

Do short wait times in pharmacy lead to unexpected side effects?

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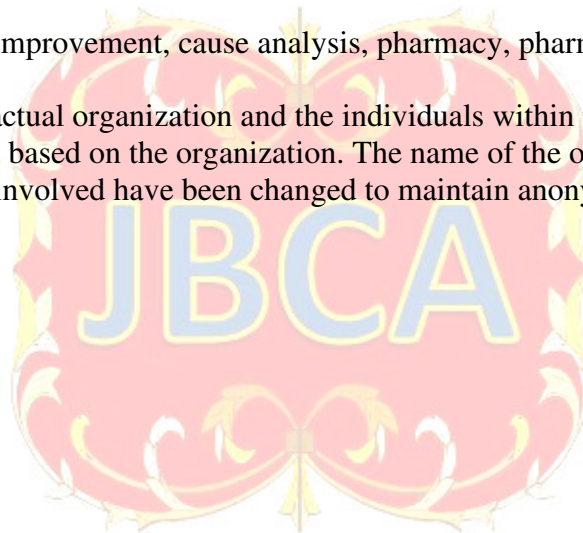
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ABSTRACT

This case study takes place in Rx+ Pharmacy (Rx+), a well-known convenience retail store and pharmacy that has a reputation for longer than average wait times. Rx+ is experiencing performance issues with the pharmacy staff which is affecting customer satisfaction. Additionally, the pharmacy is unable to consistently meet promised customer wait times and daily tasks are not being completed.

Keywords: Performance improvement, cause analysis, pharmacy, pharmacist, management

This case is based on an actual organization and the individuals within that organization. All facts stated are actual and based on the organization. The name of the organization and the names of the individuals involved have been changed to maintain anonymity.



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CASE RATIONALE

Working in a fast-paced business, it can be challenging to maintain good customer service with a positive attitude while completing all required tasks, as the tasks keep piling up. This case study presents a common challenge in the organizational world of meeting corporate standards and expectations in an overwhelming environment. At first glance, training is usually the go-to fix for performance issues, but with a deeper look, some performance issues prove to be more complex and need something other than training to be addressed properly. It is management's responsibility to determine the appropriate solution for an underperformer. As the pharmacy scope becomes more complex, ensuring that leadership of the pharmacy enterprise is unified becomes more and more critical (Killingsworth & Eschenbacher, 2018). Set in a fast-paced Midwest pharmacy chain, this case aims to determine the root causes of the performance issues and explore the possible intervention options available to address these issues.

INTRODUCTION

This case study focuses on performance-related issues within a corporate owned pharmacy. Rx+ is a retail pharmacy chain and convenience store with locations across the globe. Rx+ is one of four locations within a town, located in the mid-western United States. The impact of the performance issue appears to be tied to promised customer wait times for prescriptions and the required daily tasks in the pharmacy. Rx+ wait times are much longer than the corporate expectation and daily tasks are not consistently being completed. Rx+ averages one Pharmacist and anywhere from one to seven pharmacy technicians (techs) throughout a workday. Tech scheduling is based around the average number of prescriptions the pharmacy fills per day. If the pharmacy average prescription count goes down, allotted tech hours go down with it. Tech hours should be adjusted throughout any given week depending on the busy times of each day, this helps control labor costs. However, the issue the pharmacy is up against is meeting the corporate standards of average customer wait times and completing required daily tasks on a consistent basis, while ensuring customers are leaving satisfied. When customers complain in an angry tone, salespeople often feel like providing poorer service, both to that customer and others (Tao et al., 2016).

PHARMACY TERMINOLOGY AND PROCESS EXPLAINED

The process for filling a prescription at Rx+ begins with scanning a prescription. The prescription is then typed, the Pharmacist reviews the typed information, the prescription is printed and filled (counted and labeled), and then the prescription is verified by the Pharmacist. Once the prescription has been verified, it is then bagged and ready to be sold to the customer. The customer wait time clock being tracked by Corporate begins when a prescription is first received or scanned into the system and ends when the Pharmacist completes the final check. Wait times are a big part of customer satisfaction from the Pharmacy side.

