Through the annual Intalere Healthcare Achievement Awards, we recognize our members for successful initiatives implemented at their facilities to improve supply chain and financial operations, enhance quality and patient satisfaction, and increase community awareness and education.

In this era of disruptive change within the healthcare industry, it is more important than ever to not only recognize the successful initiatives that providers are implementing to enhance their services, patient outcomes and bottom line, but to also share these best practices with others in order that they too may be successful in their efforts as well. We feel strongly that in working together we can all make a powerful impact in this ever-changing industry. Therefore, we are pleased to provide this compendium which is a compilation of all projects submitted by Intalere members for our recent awards program.

This compendium includes more than 40 projects and initiatives accomplished by Intalere members. Each project includes the issue or challenge faced, the solution put in place to resolve the issue and the results of the initiative. We hope that you will be encouraged and motivated to implement similar initiatives at your facility if you are experiencing some of the same challenges as those presented in the following pages.

If you would like more information on any of the projects summarized in this publication, please contact the facility representative noted on the project or feel free to contact Intalere at awards@intalere.com.

Sincerely,

Julius Heil
President and CEO
Intalere
The projects included in this publication were submitted by members participating in the annual Intalere Healthcare Achievement Awards. This program allows Intalere to recognize its members each year for their successful initiatives implemented to enhance quality and operations, improve patient satisfaction and increase community awareness and education.

For more information on the awards program, visit www.intalere.com or contact awards@intalere.com.
# Community Impact and/or Innovation

Recognizing members for outstanding humanitarian achievement within the communities they serve or innovative excellence at their organizations.

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COMPLETE DINING TRANSFORMATION

ISSUE
Dining plays a major role in senior living and has a significant impact on the quality of life for seniors. In the industry's move to person-centered care, senior living communities are challenged to enhance and modernize the dining experiences they offer.

SOLUTION
Bethany Home hired a consultant to help them reinvent their dining program from a hospitality perspective. The goal was to provide the same quality dining experience residents would expect from their favorite local restaurant, while still accommodating special diets and nutritional needs. More menu choices and open dining times, decentralized dining areas, restructured staffing models, and enhanced customer service and culinary skills training were a few of the big ticket items on the wish list. The transformation of the foodservice department and culture was initiated while undergoing a $25 million campus expansion and renovation project.

OUTCOME
The newly expanded and renovated Bethany campus boasts an impressive and unique dining experience, featuring two restaurants open 7 a.m. to 7 p.m. daily – a full-service restaurant with house-smoked and wood-grilled food, and a chef-driven fast-casual concept with a WoodStone oven. Also included are six residential-style "neighborhood" dining areas, bar/lounge, ice cream shop, event/demonstration kitchen with deck and dining area, and plenty of space for catering meetings and events. The foodservice department's systems and operations have been streamlined and now offer a true hospitality-style dining experience that continues to impress. Bethany was nationally awarded as 2017’s Foodservice Department of the Year by the Association of Nutrition & Foodservice Professionals (ANFP) and the Nutrition & Foodservice Education Foundation (NFEF), and is also FoodService Director magazine's "Anatomy of a Renovation" feature for 2018.

ABOUT BETHANY HOME, INC.
Bethany is a faith-based senior living community located on 30 serene acres nestled between peaceful Shadow Lake and the sparkling Crystal River, just one mile from downtown Waupaca. Bethany provides a continuum of care services to enable seniors to age in place. It offers independent living duplexes, assisted living apartments, rehabilitation, respite, hospice and long-term care. Through all its expansion and renovations Bethany’s mission remains clear, to provide "The Best Care. Always."
BOSTON CHILDREN’S HOSPITAL COMES TO THE AID OF PUERTO RICO PEDIATRIC HOSPITALS

ISSUE
Pediatric hospitals in Puerto Rico were in need of medicine and supplies after Hurricane Maria hit and devastated the island.

SOLUTION
Boston Children’s Hospital leadership identified a budget available to purchase the medical supplies and medicine needed to aid in the relief effort. The pharmacy and supply chain departments identified and prioritized the shopping list items received from the hospitals in need, taking into consideration quality control, weight, transportation needs and cost. They also identified and arranged warehousing and transportation to Puerto Rico. When placing the orders and explaining the situation, many vendors graciously donated additional supplies on top of the items requested. In addition, an internal online giving page was created so that employees and departments who wanted to help could donate to the effort.

OUTCOME
Only 20 days after the hurricane hit, representatives from Boston Children’s landed in Puerto Rico and personally delivered the medicine and medical supplies to San Jorge Children’s Hospital and Hospital Pediatrico Universitario. By delivering close to 10,000 pounds of medical supplies, Boston Children’s was able to immediately improve the situations of the two pediatric hospitals, which in turn impacted all shelters on the island as the hospitals now had the supplies necessary to also attend to patients in need at local shelters.

ABOUT BOSTON CHILDREN’S HOSPITAL
Holding the top spot on U.S. News & World Report’s Best Children’s Hospitals for 2017-2018, Boston Children’s Hospital is a 404-bed comprehensive center for pediatric healthcare. As one of the largest pediatric medical centers in the U.S., Boston Children’s offers a complete range of healthcare services for children.

