



DEPARTMENT OF VETERANS AFFAIRS OFFICE OF INSPECTOR GENERAL

PODCAST TRANSCRIPT

Medication Delivery Delays Prior to and During the COVID-19 Pandemic at the Manila Outpatient Clinic in Pasay City, Philippines

March 2021

Introduction:

Hello listeners! Thank you for listening to this companion podcast produced by the Department of Veterans Affairs Office of Inspector General. Companion podcasts summarize and increase awareness of VA OIG published reports and regularly feature those OIG employees who conducted the report, inspection, or investigation. Find all VA OIG podcasts online at va.gov/oig.

Teresa Prunte:

This is Teresa Prunte, a health systems specialist at the VA Office of Inspector General. Today, I am speaking with Ariel Drobnes, an associate director also with the OIG on the report, [Medication Delivery Delays Prior to and During the COVID-19 Pandemic at the Manila Outpatient Clinic in Pasay City, Philippines](#). The report focused on pharmacy services and medication delivery delays, including delays due to COVID-19-related travel restrictions. Let's start by talking about VA's presence in the Philippines, which is unique.

Ariel Drobnes:

It sure is. The Manila Outpatient Clinic is the only VA healthcare facility located in a foreign country. The Clinic is on U.S. embassy property in Pasay City and offers primary care, limited specialty care, mental health, imaging, and laboratory and pharmacy services to our veterans residing in or visiting the Philippines.

Teresa Prunte:

Interesting. How long has the VA had a presence in the Philippines?

Ariel Drobnes:

Well, the VA has been in operation in the Philippines since the U.S. Veterans Bureau opened in 1922, almost 100 years ago. More than 7,000 islands make up the Philippines, organized into three groups: Luzon, Visayan, and Mindanao. Luzon, where the U.S. embassy is located, consists of the northern islands. Visayan is comprised of the central islands and Mindanao is the southern island group.

Teresa Prunte:

That's a lot of area for the VA to cover.

Ariel Drobnes:

Absolutely. Some veterans visit the clinic to pick up prescriptions and others purchase medications from community pharmacies and are later reimbursed through the VA Foreign Medical Program. Many of our veterans live far away from the clinic and rely on the Manila Outpatient Clinic to deliver medications to them by using land and air-based courier services, such as AIR21. The clinic's pharmacy staff fills over 14,000 prescriptions per month. Clinic policy requires a patient's medication be delivered throughout the Philippines by AIR21 as they track shipments and requires a signature upon receipt of the medication.

Teresa Prunte:

Well, given these already complex logistics in servicing our veterans in the Philippines, conditions, like travel restrictions, related to the pandemic certainly could have impacted medication delivery. How and when did the OIG become involved?

Ariel Drobnes:

We received allegations that in October and November of 2019, the delivery of a patient's pain medication was delayed. A second patient reported delivery delays of nine medications and diabetic testing supplies in November as well. We also received complaints that during COVID-19 lockdowns, beginning in March 2020, patients did not receive their medications.

Teresa Prunte:

Were the allegations true?

Ariel Drobnes:

Yes, in the case of the patient whose pain medication was delayed. The OIG substantiated that prior to the COVID-19 pandemic, this patient did not receive a pain medication timely from the Clinic pharmacy. The pharmacy was unable to obtain the medication from the prime supply vendor in Hawaii due to a morphine shortage that was resolved in late September 2019. We determined that although the patient experienced delays, no adverse clinical outcomes occurred.

For the second patient, the OIG found that five of the nine medications and the testing supplies were new prescriptions and dispensed within clinic established guidelines. One medication was a renewal and the patient received it prior to the previous month's supply running out. The other three medications were refills and we could not determine when the patient requested the refills, and therefore we were unable to identify if there was a delivery delay. Here as well, the OIG found that the patient did not experience adverse clinical outcomes. Also, both patients were aware of the Foreign Medical Program but declined to use that benefit.