New prescriptions and refills can be called in, faxed, e-scribed, or brought in as a signed hardcopy to be filled in the pharmacy. At this initial stage a pickup time is determined by either the pharmacy staff or the customer themselves. The customer has the option of choosing an exact time to pick up their prescription and techs have three options for pickup times when inputting a prescription: "waiter" (which would reflect the current wait time, usually 15 minutes), "pickup

later” (which would default to about 1.5 hours), or choose “tomorrow” (which would default to about 10:00 a.m. the following day). A downfall to the system is that if “waiter” is chosen, it cannot be undone, and if it is not chosen, there is no way to list someone as a waiter after the fact. The system in the pharmacy tracks prescriptions throughout the filling process, indicating waiters in the store by a green light over whichever stage the prescription is currently at. The green light only tracks those listed as “waiter,” which does not include those who have shown up after their prescription was sent to the pharmacy or those that chose a later time, but decided to wait instead.

There are a few different things that can happen during the filling process which would delay the prescription from being completed on time. Two common scenarios that can hold up the process are choosing a different National Drug Code (NDC) of a medication (which means changing the manufacturer of a medication in the system) or partially filling a prescription if there is not sufficient stock of the medication on hand. Both processes require a change to be made in the system and require a re-review by the Pharmacist before the paperwork prints again with the updated information to then be counted and labeled. There are times when even though a prescription is flagged as a waiter, it will not immediately print after being re-reviewed by the Pharmacist and requires a staff member to manually print the paperwork in order to fill the prescription.

There are four workstations in the Pharmacy: front counter, drive-thru, pharmacist station, and filling station. There are two roles in the pharmacy, being either Pharmacist or tech. Throughout the day, techs should be rotating through the different workstations to avoid being stuck in one station all day. Each station has at least one daily task to be performed as time permits. Some of the daily tasks include a ‘smart count’ which is counting 10 random medications, a 7-day Call List which is calling patients whose medication has been filled and ready to be picked up for at least seven days, and a Delete List which is going through all bagged prescriptions and removing those that have been ready for more than ten days.

To recap, the prescription filling process involves the following steps: scan, type, review, fill, verify, bag, and sell. The Pharmacist oversees the tech and the tech is only allowed to perform work under the supervision of a Pharmacist. While the entire pharmacy process can be performed by a Pharmacist, there are two steps in the process that techs cannot perform, being review and verification. This means that four of the six steps are to be split among the one to seven techs, and the one Pharmacist is in charge of the other two steps, for every prescription coming through the pharmacy. If techs get behind in any of their steps, the Pharmacist is their backup.

ANALYSIS OF PERFORMANCE ISSUES

Upon initial review of performance issues, it is a common misconception that the answer is a lack of training, and probably even more common is assuming that training will adequately address performance issues. In this case, it would appear that the performance issues might be solved by providing training to techs to better perform their daily tasks and fill prescriptions faster, but the resolution in this case, may or may not include training. Poor performance at Rx+ is apparent, but the problems leading to this are complex. To address the performance issue(s), we must first better understand what the performance issue(s) are.

DESIRED PERFORMANCE

For the purpose of this case study, both Pharmacist and tech were analyzed together as pharmacy staff. Throughout the day, prescriptions are being e-scribed, faxed, called-in, and hand delivered, each getting assigned their own wait time. Each tech should be rotating between the different workstations throughout the workday, and checking off the daily required tasks, as time permits. There are expectations of promptness when it comes to meeting customer wait times and corporate has set a standard of meeting 85% of promised customer wait times. With different workstations (and each workstation having a different focus for each tech), communication is key in relaying information back and forth and ensuring that each prescription is moving through the stages in a timely manner. Bahari and Ling (2010) found four main factors affecting customer satisfaction, one of which was attitude of the pharmacy/pharmacist (customer service).

