

# Excessive Reorders: A contest reduces workload

Krista Mikula, Silvia Hetz  
Klinikum Wels-Grieskirchen,  
Pharmacy, Wels, Austria

Contact: krista.mikula@klinikum-wegr.at

## What has been achieved?

The transparent information and display of those wards leading in terms of reorder frequency and quantity triggered the ambition to no longer staying among those TOP 3 wards.

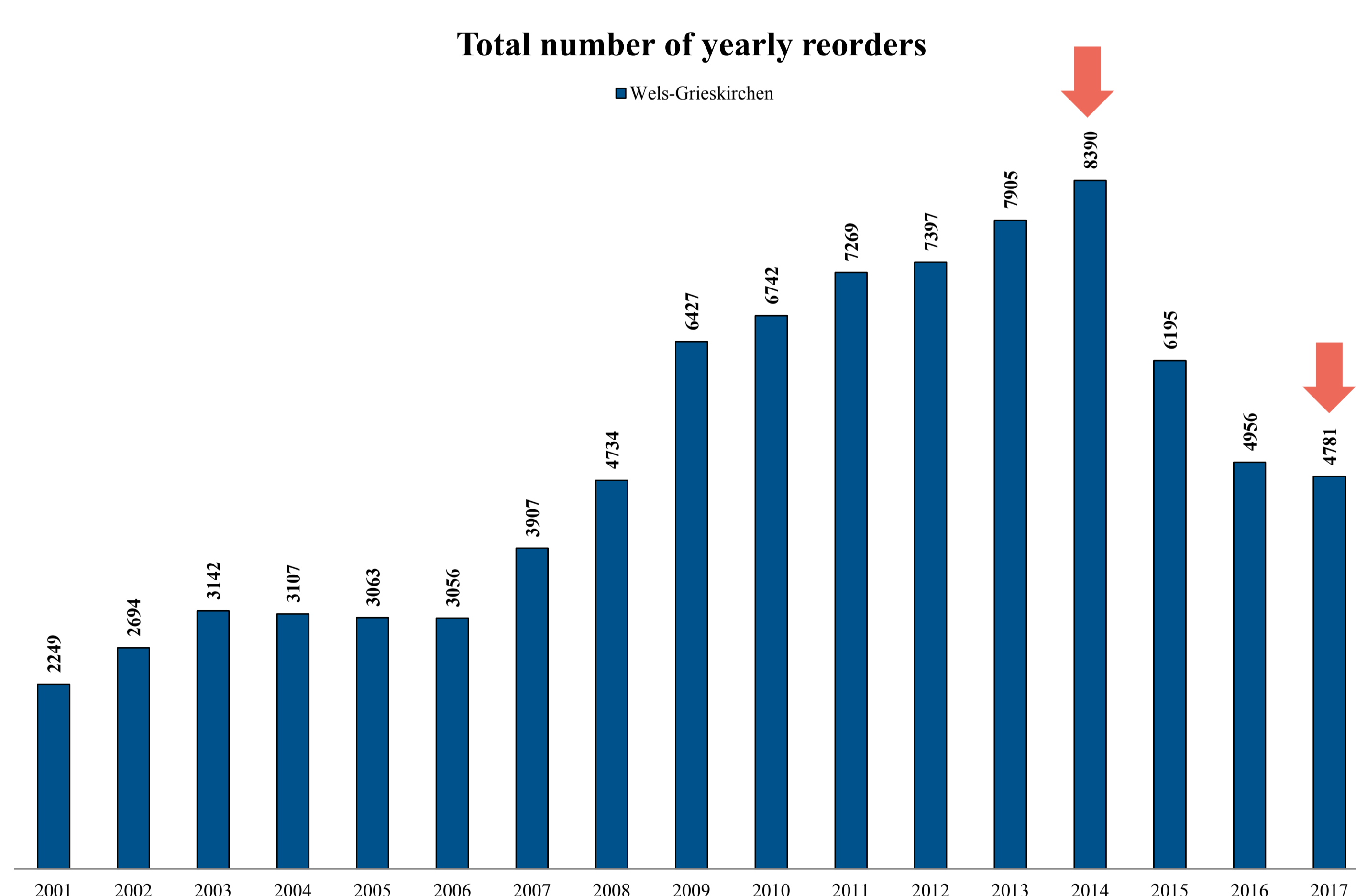
Starting with a total number of yearly reorders of **8.390** in 2014, the intervention reduced reorders to **4.781** in 2017 (**minus 43%**).

The most successful ward reduced the number of annual reorders from **472** in 2014 to **230** in 2015 (**minus 51,48%**). 229 reorders were placed in 2017 (minus 51,48%).

- 5 observation periods
- 15 wards were involved

After 1,25 years, these wards were ranked again, not because they had bad results, but because all wards had improved. This information initiative has become self-limiting, as overall reorder compliance stabilized on a low level.

Considering the overall time needed for reorder processing (i.e. an average of 32 minutes per reorder, including all relevant process steps) a total of **1.950 hours per year** (equivalent to 1 FTE) was freed for more value-adding tasks.



## What next?

Constant reevaluation of reorders take place to occasionally identify new needs for action.



<http://www.eahp.eu/gpis/excessive-reorders-contest-reduces-workload>

Poster SPD 7179  
Presented at the EAHF congress  
Barcelona, 2019

## What was done?

**The goal was to reduce time consuming reorders by phone to free up time for other value adding tasks.**

At the beginning of each observation period (i.e. three months), the intervention wards received detailed information regarding their leading ranking position (TOP 3)

- how they compare with other wards
- their reorder frequency
- the matter reordering had on hospital pharmacy process
- logistical advice how to best reduce
- avoid reordering per phone

After each of the observation periods, wards with a need for intervention changed (i.e. reorders were reduced) in the TOP 3 ranking.

## Why was it done?

In the 1.200 bed teaching hospital of Wels-Grieskirchen, Upper Austria, wards place routine orders of formulary medicines online.

- predefined orders between 6:45 and 9:00 AM
- later reorders be placed by phone
- extra time needed for processing
- interruption of an ongoing task
- needed 20 minutes to return back to the initial task (Besser fix als fertig: Hirngerecht arbeiten in der Welt des Multitasking, Bernd Hufnagl ISBN: 978-3-85485-331-2)



## How was it done?

Starting in January 2014 reorders were systematically analysed across all wards by using consumption and ordering data out of the hospital logistic IT system.

Those three wards with the highest number of reorders received special attention as intervention wards.