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CREATE ART AT WORK

ISSUE
Senior living communities are beginning to feel the effects of a growing caregiver shortage, resulting, in part, from turnover due to employee stress and burnout.

SOLUTION
Elder Care Alliance (ECA) developed a creative arts practice – a program called “CreateArtAtWork” – as a component of employee wellness programs to help reduce caregiver stress that can lead to illness and turnover. The program consists of three types of team projects: asynchronous, semi-collaborative and fully collaborative. Also available are special individual projects to address stressful events. By choosing themes, prompts and materials that relate to specific life events, employees are encouraged to be “in the moment” in their creative practice and to work through emotional difficulty. This service line is based on research and ECA’s own experience suggesting that the incorporation of creative arts into the workday improves mood and reduces stress, generates creativity and promotes collaboration.

OUTCOME
CreateArtAtWork is a service line consisting of kits and consulting engagements that enable employers to offer a differentiated creative arts experience at work. As the program evolves, projects will be marketed and sold online and through social media with free and paid products. Many products will be “Do It Yourself” (DIY) and available for download, but some more involved packages will be available for purchase, including live facilitation by an ECA Ph.D. Art Therapist. Pilots will be conducted with other senior living organizations and eventually marketing efforts will expand to health systems and others in the larger aging space.

ABOUT ELDER CARE ALLIANCE
Elder Care Alliance consists of four assisted living/memory care buildings, one skilled nursing building and an active adult living community. ECA’s vision is: engaging hearts, transforming lives, erasing boundaries.

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VIRTUAL REALITY PROGRAM

ISSUE
As an assisted living and memory care community, a significant challenge faced by Encore at Avalon Park has been the inclusion of a variety of therapies and activities that appeal to a diverse resident group.

SOLUTION
After implementing programs like the Songbird Music Program, Art Therapy and Pet Therapy, Encore at Avalon Park researched the virtual reality experience to add to the variety of alternative therapies already offered. Residents with memory disorders may be challenged in leaving the building to experience things such as a music concert, which will take them back to a happy memory and could provide them with a calming experience, but with virtual reality they can go anywhere in the world without leaving the comfort of their home. Understanding that not all residents would be using the program for therapy, the program can be used for activities as well. The activity base allows for residents to experience places and things that they have always wanted to do and to also revisit favorite places.

OUTCOME
Implementing the Virtual Reality Program, memory care residents were given an alternative to medication for treatment and assisted living residents were given the opportunity to experience lifelong dreams without leaving the comfort of their home. The facility has noticed visible changes in the residents that participate in the programs – from calmed behavior in memory care residents to elevated levels of happiness in the residents who use the program for entertainment.

ABOUT ENCORE AT AVALON PARK
Encore at Avalon Park, an assisted living and memory care community, is uniquely designed with six neighborhoods of 15 residences, each in the heart of a community built on the rich traditions of small-town life. Encore at Avalon Park’s philosophy is to provide personalized care to meet individual needs.
GOOD SAMARITAN REGIONAL MEDICAL CENTER FOOD RECOVERY PROGRAM

ISSUE
Good Samaritan Regional Medical Center (GSRMC) wanted to reduce the amount of food wasted each year at their facility while addressing food insecurity and hunger within their local community (Benton County).

SOLUTION
The GSRMC Community Health Promotion department met to identify ways to reduce waste within their facility and address food insecurity within the community. A workgroup was developed to review and examine best practices for hospitals and community food banks to work together to address these issues. In partnership with their foodservice supplier, local food share programs (soup kitchens) and churches, the Food Recovery Program was developed. The unused food from the GSRMC cafeterias that meet USDA/FDA standards would be delivered seven days a week through the food share programs to two local churches and used for meals to serve children and families in need.

OUTCOME
In 2017, as a result of the Food Recovery Program, GSRMC contributed more than $12,000 in food donations and provided nutritious, healthy meals to more than 2,200 people in need. The initiative has expanded with the four additional Samaritan Health Services hospitals now participating in the Food Recovery Program.

ABOUT GOOD SAMARITAN REGIONAL MEDICAL CENTER
Good Samaritan Regional Medical Center is located in Corvallis, Ore., and is the largest hospital serving the Benton, Lincoln and Linn County region, offering dozens of medical specialties, including comprehensive cancer care, a full-service cardiology and cardiovascular surgery program, neurosurgery, orthopedic and spine surgery, inpatient mental health and other services.

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HARBINSTRONG

ISSUE
Harbin Clinic's self-insured health plan identified that covered members had obesity rates that were higher than the national average and many had multiple disease states. Numerous employees had, or were at risk of developing, hypertension, obesity, hyperlipidemia or diabetes.

SOLUTION
Harbin Clinic established the HarbinSTRONG program in an effort to create a culture of health and vitality and to provide wellness resources to employees. A key component of HarbinSTRONG is the Health Management Pathway program that supports employees who are shown to be at risk. The program provides detailed action items to help correct health problems and move employees toward better overall wellness. Completion of the program is required to earn a premium reduction, but the program also encourages employees to complete additional health and wellness activities and challenges to earn status ranks and receive company and peer recognition. The program includes health challenges, workshops, activity logging, preventive exams and community events along with challenges that allow departments and department members to compete with and against each other for prizes and recognition.

