

Supply Chain Virtual Forum recap: Tips to improve your health system's strategy from 11 supply chain leaders

IDEAS THAT MATTER

- The COVID-19 pandemic ushered in previously unrecognized and unmatched challenges across the entire healthcare supply chain.
- Communication between clinical and supply chain teams has been critical in responding to the COVID-19 pandemic.
- Supply chain is more of an art than a science and It's crucial to invest in a diverse, talented supply chain team.

FEATURED SPEAKERS



Carl Hall
Vice President and General Manager,
Distribution Services & Presource,
Cardinal Health



Sean Poellnitz
BS, CHRM, Vice President, Supply Chain,
Mosaic Life Care, Mayo Clinic Care Network



McKenzie Jackson
MHA, Regional Director, Logistics & Supply
Chain Operations, Bon Secours Mercy Health



Tim Braun
MHA, BSN, RN, Chief Operating Officer,
Carroll County Memorial Hospital



Régine Honoré Villain
MPH, Senior Vice President, Supply Chain
Network and Chief Supply Chain Officer,
Ochsner Health



Charlie Miceli
Network Vice President and Chief Supply
Chain Officer, The University of Vermont
Health Network



Pamela Bryant
Senior Vice President, Supply Chain
Management, Parkland Health & Hospital
System



Anurag (AJ) Jaiswal
Director, Supply Chain Performance &
Analytics, UChicago Medicine



David H. Peck
Vice President, Supply Chain Management,
Houston Methodist



Dave Marcelletti
Vice Chair, Supply Chain, Mayo Clinic



Jon Reuter
Vice President, Supply Chain, Facilities &
Construction Management, City of Hope
National Medical Center

Overview

The COVID-19 pandemic amplified numerous challenges within the U.S. supply chain, from the scarcity of procurement sources to vetting an influx of new entrants to the market. Supply chain leaders have had to be extremely flexible, experiment with new procurement strategies and quickly find new sources of supply to keep up with the demand for personal protective equipment, ventilators and other medical supplies to treat COVID-19 patients.

During a July 21 supply chain leadership virtual forum, hosted by *Becker's Hospital Review* and sponsored by Cardinal Health, eleven supply chain leaders from health systems across the country shared the lessons they've learned throughout the pandemic, strategies to improve operations and tips to build a more effective supply chain team.

5 Key Takeaways

1. The COVID-19 pandemic ushered in previously unrecognized and unmatched challenges across the entire healthcare supply chain. In the initial months of the pandemic, a large number of companies began making medical supplies for the first time, and supply chain companies had to figure out how to vet these new companies to make sure they were legitimate.

Audience Poll:

Has COVID-19 made you more or less likely to invest in new supply chain initiatives in the near future?

More 96%

Less 4%

"There's been a flood of new entrants making supplies. We probably vetted 500 to 600 new entrants to market and I'd say less than 5 percent were actually viable, highlighting the fact that there's really a limited amount of actual sources out there that are legitimate," said Carl Hall, vice president and general manager of distribution services and Presource at Cardinal Health.

It also became challenging to predict the burn rate of supplies as demand for personal protective equipment reached unprecedented levels globally.

"Surrounding the general fragility of the supply chain in the United States, it's honestly pretty shocking when all

the sudden from one month to another the tap is turned off and you can't get what you used to get," said McKenzie Jackson, regional director of logistics and supply chain operations at Bon Secours Mercy Health in Cincinnati.

2. Communication has been key to supply chain leaders' COVID-19 response. When New Orleans began seeing a spike in COVID-19 cases, Ochsner Health's supply chain went from comfortable levels to "basically chaos" in no more than 36 hours, said Régine Honoré Villain, the health system's senior vice president of supply chain network and chief supply chain officer. Between a dramatic increase in demand for medical supplies and shifting rules and guidelines from the CDC, communication between the supply chain team and clinical teams "turned out to be key." From the minute Ochsner Health realized there would be a crisis, Ms. Villain said she began working directly with the chief of epidemiology to communicate any policy changes to her whole team.