ACTUAL PERFORMANCE

The actual performance in terms of wait time is central to this case. The filling process relies on communication and attention to detail to get prescriptions from start to finish, with several pharmacy staff touching it along the way. The process has a couple steps where prescriptions can get stopped and without pharmacy staff actively checking on each prescription, they can get held up in the process. Some of the observed issues are: 1) promised customer wait times are not being met on a consistent basis; 2) daily duties are not completed on a consistent basis; 3) communication between stations is lacking.

These issues are problematic and often lead to uneven work tasks among techs. Tasks that are not completed during the day are added on to that task for the next day, making more work for the tech who works that next shift (which can be further complicated if the staff levels are projected to be lower the next day). The longer these daily task lists become, the less time the tech has to ensure customer needs are met in a timely manner. If wait times are met less often, the chance of unsatisfied customers increases, which might lead to average prescription numbers decreasing, and the average prescription numbers directly impact hours available for techs.

PERFORMANCE GAP

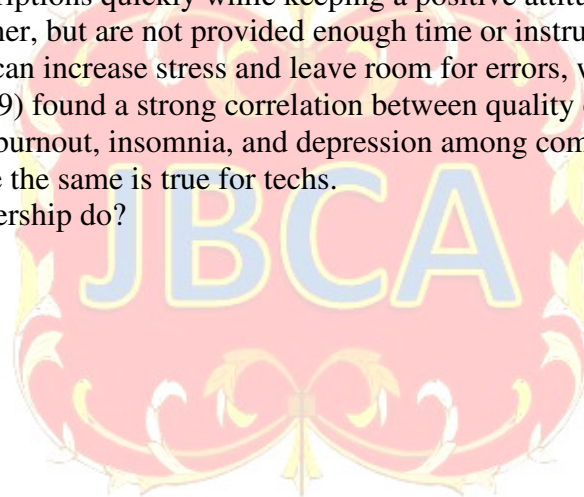
The performance gap is the difference between the actual performance and the desired performance (Van Tiem et al., 2012) at Rx+. One gap that was identified was promised customer wait times not being met. Corporate standards and expectations are that promised customer wait times are met 85% of the time or above. There are many issues that can arise during the filling process, and all of them have the potential to increase customer wait times, yet techs are expected to monitor each prescription throughout all steps, while helping the next customer. Another gap is the fact that pharmacy staff is under pressure to provide prescriptions quickly but also complete all daily tasks. Pharmacy staff is faced with large volumes of customers with short wait times, while daily tasks continue to increase. A third identified performance gap is communication being insufficient between the different workstations, thus providing room for prescriptions to be forgotten and wait times to be unreasonable. Table 1 (Appendix A) provides a breakdown of the performance gap.

IMPACT OF THE PERFORMANCE ISSUE

The impact on business operations is that even if one workstation falls behind, prescriptions take longer to get through the stages and to the customer. Customers have been experiencing longer wait times for prescriptions and have not been satisfied. During rush times at Rx+, such as 5:00 pm, customers will line up in the drive-thru and at the front counter. There is normally one tech at the filling station, one at the drive-thru, one at the front counter, and a Pharmacist. When customer wait times are not met, customer satisfaction declines and the likelihood of the customer transferring to another pharmacy increases, which in turn would decrease the pharmacy's average prescription numbers. The average prescription number directly impacts the number of scheduling hours allotted for techs. Customer safety, which should be of utmost importance, is not being placed as a priority over promptness in completing prescriptions.

The techs up front often pay attention to names of customers and the tech at the filling station primarily is looking at drug names. If the techs do not communicate names of priority patients to the filling tech, they have no way to know which prescriptions to check on to ensure the prescriptions have made it through all stages of the filling process. Pharmacy staff is under pressure to provide prescriptions quickly while keeping a positive attitude and providing a caring experience for the customer, but are not provided enough time or instruction to do so. Rushing techs to meet wait times can increase stress and leave room for errors, which could be deadly to patients. Sacre et al. (2019) found a strong correlation between quality of life and psychological factors, including stress, burnout, insomnia, and depression among community Pharmacists. It would lead one to believe the same is true for techs.