OUTCOME
A cohort study of 384 group members showed a reduction in six out of seven health measures. Covered spouses also experienced positive changes, averaging a 6% weight decrease and a 4% blood glucose decrease. In both 2015 and 2016, all of the covered employees and spouses earned at least the HarbinSTRONG incentive to receive their wellness premium reduction. More than 100 employees completed their first 5K or health walk during the program and 81% of employees stated that they have made at least one positive health change.

ABOUT HARBIN CLINIC
Harbin Clinic is Georgia's largest physician-owned, multi-specialty clinic with more than 220 providers across more than 30 specialties in 17 locations throughout Northwest Georgia. Since 1870, the Harbin family has practiced medicine in the region, founding the Harbin Hospital in 1908 in Rome, Ga. That hospital grew into the present Harbin Clinic, which cares for thousands of patients each day.

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INNOVATION AT WORK: CREATING A PREFERRED NETWORK TO IMPROVE EMPLOYEE HEALTH AND THE BOTTOM LINE

ISSUE
Rising healthcare costs have led to an environment in which employers, providers and payers are seeking new models of care to maximize quality of care for their employees at the lowest cost. Traditional methods of controlling costs and promoting healthier employees – wellness initiatives like weight loss competitions, fitness trackers and free gym memberships – have failed to have a significant impact on total plan spend or the actual long-term health of employees.

SOLUTION
Lexington Clinic worked with a benefit broker to engage self-funded employers in restructuring their health benefit plans to create a premier network featuring Lexington Clinic. This network provides significantly reduced cost-sharing for the members and an incentive to utilize Lexington Clinic for medical care. The overall network provided in the original plan is untouched, and members are still free to seek care wherever they prefer. However, having a new premier network in place at a lower cost than the original in-network tier has successfully encouraged members to obtain care at Lexington Clinic facilities. Member employees also have direct, expedited access to Lexington Clinic for same-day, routine and specialty care appointment via a dedicated Member Navigator.

OUTCOME
When comparing data from before and after implementation of the premier network, ancillary cost dropped more than 40% and facility outpatient costs more than 30%. There is strong evidence that through careful plan design, making use of co-payment selection and deductibles, beneficiaries can be steered toward providers of choice. In this premier network, employers and partnered provider groups receive a better overall picture of expenditure and health outcomes.

ABOUT LEXINGTON CLINIC
Lexington Clinic was founded in 1920 and is central Kentucky’s oldest and largest medical group practice. Lexington Clinic has nearly 200 providers and serves more than 600,000 patients every year. Lexington Clinic has providers in 30 different specialties and has more than 25 locations throughout central Kentucky.

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LIVINGSTON HEALTHCARE’S HARVEST OF THE MONTH
PILOT PROJECT

ISSUE
The Harvest of the Month program was integrated into Montana schools (K-12) to help connect local, seasonal foods to students, while also benefiting the local economy as more money was invested into local producers rather than national and international corporations. Expansion of the program into other areas of the community can strengthen Montana’s economy, health and the local food system.

SOLUTION
Livingston HealthCare participated in a pilot program bringing the Harvest of the Month program into the Montana healthcare system in an effort to educate employees, patients and community members on how to eat seasonally, healthfully, locally and sustainably in Montana, while preserving valuable farm and ranch land. Livingston HealthCare is an ideal location for this program as the Food and Nutrition Services Manager and Registered Dietitian Jessica Wilcox is a champion for local foods and works closely with Montana producers with preference to Park and Gallatin counties. Livingston HealthCare’s Café Fresh spends up to 40% of their food budget on locally grown products and has invested in trained chefs to produce a menu based on local procurement.

OUTCOME
As a pilot site, Livingston HealthCare has been successful in implementing the Harvest of the Month program multiple times per week in the Café Fresh recipes. Each month, the specified Harvest of the Month product is purchased from local growers and incorporated into the Café Fresh menu. As an example, the café purchased 80 pounds of summer squash (the Harvest of the Month product for September) from a local farm and served it in a variety of forms and dishes. The program has been successful in increasing institution and consumer spending on Montana grown/raised foods with the outcome of healthier communities, more economically vibrant communities and for preserving Montana’s agricultural heritage and land.

ABOUT LIVINGSTON HEALTHCARE
Since 1955, Livingston HealthCare has provided premier quality healthcare to the residents of Park County and surrounding communities. Livingston HealthCare keeps the community healthy with a broad scope of services, provided by well-trained and highly skilled professionals. Included in those services are a 25-bed critical access hospital, a multispecialty physician practice, rehabilitation services and home-based services. A not-for-profit organization, Livingston HealthCare is governed by a board of directors populated by community volunteers.

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Elders living in long-term care centers are often isolated from the greater community and spend most of their time indoors. Feelings of loneliness and isolation can affect physical and mental health, leading to depression, dementia and an increased risk of mortality.

Miravida Living investigated programs addressing isolation and depression that offered opportunities for socialization and allowing residents to be outdoors and experience “the wind in their hair.” In 2016, Miravida Living partnered with the State of Wisconsin Department of Health Services to fully implement the Cycling Without Age program, a global initiative in which long-term care residents are taken for rickshaw rides piloted by trained, licensed volunteers. As part of the decision to implement this program, Miravida Living conducted quantitative and qualitative research measuring outcomes of the program and capacity to support the development of Cycling Without Age programs in long-term care settings across the state of Wisconsin. As a result, Miravida became the first elder care organization in the United States to become a licensee of Cycling Without Age.