At Parkland Health & Hospital System, Pamela Bryant, senior vice president of supply chain management, said the supply chain team became part of the leadership at the command center right away.

"Being engaged from a leader standpoint in the command center gave us input to all of the drivers. Making sure you have supply chain engaged at the beginning allows you to make decisions to improve your supply chain."

3. Collaboration between supply chain teams and clinical teams has been critical during the COVID-19 pandemic. David Peck, vice president of supply chain management at Houston Methodist, said his supply chain team works with both a general surgeon and orthopedic surgeon who help the supply team increase clinical buy-in.

"Physicians not only want to be, but they need to be co-creators of the strategy," said Jon Reuter, vice president of supply chain, facilities and construction management at City of Hope National Medical Center in Duarte, Calif. "The more your physicians have buy-in, the better you're going to have success in ultimately meeting the collective needs of your supply chain."

Sean Poellnitz, vice president of supply chain at Mosaic Life Care in Saint Joseph, Mo., said that bringing good, clean data to the table has been critical to partnering with clinical stakeholders.

"Our biggest win we have now is coming to the table with really good data, and it's critical that we focus on partnering with clinical stakeholders to make sure we all walk down the street together at the same time," Mr. Poellnitz said.

4. Accurate data is essential to boosting clinician buy-in. A good first step to making sure your data is clean and accurate is starting with your item master, said Tim Braun, RN, COO of Carroll County Memorial Hospital in Carrollton, Mo. Figure out how to clean up the item master and make the data more easily accessible.

67% of survey respondents indicated "Inventory Management Data" as services they look for in a distributor

"If you don't have a strong item master to start with, your data is going to have a lot of extra items on it that you don't want to weed through later," Mr. Braun said.

Charlie Miceli, network vice president and chief supply chain officer at the University of Vermont (Burlington) Health Network, said that because data is always changing, it's critical to keep constant eyes on data to make sure it's usable and allows you to make the right decisions not only for both financial and clinical efficacy.

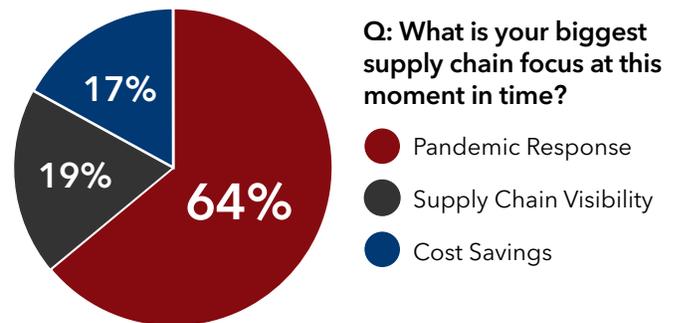
"Transparency of the business processes as well as the data aligned with the clinicians is critical. Being able to take data and align that so it can be understood and then consumed very efficiently and effectively with our clinical folks has been critical," he said.

Anurag Jaiswal, director of supply chain performance and analytics at UChicago Medicine, said that when it comes to using data, it's important to frame the problem you're trying to solve.

"Sometimes we get lost in just creating the technology, so defining the problem is crucial. That gets both views of the data and the outcome and also stays focused on the problem, not on the technology," he said.

5. It's crucial to invest in a diverse, talented supply chain team. Mr. Poellnitz said that supply chain is more of an art than a science, and it's important to have a diverse set of skills on your team to get the best results.

"A baseball team doesn't have nine pitchers. We like to balance out between engineers and visionaries, because diversity of thought really helps the idea generation. Diversity of thought breeds new ideas and agility," said Dave Marcelletti, vice chair of supply chain at Mayo Clinic in Rochester, Minn.



Mr. Peck said that investing in a talented team is going to be critical to addressing the supply chain problems related to COVID-19 pandemic.

"People are going to be our biggest asset moving into the remainder of 2020 and beyond. March and April were just a warmup. COVID-19 has brought supply chain to the forefront," he said.

To view the full panel discussions from the supply chain virtual forum, click [here](#). ■