Teresa Prunte:

During the course of your inspection, what else did the OIG discover?

Ariel Drobnes:

We found that the chief of pharmacy reported a processing time of 10 days for the month of October for mail out medications, which was eight days over established policy. In November, the chief initiated an action plan to address the increase in processing time, which was attributed to staffing issues and medication shortages. The plan called for more overtime hours to offset November and December holidays, establishment of a daily prescription processing target, stabilization of drug supplies, and adjustment of drug reorder levels to maintain supply. As a result, the processing time decreased to 1.63 days for December.

Teresa Prunte:

So, clinic management took action to resolve delays prior to the pandemic. What happened when the pandemic began?

Ariel Drobnes:

Great question. On March 8, 2020, the president of the Philippines declared a public health emergency and then implemented quarantines that imposed strict travel limitations on March 16. The U.S. Embassy announced its closure on March 17, and the Clinic closed the same day. Clinic leaders took actions to prepare for an expected nationwide shutdown, such as allowing for 90-day refills, releasing controlled substance prescriptions early, prioritizing controlled substances and higher risk medications, and coordinating with the U.S. Embassy to deem pharmacy services as essential, which allowed pharmacy staff to travel to the clinic to fill prescriptions.

Teresa Prunte:

Did patients experience medication delivery delays during the COVID-19 pandemic?

Ariel Drobnes:

Yes, the OIG substantiated that four patients experienced delays in March and April 2020, due to limited or nonexistent AIR21 courier transport as a result of government travel restrictions. AIR21 advised customers they would only accept medications for delivery in the serviceable area within Luzon, where the Clinic is located, and customers could expect delays due to numerous inspections and checkpoints.

The OIG substantiated pharmacists could not dispense insulin to a patient as the Clinic pharmacy had no stock after April 2020. Perishable items, like insulin, could not be shipped safely due to unavailability of flights to the Philippines. The Clinic Manager informed the OIG of clinic pharmacists working with the supplier and a local pharmacy to establish a temporary system to procure and store a supply of insulin.

Teresa Prunte:

How did these delays affect the patients?

Ariel Drobnes:

The OIG determined that the medication delays during the pandemic did not result in adverse clinical outcomes for the four patients.

Teresa Prunte:

That's good news. Did the pharmacy continue to operate during the pandemic?

Ariel Drobnes:

Yes, in a limited capacity. Although the Clinic closed, staff continued to fill prescriptions. By May 2020, the pharmacy mailed prescriptions to most locations in the Philippines. In June, the U.S. Embassy began a slow phased reopening. By August, some in-person appointments were occurring at the Clinic. To ensure pharmacy staff coverage, two pharmacists remained in telework status and were ready to travel to the Clinic if on-site pharmacy staff were required to quarantine due to COVID-19 exposure.

Teresa Prunte:

How did the Clinic inform patients of changes to operations?

Ariel Drobnes:

The Clinic Manager consistently communicated COVID-19-related updates to patients, including expected medication delivery delays, pharmacy hours, updates on AIR21 operations, and directions on how to obtain medications, including using local pharmacy options and requesting reimbursement from the Foreign Medical Program.

Teresa Prunte:

The team made two recommendations. First, to evaluate the current pharmacy ordering processes and take action to reduce the frequency of pharmacy stock shortages, and second, to review the impact of nonworking hours, including holidays, on pharmacy processing delays. Did VA concur with the recommendations?

Ariel Drobnes:

Yes, the VISN director and clinic manager concurred with the findings and recommendations and provided acceptable action plans, which are included in the report. The OIG will follow up on the planned actions until closure.

Teresa Prunte:

VA Office of Inspector General

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Ariel, I appreciate your time today. Thank you for helping our listeners understand what we do here at OIG and how we help improve the veteran experience in our outpatient clinics.

Ariel Drobnes:

Thank you for the opportunity.

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