The Cycling Without Age program provides opportunities for intergenerational experiences between elders and volunteer pilots. Residents can enjoy being outside in the fresh air, improving quality of life, lowering the incidences of behavioral concerns and reducing the need for anti-psychotic medications. Data outcomes as per CASPER (Certification And Survey Provider Enhanced Reports), standardized CMS reports that compare results for long-term care facilities to state and federal measurements:

- Anti-psychotic Medications: Miravida Living - Bethel Home – 10.08%; State Average – 13.89%; National Average – 17.86%


Miravida Living provides a full continuum of housing and healthcare services for the elderly and others in need. Included in their offerings are Bethel Home, a 128-bed skilled nursing facility, Eden Meadows with 30 rehabilitation suites and 20 skilled care beds, Gabriel’s Villa with 40 assisted living apartments, Elijah’s Place with 12 beds dedicated to dementia care, Carmel Residence featuring 74 apartments dedicated to independent living and three HUD subsidized complexes offering 220 apartments to seniors 62+ years of age.
MOUNTAIN LAKE HOSPITAL CONSTRUCTION

ISSUE
A new replacement hospital was desperately needed for Mountain Lakes Medical Center since the original hospital was only 32,000 square feet, more than 30 years old and filled to capacity. After construction was underway, it was discovered that the project was overdesigned by $3M versus what was budgeted. The project was at risk due to a deficit of funding for the design vision for the project, as well as a shortage of resources to outfit the hospital on time and on budget.

SOLUTION
Initially, Mountain Lakes considered changing their general contractor in an attempt to solve their design versus budget deficit. Michael Gerhardt, the Intalere Construction Specialist, provided information to show that the contractor’s construction numbers were on track, and making a change midstream would only delay the project and create a larger funding deficit. A collaborative team involving the InMed Group, the construction company and the general contractor began the difficult work of finding areas within the project to reduce costs, and were eventually able to bring the project back on track. As the building was nearing completion, the next challenge was the massive amount of medical equipment that needed to be quoted, negotiated and purchased for the new building. However, this was easily managed through the Intalere contract portfolio.

OUTCOME
The new state-of-the-art 67,000-square-foot facility replaces the outdated building and brings much-needed advancements in healthcare to the rural community of Clayton, Ga. When budget was tight or certain aspects of the design were in question, InMed never wavered on one goal: putting the patient first by making Mountain Lakes Medical Center feel like home. From the outside, Mountain Lakes looks like anything but a hospital. Its unique location, mostly-glass exterior and mountain chalet interior have greatly enhanced the patient experience.

ABOUT MOUNTAIN LAKES MEDICAL CENTER
Mountain Lakes Medical Center is a new 67,000-square-foot critical access hospital in Clayton, Ga., that includes 25 inpatient beds, and outpatient and emergency services. The hospital has operating rooms, a pharmacy, a lab, and dietary and radiology departments. It serves the Rabun County community and communities throughout Northeast Georgia.
NORTH SHORE BEHAVIORAL HEALTH OPENING

ISSUE
In the state of Maine, there are limited resources available for children's behavioral health services. There are hundreds of children on a wait list at any given time, and without available behavioral health resources, these kids are losing out on potential growth and development.

SOLUTION
With a vision of creating an agency that sets a new precedent on providing the very best behavioral health services possible, North Shore Behavioral Health was established to provide these much needed services to the state of Maine. The agency opened in October 2017, despite having only two investors and no formal business loan, and was able to offer more than 30 employment opportunities, providing the necessary resources for clients and their families.

OUTCOME
Opening in October, the initial goal was to serve 10 families by the end of the year. North Shore Behavioral Health exceeded this projection, serving more than 30 families within that three month timeframe. The facility became the number one requested agency in York County and will be expanding to a second office within their current building in order to accommodate a projected increase in clientele as they expand services to cover Cumberland County. In addition, North Shore Behavioral Health is implementing software that will allow for closer tracking of progression and treatment plans. This will allow for more effective time management of current clients and streamline the process of welcoming additional clients.

ABOUT NORTH SHORE BEHAVIORAL HEALTH, LLC
North Shore Behavioral Health, LLC, is an authorized Maine State Children's Behavioral Health Service Provider offering in-home and community support services. The facility’s programs share a primary commitment to provide care with a strength-based approach that builds upon its clients' strengths, responds to clients' concerns, and utilizes natural support systems and community resources.

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TIMBER GRILL FOOD TRAILER SENIOR OUTREACH EVENTS

ISSUE
Food programs, such as meal site kitchens, were not readily available to the aging population of the very isolated rural regions of Sawyer County, Wis.

SOLUTION
Senior Resource Center implemented a pilot project in which a food trailer (named the Timber Grill) would visit isolated rural parts of the county to provide meals and general medical services to older adults who would otherwise not receive these services in their communities. Representatives from Senior Resource Center completed a Food Truck course and Entrepreneurial Training program. They were then awarded a grant to revitalize the county’s four meal site kitchens by the U.S. Department of Agriculture. This is the first time that a food trailer has been used for this purpose in the state of Wisconsin. They began the program by identifying 10 of the most isolated and underserved areas in the county and contacting businesses to request usage of their property and facilities for meal events for seniors. Local organizations and churches were asked for assistance and volunteers to either provide rides to the homebound or to deliver meals to their homes. In addition to meals, other services provided through the trailer included flu shots, blood pressure screenings and memory checks.