What should leadership do?



ANSWERS/TEACHER'S NOTES**Questions**

- 1) Consider the overall impact these performance issues could have on a pharmacy. Who is affected by it/who are the stakeholders?
- 2) What techniques could be utilized to investigate the factors contributing to the performance gap?
- 3) What might the techniques uncover? What might the factors be?
- 4) What are some possible solutions that could help close the performance gaps?

Possible Answers

- 1) Consider the overall impact these performance issues could have on a pharmacy. Who is affected by it?

All of the pharmacy's stakeholders are affected.

A. Stakeholders can be management, corporate, pharmacy staff, community, and customers.

1. Management – There is a concern for management stakeholders because the pharmacy success has a direct impact on earnings. If the pharmacy revenue declines, management might not earn raises, and without meeting corporate goals, they risk stricter monitoring.
2. Corporate – There is a concern for corporate stakeholders in the current situation. If prescription averages drop too low, this particular location is at risk for being closed down. There are three other Rx+ Pharmacies in the same town meeting corporate standards. If this location continues to have longer than average wait times and fails to meet corporate standards, a fourth location may not be warranted.
3. Pharmacy Staff – If the pharmacy prescription averages decline, tech hours decline, and management may need to help in the pharmacy more, therefore putting off their own daily duties.
4. Community – Rx+ supports local blood drives, community wellness initiatives, and fundraisers; these all serve as a form of promotion for the pharmacy. This poses a risk to the community in the form of a loss of funds and services donated.
5. Customers – Customer retention is a significant concern. With several other pharmacies in the community, the competition is significant. There is also a higher chance of errors in the prescription filling process if proper attention to detail is not practiced and if promptness is prioritized over safety.

- 2) What techniques could be utilized to investigate the factors contributing to the performance gap?

A “cause analysis” is used to determine why the performance gaps exist leading to the real issues and not the superficial ones (Van Tiem et al., 2012). Historically, experts suggest that performance problems are essentially deficiencies of knowledge, skills, training, or a host of management deficiencies (Van Tiem et al., 2012). In order to create effective solutions to the problems, the cause(s) of the problems need to be correctly identified. To assist in this process, it makes the most sense to separate the Pharmacists (management) from the techs.

While many of the analysis techniques may be similar, the use of the technique and the information they respectively seek to uncover differ in scope.

Pharmacist (Management)

Management is responsible for adequately and accurately addressing performance issues, but in some cases management can be part of the cause of performance issues. In any work environment, it is imperative that “management has a clear knowledge and understanding of the total work load placed on each individual in relation to his capacity...even good and competent individuals have increased potential for errors of judgement when overworked” (Turney & Gill, 2020, p. 26). If management does not take their leadership role seriously, employees can feel that they are on their own and are unsupported. It is management’s responsibility to manage teams, resolve conflicts, communicate effectively, and delegate work appropriately. If techs are required to perform managerial tasks, they may need leadership development to do so effectively.

Poor management can carry long-lasting effects on an organization. Management should be setup with the knowledge and tools to perform their responsibilities, as well as know how to setup their teams. Management should have skills in inclusiveness, professionalism, communication, leadership, and customer service. They should also provide empowerment, encouragement, and support to those they manage (Waters & Ahmed, 2020). Without basic management skills, teams can lack trust and confidence in management’s ability to manage. “Management factors play [a] significant role in the interpersonal relationships...which consequently results in several workplace outcomes such as job satisfaction and intention to stay” (Usadolo & Usadolo, 2019, p. 245).

Pharmacy Technicians (Staff)

It is important to determine the knowledge, skills, capacities, motivation, and expectations of the techs and this would provide an understanding of pharmacy staff and their situation in the pharmacy. Staff is responsible for performing their work and assigned tasks, but they need certain tools and resources in order to achieve this. Some tools that play a part in being successful staff are education, experience, and attitude, but beyond that, there are other areas of concern such as motivation and accountability. Some of these things need to be provided, produced, or taught by management. Staff needs feedback to know whether their performance is meeting standards or if improvement is needed, and management should be giving this feedback. Reviewing policies, feedback, and consequences of performance or nonperformance would provide an overview of the tools and resources available and/or being utilized by techs.

