The Journey to Deployment: Process and Change Management

Clinically Integrated Supply Chain Symposium Session 3
August 9, 2021

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Welcome

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Conflict of Interest

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Has no real or apparent conflicts of interest to report.
Conflict of Interest

Matthew Mentel

Has no real or apparent conflicts of interest to report.
Agenda

- Supply Chain as Key to Quadruple Aim
- Success Factors and Current Gaps
- People, Process, Solutions
**Session Description**

The start of any journey begins with the first steps! Once there is sign-off on the project a plan of action needs to be created. “People, process & technology” is a proven framework that highlights interactions, prioritizes focus and drives successful program implementations. In this session we will focus on the “process” aspect of the transformation of a clinically integrated supply chain. As you begin this project you need to be cognizant of what is working, identify what needs to be disrupted and determine what to develop and reform.
Learning Objectives

• Discuss how to map processes across various stakeholder functions: clinical, supply chain, IT, finance, etc

• Identify how to build a critical path to guide desired end goal

• Describe how to manage creative brainstorming and the change management needed to gain broad adoption of disruptors/new approaches
**Background**

It's really not about Clinically Integrated Supply Chain...

It's about creating **interoperability** between all operational disciplines to accomplish the **Quadruple Aim**

- Patient Experience
- Cost
- Care Team Well Being
- Quality of Care
Background – Quadruple Aim to Everyone

- Reduce Risk
- Reduction of Variation
- Improve workflow
- Caregiver satisfaction
- Patient Safety
- Cost per case
- Charge Capture
- Comparative Effectiveness
- Reduction of Risk
- Patient Safety
Strategy & Objective

Organizational Strategy

Clinical Operations
- Nursing & Physicians
- Supply Chain
- Finance
- IT

Patient Experience
Care Team Well Being
Quality of Care
Cost

Patient Outcome
Supply Chain Role in Clinical & Financial Workflows

Supply Chain Data Flow

Procure
- Ensure item is set up in item master w/relevant details and pricing according to contract terms

Manage
- Manage item receipts, put-away, and other transactions
- Ensure item is available and safe to use (not expired or recalled)

Use
- Find/Get/Document item used in patient record

Bill
- Charge for item used for a patient when billable

Order
- Determine reorder needs and place or submit item requisition

Pay
- Issue PO, process invoice, and pay for item received

Part of Clinical Workflow
- Item Data Management
- Application Support (ERP, EHR, Billing systems)
- Analytics & Decision Support

Part of Financial Workflow
# Data Gaps Exacerbated by Multiple Complex Systems

<table>
<thead>
<tr>
<th>Key Hospital Caregiver-Facing Systems</th>
<th>Key Hospital Administrative Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admitting/Scheduling</td>
<td>AI Analytics</td>
</tr>
<tr>
<td>Billing</td>
<td>Supply Chain</td>
</tr>
<tr>
<td>EHR</td>
<td>Finance</td>
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<tr>
<td>Procedural Documentation</td>
<td>IT</td>
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<td></td>
<td>HR</td>
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</tbody>
</table>

### Examples:
- **EPIC Prelude**
- **CERNER**
- **Siemens A2K**
- **EPIC**
- **CERNER**
- **GE McLab**
- **IBM**
- **Merge**
- **McKesson Horizon**
- **Philips Xper**
- **Oracle**
- **Infor**
- **Workday**

### Patient Care:
- **Patient scheduling**
- **Patient billing**
- **Patient charting/record repository**
- **Patient documentation for specific procedures**

### Patient Outcomes:
- **Health Outcomes**
- **Population health**
- **Decision Support**

### Supply Chain Data Required: Enterpise Resource Planning
# Current Systems – Data Gaps

<table>
<thead>
<tr>
<th>What Data Available</th>
<th>What Data NOT Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Item master data, relevant for purchasing &amp; contracting: (i.e., item number, price, UOM, etc.)</td>
<td>× Capture/show clinical usage transactions</td>
</tr>
<tr>
<td>✓ Purchasing transactions, status &amp; history (requisitions, POs, receipts)</td>
<td>× On-hand availability in many clinical locations/depts</td>
</tr>
<tr>
<td>✓ Some inventory management (on-hand status by location)</td>
<td>× Lot/serial number tracking</td>
</tr>
</tbody>
</table>

**ERP**

- ✓ Patient admissions & history
- ✓ Patient clinical notes for each encounter/procedure
- ✓ Supplies/implants used for each patient encounter

**EMR**

- ✓ On-hand items availability
- ✓ Items safety status (expired, recalled, etc.)
- ✓ Accuracy/reliability of item usage
Common SC Pain Points

• Operational & workflow impediments
  • Stock-outs
  • Hoarding
  • Lack of visibility
  • Lack of safety status
  • Manual entry at point of care
  • Missing item numbers or billing codes
  • Delayed billing
  • Incorrect, incomplete or missing orders

• Lack of actionable reporting & analytics
  • Limited data available
  • Inconsistent across an IDN
  • Difficult to mine
Process Transformation

People  Process  Solutions
People - Cross-Functional Process Improvement Team
Process

- Executing Strategies that align with Clinical Workflows
- Engagement beyond the silos of departments
Solutions

- Data generation sources
- Most organizations have hundreds of these
- Often claims to be more than reality

- Provides nudges or forced actions
- Real-time capabilities
- Multi-delivery methods (text, pop-ups)

- Descriptive & Predictive Analytics
- Status sources
- Interesting but limited action

Systems of Record

Systems of Action

Systems of Display
Current Systems – Data Gaps

Formulate your strategy to address

What Data Available

- Item master data, relevant for purchasing & contracting: (i.e., item number, price, UOM, etc.)
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What Data NOT Available

- Capture/show clinical usage transactions
- On-hand availability in many clinical locations/depts
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- On-hand items availability
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Solutions – Start with Strategy

- To Address Data Gaps & Reliability
- To Improve Operational Efficiency
- To Enable Decision Making

Technology/Automation Examples:

- Kanban
- Scanning
- RFID
Questions

...It's not always complicated
Thank you!

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