OUTCOME
The Timber Grill food trailer provided meals and services to approximately 400 residents through 10 outreach events held in some of the most rural isolated areas of northern Wisconsin. The Timber Team traveled more than 500 miles on these journeys each Wednesday for several months. The pilot project has formed partnerships with communities that had previously felt left out and forgotten. Due to the success of the pilot, the program will continue. Senior Resource Center is working with local farmers to offer locally grown fruits and vegetables in the trailer and is soliciting donations from foodservice suppliers as well.

ABOUT SENIOR RESOURCE CENTER
The Hayward site is a full commercial-certified restaurant kitchen. At this location Senior Resource Center prepares the food that is then transported and served out of its traveling food trailer in rural areas where there are not senior center meal sites.
BROOKMEADE’S FAMILY RECIPES & THE NEST

ISSUE
Finding effective avenues for self-expression and communication is important for every individual, but especially for those living with Alzheimer’s disease, dementia and chronic illness. The Brookmeade Community wanted to increase ways to restore residents’ ability to express themselves, increase their self-esteem and improve their quality of life.

SOLUTION
Under the direction and foresight of CEO/Administrator Karen Zobel, and guidance of Executive Chef Eric Stritt, Brookmeade introduced “The Nest” and “Brookmeade’s Family Recipes.” The Nest is the Baptist Home Café, which acts as a common ground for staff, visitors, residents and families. Residents and families are empowered and encouraged to socialize and spend time in The Nest, which becomes a sensory experience for residents, prompting their memory, engaging them in discussion, and stimulating their senses through good food and socialization. Brookmeade’s Family Recipes is a compilation of recipes derived from residents’ life experiences and cultures. More than just recipes and procedures, it is a window and reflection of their lives, and captures and builds on the idea that the best memories in life are created in the kitchen with loved ones.

OUTCOME
Each resident who spends time at The Nest receives an interactive experience that brings back memories of their past, while also allowing them to enjoy the current moment of spending time with family and friends. Additionally, the meals served are perfect vehicles to augment the residents’ diet nutritionally to maintain good health and prevent dehydration. And because The Nest offers an exceptional culinary experience, it is a sought-after destination and has generated more than $30,000 in revenue in 2017. Through the Brookmeade’s Family Recipes publication, residents were empowered to choose their own level of participation and means of self-expression, resulting in increased self-esteem and a measurable increase in their quality of life. The cookbook, which is sold for $15, is used as a fundraising mechanism with all proceeds benefiting the Brookmeade Community Foundation.

ABOUT THE BAPTIST HOME AT BROOKMEADE COMMUNITY
The Brookmeade Community, located on 75 country acres just outside the Village of Rhinebeck, is a senior living retirement community serving the Hudson Valley and surrounding areas. Arbor Ridge offers independent living, The Terraces offer assisted living and The Baptist Home provides long-term care, sub-acute rehabilitation, palliative care and out-patient rehabilitation services for 120 residents.

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**FINANCIAL AND OPERATIONAL IMPROVEMENT**

Honoring the achievements of members who enhanced the bottom line, improved cash flow, maximized net patient revenue and implemented strategic operational improvements within their organizations.

Avita Health System  
*AC  19*  
$2 Million in Savings on Equipment Budget for a New Hospital

Boston Children’s Hospital  
*AC  20*  
Healthcare-centric Contract Management Comes of Age at Boston Children’s Hospital

Crystal Run Health  
*NAC  21*  
Central Pharmacy Implementation Lower Costs and Improves Quality

Intermountain Healthcare  
*IDN  22*  
Vendor Managed Inventory Implementation

Liberty Regional Medical Center  
*AC  23*  
Intalere’s Alliance Contracts Significantly Lower Costs without Reducing Clinical Standards

Masonic Village, Elizabethtown  
*NAC  24*  
Masonic Village Facility Maintenance Supply Efficiency Success

Parkview Health  
*AC  25*  
Natural Gas Procurement Strategy

Parkview Health  
*AC  26*  
Optimizing POU Technology – Overcoming Scanning Compliance Issues

Punxsutawney Area Hospital  
*AC  27*  
Transitional Care/Swing Bed – A Revenue Opportunity for Rural Hospitals

Reid Health  
*AC  28*  
Food Waste Reduction Program

The Oregon Clinic  
*NAC  29*  
Collaborating to Expand Treatment Solutions, Improve Clinical Outcomes and Significantly Reduce Investment Costs

The University of Vermont Medical Center  
*AC  30*  
Scopes Repairs and Costs, Oh my... Collaborating with a Third-Party Repair Organization for Quality, Service, Management and Cost Benefits

Virginia Mason Memorial  
*AC  31*  
Stocking Algorithm

Washington Rural Health Collaborative  
*NAC  32*  
Analytic Software Implementation Drives Joint Contracting and GPO Maximization across Multi-Hospital/EMR Network
$2 MILLION IN SAVINGS ON EQUIPMENT BUDGET FOR A NEW HOSPITAL

ISSUE

With two critical access hospitals in Crawford County, Ohio, Avita Health System expanded operations into Richland County by repurposing a former department store into a 27-bed full-service hospital. However, Avita was challenged with furnishing the new hospital with the needed equipment on a tight budget.