Techniques that could be utilized to investigate the factors contributing to the gap (both management and staff factors) are as follows:

1. Interviews – Interviewing management could aid in determining what the contributing factors might be. Interviews can be done on a one-on-one basis, small groups, or everyone in the same group. The fact that interviews are interactive, flexible, but focused in nature makes them one of the most trustworthy and effective sources of data about consumers (Arsel, 2017).

- a. One-on-one – Interviews are useful because they give voice to people’s lives and their perceptions of experiences important to them and allows for others to see the way they view their world (Belk et al., 2013). Individual interviews would allow a more open and honest dialogue of the issues in the pharmacy. Some individuals are more willing to share details and information during a one-on-one interview that they wouldn’t be willing to share in a group setting. This type of interview also allows for a single perspective, as opposed to a group perspective. For some individuals, a group setting can be anxiety inducing, so individual might provide more dialogue.
 - b. Small Groups (separate high performers from low; interview separately) – Individuals will view themselves differently as an individual and as part of a group. Conducting an interview in smaller groups allows for observation of group dynamics as they happen. Group interviews can promote more consensual data and are one way for researchers to view interactions, dynamics, and communication (Reczek, 2014).
 - c. Small Group (mixed – high and low in the same group) – A group interview with both high and low level individuals will allow a unique opportunity for an interviewer to witness power dynamics (Reczek, 2014). As with all group interviews, they are valuable in providing a way for an interviewer to view interactions, dynamics, and communication among a group.
2. Observation – Observation can tell a lot about the way work is done. Pharmacy operations can be observed during varying shifts, both on an individual basis and as a team, as well as observation of team meetings. Observations will provide insight as to how the Pharmacist interacts with staff. It can be easy for an individual to say they handle something a certain way or do certain things, but observing their behavior in action will give first-hand knowledge to an observer. Observation can be used to observe workers’ knowledge and their ability to execute work tasks, as well as provide a personal view of work dynamics (Turner & Baker, 2016).
 3. Surveys/Questionnaires– Surveys can be given prior to an interview to give an overview of the process and provide time for the individuals to consider their answers. Surveys can be used to assess thoughts, opinions, and feelings of pharmacy staff. These can be used to gain information and insights into various topics dealing with pharmacy staff and their work environment. The objective of a survey/questionnaire is to assess the current performance status, existing performance management practices, and factors or problems that affect performance (Kassaneh & Workalemahu, 2018).
 4. Brainstorming Session – A brainstorming session would provide a space where everyone could participate equally and ideas could be generated and prioritized in a group dialogue. “A popular technique to generate creative ideas is brainstorming, and it has received a lot of attention in creativity research” (Goldenberg & Wiley, 2019, p. 261)
 5. Reviewing Existing Documents – Reviewing existing documents, such as safety reports and customer surveys, can provide insight into what historically has been happening in the pharmacy. It is important that performance factors, metrics, and targets are properly defined, because these can be used as major indicators for performance measurement and improvement (Kassaneh & Workalemabu, 2018).

6. Data Review –Reviewing company data can provide information not seen from the surface or that otherwise might not be reported. Local documents, as well as documents from other similar companies can be reviewed to compare market performance. Data review can be used to narrow down problems that can be solved at the local level using their own potentials, resources, and appropriate method to improve organizational performance (Kassaneh & Workalemabu, 2018).
7. Financial Review – Reviewing financial statements can provide information about an organization such as how much money they are bringing in, how much debt is owed, the monthly income, and the expenses. A financial review can provide an overall understanding of the business's processes.

3) What might the techniques uncover? What might the factors be?

The techniques used could uncover a multitude of different issues in the pharmacy causing the performance gap. Both management factors and subordinate/individual factors can be identified.

