements.

Documenting health and safety related incidents and learning from these can lead to improved outcomes overall.

As well as safety, mental and social health are important considerations. Keep updated with changes in your workplace and set reasonable expectations of yourself.

Awareness Dates

1-7 August WORLD BREASTFEEDING WEEK

Each year, World Breastfeeding Week (WBW) is celebrated between 1-7 August, as it has been since 1992. WBW is a global campaign to raise awareness about and galvanise action on breastfeeding. This year the theme is how breastfeeding contributes to the survival, health and wellbeing of all, and the imperative to protect breastfeeding worldwide.

Events in New Zealand include The Big Latch On (31 July - 1 August). Visit the event's Facebook page for details (www.facebook.com/BigLatchOnNZ). For more information about the 2021 international campaign, see worldbreastfeedingweek.org.

1-30 September

BLUE SEPTEMBER/PROSTATE CANCER AWARENESS MONTH

Held throughout the month of September, Blue September is the Prostate Cancer Foundation's annual awareness and fundraising campaign.

In New Zealand, prostate cancer is the most common cancer in men, with over 3,500

This September, the foundation is encouraging people to hold a "BLUE DO". A BLUE DO can be any sort of fundraising activity and is a great way to unite your co-workers, friends and family in the fight against prostate cancer.

registrations and more than 650 deaths each year.

For more information and to register your interest, go to the foundation's website at prostate.org.nz.

25 September WORLD PHARMACISTS DAY

World Pharmacists Day celebrates the role of pharmacists in improving health worldwide. This year's theme is "Pharmacy: Always trusted for your health". The International Pharmaceutical Federation (FIP), which coordinates the annual event, is encouraging pharmacists to spread the message. To help, the FIP's website (www.fip.org/world-pharmacists-day) has a factsheet and other campaign material you can download and use.



Chilblains are burning red areas on the end of fingers, toes and other parts of the skin that have been exposed to the cold. They usually occur several hours after exposure to the cold, so you may not always recognise what is triggering the itching and burning that are the typical symptoms.

When the extremities get cold, the blood vessels in these areas become smaller, and when the area warms back up, it is thought that some of the blood "leaks out" into surrounding areas, leading to pain, swelling and itching.

Unfortunately, you may be unprepared for the temperature change brought on by a cold snap, and you may have insufficient protection for the exposed areas of skin, starting the chilblain cycle.

Some people are at heightened risk of developing chilblains, and they should prepare for the possibility of weather changes that cause circulation problems. Be prepared with gloves, scarves and hats to prevent the blood vessels from tightening because of the cold, and then from rapidly opening up again, causing the damage which results in chilblains.

When skin has been exposed, it is best to gradually warm the area with warm water rather than hot, and gently rub or massage it with a simple moisturiser and emollients to prevent sudden temperature change. Also ensure you cover the ear lobes if out in the cold weather, and after exposure, gently rub them with a moisturiser too.

Once a chilblain develops, the priority is to prevent the skin from breaking and infection occurring. Therefore, it is important to prevent further exposure to the cold, so keep on covering the affected areas whenever the temperature drops drastically or when going outdoors in cold weather. It may take up to 10 days for chilblains to heal, so you will need to persevere with any treatment.

Community pharmacists can advise patients how to treat chilblains, help to heal the damage and how to prevent them occurring in the future. If your customers have suffered from chilblains in the past, then refer them to the pharmacist in your workplace to prevent repeated occurrences of this painful condition.



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