SOLUTION

Avita was provided with an equipment budget of approximately $16 million to furnish the entire hospital, which included four surgery suites, a full-service emergency department, medical/surgical unit, ICU, lab, imaging, endoscopy and more. Realizing they would exceed this budget if they purchased all new equipment, Avita Health System worked with a company that specializes in selling refurbished equipment. Sitting down with supply chain and department leaders to discuss equipment needs, determinations were made on which equipment could be purchased refurbished and which equipment would need to be purchased new.

OUTCOME

Approximately 60% of the equipment purchased to furnish the new hospital was refurbished, saving Avita Health System close to $2 million. The success of this initiative was due in large part to the combined efforts and collaboration of the supply chain department, other department leaders and administration. In addition to now being able to provide the residents of Richland County with additional healthcare options, the opening of the new hospital created approximately 300 new jobs for the county.

ABOUT AVITA HEALTH SYSTEM

Avita is a healthcare system comprised of three hospitals (Ontario Hospital, Galion Hospital and Bucyrus Hospital). More than 1,600 employees serve Avita and provide quality healthcare to Richland, Crawford and surrounding Ohio counties. In recent years, Avita has made tremendous strides in patient satisfaction, ranking in the top 10% nationally in customer service.

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HEALTHCARE-CENTRIC CONTRACT MANAGEMENT COMES OF AGE AT BOSTON CHILDREN’S HOSPITAL

ISSUE
Despite holding the top spot on U.S. News & World Report’s Best Children’s Hospitals for 2017-2018 and earning a spot in the ECRI Institute’s 2017 Healthcare Supply Chain Achievement Awards, Boston Children’s Hospital’s supply chain department recognized that it must find more innovative ways to better manage its multitude of complex, high-dollar contracts.

SOLUTION
After diligently researching off-the-shelf contracting solutions, a multi-disciplinary project team was formed to co-develop a leading-edge healthcare-centric contract workflow solution that would significantly improve cross-departmental usability as well as streamline the overall contract management process. The supply chain department concurrently set out to eliminate off-contract spend to help control the cost of supplies, including improved utilization of its Intalere GPO contracts. This module manages users and approval workflows, communicates pending expirations, accounts for distributor markups, and highlights rebate opportunities amongst other features. It is also fully integrated with all inbound and outbound EDI transactions for improved spend visibility.

OUTCOME
Boston Children’s reduced its off-contract spend by 39% in 2017, which exceeded aggressive expectations. They also realized a 30% process time savings per request. Staff efficiency gains and improved usability have reversed the trend of self-contracting and self-managing of contracts. Making doing the right thing the easy thing has led to dramatically improved compliance, data accuracy, synchronization and measurement. Planned future capabilities will also support Boston Children’s plan to implement just-in-time inventory systems to further increase efficiency and decrease waste by ordering products only when needed.

ABOUT BOSTON CHILDREN’S HOSPITAL
Holding the top spot on U.S. News & World Report’s Best Children’s Hospitals for 2017-2018, Boston Children’s Hospital is a 404-bed comprehensive center for pediatric healthcare. As one of the largest pediatric medical centers in the U.S., Boston Children’s offers a complete range of healthcare services for children.

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CENTRAL PHARMACY IMPLEMENTATION LOWERS COSTS AND IMPROVES QUALITY

ISSUE
An Intalere Consulting Services Assessment of Crystal Run Health’s entire supply chain processes identified areas of best practices as well as areas that needed improvement, one of which was the method in which pharmaceuticals were supplied to caregivers. The process was very fragmented, undertaken manually, had a high incidence of waste and a duplication of inventory across all facilities. It also did not provide a method of accessing more valuable pharmaceutical contracts.

SOLUTION
After reviewing the assessment findings, Crystal Run began implementation of a Central Pharmacy. The first step was to identify what was to be achieved through this initiative and then locate adequate space that was close to being centrally located. A ROI strategy, which would be presented to the executive team, was prepared with the assistance of the Intalere Pharmacy Specialist Team, as well as the pharmaceutical supplier. Discussions were held with internal stakeholders to gain their insights on what was needed in order to simplify their processes in obtaining pharmaceuticals.

OUTCOME
After only three months following implementation of the Central Pharmacy, Crystal Run noticed an immediate 10% reduction in inventory being held on hand, with a 15% reduction in inventory levels expected throughout the organization. This has resulted in a monthly savings of approximately $62,000. The cost to fully implement the Central Pharmacy was approximately $48,000 and the annual cost increase will be approximately $50,000. However, total annual savings in acquisition and inventory cost reductions, as well as decreased waste, is estimated to be $1.8M, therefore, a savings of $1.3M annually is expected through the implementation of this program. In addition, caregivers have embraced the new program and no major issues have been reported.