1. Goals – The goals of the organization are not in line with the goals of the pharmacy staff. Norgaard & Sporrang (2019) investigated the view of stakeholders on the role of community pharmacy. The study found that medicine was thought of as the main focus at the pharmacy; however, the stakeholders did not appear to be aware of the full extent of the competencies within the pharmacy.
2. Communication/Feedback – The pharmacy staff may not be aware of communication issues due to a lack of feedback. When communication is poor and prescriptions are missed, the outcome may be an angry customer who takes their business elsewhere, but poor communication creating an unsatisfied customer does not result in disciplinary measures for techs.
3. Training – There might also be a lack of quality training for some of these techs acting in quasi-manager capacities. There might also be a lack of training in general for techs to have the tools to perform their required tasks. Corporate gives minimal tools and materials and does not always include instruction for meeting expectations.
4. Influence – Pharmacy staff does not have enough influence in workplace processes and decisions. Staff can provide valuable information pertaining to what is and what is not working, as well as ideas for improvement.

Management Factors – findings from the actual case of factors influencing tech performance.

1. Feedback – Feedback is not given on a consistent or timely basis. Feedback can occur in a number of different approaches, such as annual review feedback, monthly feedback during meetings, 30-60-90 day feedback, etc.
2. Lack of Instruction/Guidance – Instruction and guidance is rarely given regarding instrumentation for performance expectations.
3. Job Rotation – Job rotation rarely happens and is less than consistent when it does.
4. Expectations – The techs do not have a clear and relevant guide to what constitutes adequate performance. There is also not a clear description of what is expected of performance.

5. Lack of Resources – Pharmacists and techs do not have the resources needed to match performance needs, such as tools, time, and materials.
6. Career Development Opportunities – Pharmacists are not offered career-development opportunities (such as supervisory training), nor are they encouraged to participate in such opportunities.
7. Consequences & Accountability – There are not clearly defined consequences for poor performance, and management is acting in more of an avoidance approach than confrontation and accountability.

Subordinate/Individual Factors – findings from the actual case of factors influencing tech performance.

1. Communication – People and customer service skills are not taught and communication can be poor. Communication is a key aspect of customer service and is also important to effectively get work done between coworkers, especially in a fast-paced, high-stress environment.
 2. Stress – The pharmacy has a potential to be a high-stress environment. High-stress can cause techs to relay some of that stress onto other pharmacy staff and customers, and potentially lead to costly or deadly mistakes.
 3. Influence – The pharmacy staff has limited ability to influence the work environment. Techs should have more input in the workplace processes and decisions and should also have the opportunity to develop people skills.
 4. Motivation – Motivation can wane over time, especially if management does not provide the information, tools, and accountability needed to keep employees feeling engaged and being treated fairly. Another way to think about this is distributive justice – in instances where the techs are not performing to the correct or expected levels, do they perceive management handling all techs fairly and consistently.
- 4) What are some possible solutions that could help close the performance gaps?

When performance issues are identified a common resolution is training. In this case, pharmacy staff knows and understand how to perform their duties, so there does not appear to be a training gap. Solutions, also known as workplace interventions are “deliberate, conscious acts that facilitate change in performance... they are measures that are planned, selected, and designed to solve workplace problems or address promising opportunities and challenges” (Van Tiem et al., 2012, p. 195). Sustainability and feasibility should be considered for each possible intervention. These interventions should be selected based on outcomes or results, impact, and value to the organization, as well as the situation. Amerine et al. (2016) studied a pharmacy with wait times being an average of 78 minutes. They evaluated workflow, performed a weeklong kaizen, and put together a plan with interventions that lead to wait times reduced to an average of 26 minutes (Amerine et al., 2016). Some performance issues require several interventions to address a single performance issue. Table 2 (Appendix B) provides possible interventions for all identified factors. Many interventions can be used to address more than one identified factor. Where there are different factors that apply to both Pharmacist and techs, the intervention may need to be addressed for each in particular. As indicated in Table 3 (Appendix C) there are a list of possible interventions,

as well as their explanations and an example, that could be selected to aid in addressing the performance issues happening at Rx+.

