

Improving outcomes through better inventory management

When it comes to managing supplies, the surgical suite is often the most challenging area in a hospital. Competing demands, staff skill mix, misaligned roles and the push for optimized metrics all breed a sea of inefficiencies regarding the way critical products are ordered, stocked and case-picked. Unless an efficient inventory management process is in place, the productivity of clinical staff suffers as well as patient outcomes and physician and clinician satisfaction.

So what can an OR director do to turn the tide?

Fundamental to performance optimization is allowing dedicated logistical staff to manage surgical supplies, to ensure cases are picked correctly and needed supplies are readily available, says Lori Greer, assistant director for facility operations at SolutionsTrust, the supply chain consulting arm of HealthTrust. "Efficient ordering of supplies is a mathematical calculation based on usage and history, not haphazard based on intuition and bin size. The result is improved surgical metrics such as scheduling accuracy, on-time starts and room utilization. Also, fewer products get wasted due to expiration and obsolescence."

"If nurses are making fewer trips out of the room to deal with supply-related issues then they are spending more time focusing on patient care and maintaining the sterile environment of the OR," says Beth Bozzelli, assistant vice president for surgical services improvement at SolutionsTrust. After implementing best practices for data integrity, preference cards and supply management, one client facility saw its surgical infection rates plummet 88 percent in one year (Figure 1).

Point-of-use technology can be a critical tool to assist in gaining efficiencies, provided it is used as designed, said Bozzelli. Otherwise, it's a costly duplication of manual efforts. "Data integrity plays a key role," she said. "If clinical documentation and materials management systems are in sync, clinicians can be confident they're working with a single source of truth that properly informs preference cards and the reporting of supply usage. This also aids facilities in evaluating physician-specific costs per case."

Physician satisfaction increases when a facility follows best-in-class inventory management practices and they no longer have to deal with delays, have procedures postponed or incorrectly scheduled, or wait days to have preference cards updated – and it will also motivate them to steer patients for elective surgeries, increasing surgical volume for those facilities, Bozzelli noted.

Facilities are advised to consider the full complement of planned process-improvement activities when developing project plans so clinicians and the supply-chain team can effect positive change while avoiding re-work, says Greer. Preference card work, for example, would logically come only after an inventory correction initiative or cleanup of procedure lists.

To ensure optimization, inventory management processes put in place must be sustainable and the resulting metrics require monthly review, said Greer. An analysis tool allows facilities to identify who is doing what and for how long, aiding in the calculation of OR efficiency measures such as rush orders,

on-time starts, supply-specific case delays and turnover times. "It's easy to go wrong with this exercise because staff fears loss of control and hours," Bozzelli added. "Transparency is key."

As for the perennial problem of finding the time and resources to effectively assess, develop and implement improved inventory management processes, consider hiring a consultant with experience managing operating rooms and supply chain departments to help triage the implementation, said Greer. "Even in the leanest of facilities, there's always room for improvement, especially when it comes to improving surgical metrics, patient throughput and satisfaction of the surgery team," she said.

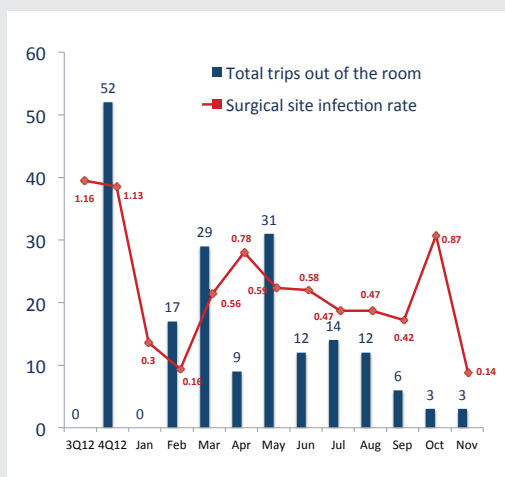
Expected outcomes of every SolutionsTrust engagement have additionally included inventory reduction and better alignment of job roles and responsibilities, according to Greer. "There's a lot you can do without technology, or by optimizing existing technology," she said. "We come in as partners and stay to help facilities do the work and train their people, so they're left with a process they can maintain on their own."



Beth Bozzelli, SolutionsTrust



Lori Greer, SolutionsTrust



1. Targeted supply inventory in OR rooms and storage areas to reduce trips.

2. New process: Staff must prepare case the evening prior or morning of surgery. Any items pending are documented on the form so the next person can obtain before case setup.



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