ABOUT CRYSTAL RUN HEALTH
Crystal Run is committed to improving the quality and health of the communities it serves. Crystal Run’s multi-specialty medical practice has evolved to more than 450 providers and more than 50 medical specialties. With more than 25 locations, Crystal Run provides the best healthcare to New York’s Hudson Valley, lower Catskill region and Manhattan.
VENDOR MANAGED INVENTORY IMPLEMENTATION

ISSUE
Vendor managed inventory, or VMI, is a tried-and-true principle in non-medical industries, however, it unfortunately has been absent from healthcare. As almost every healthcare facility experiences, Intermountain Healthcare has suppliers who carry stock of implantable medical devices in the trunks of their vehicles and provide these items to the facilities as needed. Intermountain wanted to find a solution to this potentially unsafe, unsanitary and costly process involving pacemakers and associated items.

SOLUTION
Intermountain worked with their supplier to identify cardiovascular implant items that the supply chain could stock on behalf of the supplier at no additional cost, which would alleviate storage condition concerns, sterility and continuity of supply, and also reduce OR/surgery time. Space was located in the Intermountain self-distribution Fulfillment Center to store the items. Since these pacemakers and associated items come in many sizes, the surgeon can now order what they need the day prior to surgery and the items are shipped in controlled conditions and available by the time of their scheduled surgery. The supplier puts the VMI items on the bill sheet, which is then sent to the materials manager.

OUTCOME
This process improvement initiative was piloted in the Cardiovascular Lab at Intermountain Medical Center. Products are now maintained in a controlled environment, product replenishment turnaround is faster, product integrity is maintained, savings to Intermountain are validated and responsibility for the products remain with the supplier, not Intermountain. The supplier benefits through a reduction in inventory costs and waste due to product expiration. It is a win-win situation for all parties involved: Intermountain provides suppliers the space they need to manage their inventory, the caregiver receives a high integrity item, and patients are assured a top quality product. The total value to date for the 7 CV items is $66,444 in sales tracings and $218,032 in rebates for a total of $284,476.

ABOUT INTERMOUNTAIN HEALTHCARE
Intermountain Healthcare is a not-for-profit health system based in Salt Lake City, Utah, with 22 hospitals, a broad range of clinics and services, approximately 1,400 employed primary care and secondary care physicians at more than 170 clinics in the Intermountain Medical Group, and health insurance plans from SelectHealth.

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INTALERE’S ALLIANCE CONTRACTS SIGNIFICANTLY LOWER COSTS WITHOUT REDUCING CLINICAL STANDARDS

ISSUE
Liberty Regional Medical Center (LRMC) wanted to find a way of lowering the costs associated with medical/surgical products. Too much was going out in the categories of medical/surgical product purchases, pharmacy spend and purchased services, with very little in the way of tools to determine why this was happening and how to fix the issue.

SOLUTION
LRMC leadership met with representatives from Intalere affiliate Health Resource Services (HRS) to discuss potential solutions, many of which they were not aware existed in the group purchasing organization (GPO) realm. It was determined that Intalere could provide significant savings in the areas that needed the most attention. LRMC was impressed with the extent of the Intalere portfolio – from purchased services benchmarking and foodservice distribution, to relationships with all major medical distributors and pharmacy suppliers, to contracts in almost every ancillary vendor category. The meeting ended with an Intalere commitment to provide an in-depth analysis of LRMC spend in the category of medical distribution.

OUTCOME
An Intalere Savings Roadmap was completed in less than six weeks and uncovered an immediate $30,000 savings on exact match items, with $8,000 more available on select product conversions. By utilizing an Intalere National Health Alliance (INHA) agreement with LRMC’s current distributor, LRMC could reduce cost plus markup from the 7% they were paying through another GPO’s agreement to 3.05% through the INHA agreement.

ABOUT LIBERTY REGIONAL MEDICAL CENTER
Liberty Regional Medical Center (LRMC) is a 25-bed critical access hospital in rural Georgia. LRMC also owns and manages Coastal Manor, a 108-bed assisted living center.
MASONIC VILLAGE FACILITY MAINTENANCE SUPPLY EFFICIENCY SUCCESS

ISSUE
The Masonic Village facility maintenance department was utilizing 95 separate suppliers and maintaining inventory in six different locations across the campus for day-to-day inventory supplies. A majority of the supply purchases were off-site trips to local suppliers that resulted in multiple trips each day by any one of 49 maintenance technicians, generating 450-600 monthly invoices, resulting in additional administrative processing, lost employee productivity and excessive vehicle use.

SOLUTION
Masonic Village Facility Maintenance and Grainger Consulting Services (GCS) partnered to implement a vendor managed inventory (VMI) system. GCS analyzed the procurement process for facility materials, on-hand inventory and suppliers used by the facility maintenance team and made the following recommendations: consolidation of suppliers, consolidation of supply areas from six campus locations to two, utilization of a Grainger KeepStock® layout for inventory to optimize space and reduce obsolete materials, and implementation of the Grainger KeepStock® inventory management solution for frequently purchased facility maintenance supplies.

OUTCOME
The number of suppliers used was reduced by 46% with an estimated annual supplier management cost reduction impact of $35,200. The number of monthly invoices needing administrative processing was reduced by 30% with an estimated annual cost avoidance of $88,000. The Intalere contract portfolio pricing structure was re-evaluated, resulting in a Grainger rebate of $12,700. The reduction of off-site trips to local suppliers decreased from 80 per month to 20, which equated to an annual cost avoidance of $65,000. Staff work order completion increased by 3.5% and work order response time increased by 7% from the previous year. The total estimated value realized from the initial project is $200,000.