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APPENDIX A

Table 1

Performance Gaps Identified From Comparison of Desired vs Actual Performance

PERFORMANCE GAP	DESIRED	ACTUAL
1. Customer wait times, fast service	85% wait times met	45% wait times met, customers are leaving dissatisfied after long wait times
2. Daily tasks	Completion of daily tasks	Daily tasks are not being completed in a consistent basis
3. Communication	Communication between Pharmacist and techs through all prescription steps	Lack of communication, forgotten customers, missed prescriptions



APPENDIX B

Table 2

Optional Interventions to Address Factors Identified

Factors Identified	Intervention(s) to Address
Feedback	30-60-90 Coaching Mentoring Performance Appraisals 360 Degree Appraisals
Instruction/Guidance	On-the-job Learning
Incentives	Compensation/Benefits Education/Training
Job Rotation	Job Rotation Job Design
Resources	PSTs or Job Aids Six Sigma
Career Development Opportunities	Employee Development Career Pathing
Communication	Communication Networks Team Strategies
Stress Influence	Health and Wellness Suggestion Systems Leadership Development Supervisory Development
Expectations	Formal Expectations Job Descriptions

APPENDIX C

Table 3

Learning Interventions Table

LEARNING INTERVENTIONS		
Term	Definition	Possible Application
Organizational Learning	A conscious and deliberate way to design organizations so that they function effectively, efficiently, and provide value to their customers or clients through the goods and services that they offer (Van Tiem et al., 2012, p. 245).	Example: tech team learning to use a new technology that will increase efficiency.
On-the-Job Learning	A strategy used to train new employees, which has been melded with just-in-time training and has become part of a seamless, on-the-job learning continuum for workers. It is a real time changing strategy that is defined by time, place, and resources (Van Tiem et al., 2012, p. 262).	Performing a job and learning during the process, rather than prior to performing a task.
Just-in-Time Learning	Training design that takes place just before or concurrent with the trainee's need to use a specific knowledge or skill (Van Tiem et al., 2012, p. 262).	Learning how to perform a prescription delete list when it is due, rather than learning before being able to perform.
Performance Support Tools (PSTs) or Job Aids	Provide just-in-time, on-the-job learning, and just-enough information to enable a worker to perform a task efficiently and successfully without special training or reliance on memory (Van Tiem et al., 2012, p. 282).	Lockout/tag out quick guide for on the spot instructions without procedure in hand.
Job Design	The process of putting isolated tasks together to form complete jobs (Van Tiem et al., 2012, p. 295).	Procedure with itemized steps, i.e. WAL-012.
Job Rotation	Form of job enlargement that occurs when employees do numerous and entirely different jobs on a flexible, revolving schedule without disrupting the workflow (Van Tiem et al., 2012, p. 296).	A good example would be a tech taking a shift at another store or location. Not every store does entirely the same tasks, so another location may offer entirely different jobs.
Reengineering, Realignment, Restructuring	Radical design of processes for the purpose of extensive rather than gradual performance improvement. Realignment is all about getting the organization refocused on its core competencies (Van Tiem et al., 2012, p. 297).	The restructuring of the org chart to better align with organizational focus, core competencies, and the mission.
Continuous Improvement	An ongoing, systematic process to assure, maintain, and improve processes,	Cross-training employees is an example of continuous

	products, and services based on predetermined standards and customer satisfaction (Van Tiem et al., 2012, p. 305).	improvement, which allows for a more smoothly run operation.
Six Sigma	A systematic quality improvement process that is used on both the production and transactional sides of the business to design, manufacture, and market goods and services that customers may desire to purchase (Van Tiem et al., 2012, p. 306).	An approach to reduce the time taken for the product to reach the customer since the order has been placed can be reduced to fulfill customer needs is done by six sigma. This would improve the process time and increase value by making the customers happy.
Feedback	Informing people about how others perceive their actions and communications (Van Tiem et al., 2012, p. 313).	Managers or coworkers informing you about both positive and negative outcomes of your actions or communications.
Emotional Intelligence	The ability to accurately identify and understand ones own emotional reactions and those of others. It also includes the ability to regulate one's emotions and to use them to make good decisions and to act effectively (Van Tiem et al., 2012, p. 319).	Example: being aware of, and responding to, other people's emotional states shows an understanding that we all experience emotions and every person's feelings matter.
Social Intelligence	The ability to get along well with others while winning their cooperation. It is a combination of sensitivity to the needs and interests of others, sometimes called your 'social radar,' an attitude of generosity and consideration, and a set of practiced skills for interacting with people in any setting (Van Tiem et al., 2012, p. 319).	Example: a person being able to understand and manage interpersonal relationships. It involves emotional intelligence and self-awareness.
Staffing	The talent management function that anticipates and fills open positions within organizations (Van Tiem et al., 2012, p. 327).	Strategically planning personnel numbers, hiring strategies, training, and retraining, etc.
Employee Development	The process that begins after the candidate accepts the final offer of employment and continues through the employee's life with the organization (Van Tiem et al., 2012, p. 328).	Example: Integrating continuous learning in the workplace which in turn will strengthen employee commitment and organizational growth.
Motivation	The inner drive, a state of feeling or thinking that emerges, directs, and sustains human behavior (Van Tiem et al., 2012, p. 345).	Reward systems are used at the pharmacy to motivate employees: gift certificates, bonuses, vacation time, etc.
360-Degree Appraisals	A comprehensive approach to performance appraisal that uses self-	Example: obtaining feedback from bosses, peers, and

	ratings, customer ratings, and ratings by others to evaluate the performance of an employee (Van Tiem et al., 2012, p. 349).	subordinates to appraise an employee.
Dispute Resolution	Involves alleviating a disagreement between two or more people who share differing views (Van Tiem et al., 2012, p. 369).	An example would be the Pharmacist helping resolve a dispute between two techs, by meeting at least some of each side's needs and addressing their interests.
Team Strategies	A group of people working together as a cohesive unit to accomplish a common goal. Team strategies are the methods team members work out in advance for accomplishing the objectives at hand (Van Tiem et al., 2012, p. 374).	The plan of the day. The techs and Pharmacist determine a plan of the day to ensure that all tasks are covered throughout the day and nothing is missed.
Problem Solving	The structured process of defining a problem, gathering data about the situation and causes, considering alternatives, making choices, evaluating the new situation, and adjusting based on evaluation (Van Tiem et al., 2012, p. 378).	An example of this would be resolving chargebacks. The tech reviews the data, determines causes, considers solutions, and then makes a choice on resolution. Previous chargeback resolutions are reviewed and evaluated for future adjustment.
Strategic Planning	The process by which an organization envisions its future and develops the necessary goals and procedures to achieve that vision (Van Tiem et al., 2012, p. 379).	An annual review meeting: the company evaluates the strengths and weaknesses of the organization, develops a business plan draft, and establishes measurable objectives for each goal.
Appreciative Inquiry	AI is both a philosophy and a process to determine what is working successfully within an organization. It is systematic in approach and it brings out the best in people, in the processes that are crucial to their work, and in the dynamic environment in which accomplishment is primary (Van Tiem et al., 2012, p. 382).	Example of this would be focusing on what works well in the Pharmacy and expanding on how that can be even better, rather than focusing on not meeting wait times.
Outsourcing	The process of contracting out to another organization or transferring responsibility for an area of work that had been performed inside the organization to a source outside of the organization (Van Tiem et al., 2012, p. 382).	An example would be contracting another company to type prescriptions for Pharmacy, in order to meet business needs or deadlines, rather than have local techs type the prescriptions.

Benchmarking	The systematic approach of comparing an organization to other organizations for purposes of identifying better work methods and determining best practices (Van Tiem et al., 2012, p. 383).	Rx+ often benchmarks with other pharmacies to discover new methods or practices to perform work in the prescription filling process.
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