ABOUT MASONIC VILLAGE, ELIZABETHTOWN
Masonic Village at Elizabethtown, Pa., was founded as the Masonic Homes of the Grand Lodge of Pennsylvania in 1910, offering services to aging Freemasons and their spouses. The 1,400-acre campus has grown into a continuing care retirement community, including a healthcare center and residences for more than 1,880 individuals.
NATURAL GAS PROCUREMENT STRATEGY

ISSUE
Parkview Health System, comprised of acute care hospitals and other medical office buildings located throughout multiple counties in northeastern Indiana, did not have a unified strategy for the procurement of natural gas. The cost of poor quality management of natural gas procurement resulted, on average, in a $1 per dekatherm premium for natural gas consumption with little attention to the effectiveness of monitoring and purchasing.

SOLUTION
Parkview Health enlisted a third party commodity marketing vendor to share in the cost of providing wireless meter reading technology at each location. Along with improving real-time natural gas utilization, Parkview negotiated for fixed natural gas pricing for the purchase of 90% of the estimated consumption of natural gas for the 12 large natural gas consuming locations. Along with this proposal, the contracting and facility teams implemented the strategy of purchasing and storing 27% of the estimated winter natural gas consumption for the 12 locations for the summer months, during which time the price of natural gas is typically lower. In order to reduce the rate of selling back overestimated gas at a loss, Parkview negotiated for the pooling of unused gas to be used at higher consuming locations.

OUTCOME
With the initial placement of wireless reading devices at Parkview Health’s largest natural gas consuming locations, Parkview has been able to accurately report the usage of natural gas, resulting in a 17% decrease in the selling back of overestimated natural gas usage. These initial estimates annualize to a $150,000 reduction in natural gas spend for the 12 locations. This fixed price and stored gas strategy was negotiated to be fixed for the next five years. This will result in a projected five-year natural gas utility savings of $750,000.

ABOUT PARKVIEW HEALTH
Parkview Health is northeast Indiana’s largest healthcare provider, consisting of eight hospitals and a physicians group with more than 500 providers. With more than 10,000 employees serving a population of 820,000, the not-for-profit health system’s mission is to improve the health and well-being of the communities it serves.

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OPTIMIZING POU TECHNOLOGY – OVERCOMING SCANNING COMPLIANCE ISSUES

ISSUE
Implementing a Point of Use (POU) inventory management system in the Parkview Health medical surgical areas resulted in scanning compliance of approximately 70%. According to POU vendors, 70% is considered a benchmark, however, with $25 million of chargeable supplies passing through the POU system on an annual basis, settling for the industry standard of 70% compliance would mean leaving $7.5 million in potential charges on the table.

SOLUTION
With support of senior leadership, Parkview Health developed a project team whose goal was to enhance the POU system to ultimately reach 90% compliance. The team collaborated with subject matter experts from supply chain, information services, revenue integrity and finance. The team identified multiple changes that could be implemented including building a custom database table, creating daily scanning reports detailing missed scans and charges, and building a dashboard so senior leadership could monitor performance on a monthly basis.

OUTCOME
Parkview Health reached its compliance goal of 90% and exceeded $22 million in overall patient charges; $5.5 million of which would not have been possible without the efforts of this project. Process improvements included the development of a custom field in the software’s movement table to track recovered charges, as well as the creation of two daily automated reports to provide to nurse leaders (one to capture supplies that left the room without being scanned and the second to capture chargeable supplies that were scanned as general supplies instead of being attributed to a patient). In addition, a dashboard was built that would indicate compliance and charge capture by hospital for senior leaders to monitor and report on during their monthly organizational huddle meetings.

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TRANSITIONAL CARE/SWING BED – A REVENUE OPPORTUNITY FOR RURAL HOSPITALS

ISSUE
For years the Punxsutawney Area Hospital, like most small hospitals, struggled with a swing bed/transitional care program. The hospital was referring out countless patients to skilled nursing facilities when in fact it had a transitional care program onsite.

SOLUTION
Punxsutawney Area Hospital engaged a consultant to assist with creating one of the best transitional care programs in the state of Pennsylvania by retooling its existing program, which would also drive new revenue to the bottom line. A new model of care was needed with a focus on rehabilitative care, as well as a redefined role of nursing and patient engagement, and the need for new dedicated staff who had experience with caring for patients in a longer term environment. To make the referral process easier, a more collaborative approach working with physicians was needed. In addition, the hospital needed to create a separate 10-bed unit in an existing unutilized space, adapt systems utilized in the discharge planning process and determine a billing process to ensure the hospital is accurately paid for these services.

OUTCOME
Punxsutawney Area Hospital successfully re-established the transitional care program, resulting in the treatment of more patients and additional revenue to the facility. Data from 2015 through 2017, shows a 30% increase in the number of patients, a 42% increase in the dollars per day realized and a 110% increase in the length of stay (through the transition program). Patients were successfully transitioned from the program to their homes, therefore, significantly reducing the readmission rates and eliminating any resulting penalties. The additional revenue received in 2017 was used to fund improvements to the hospital’s clinical spaces, with staff-driven enhancements made to patient rooms.

ABOUT PUNXSUTAWNEY AREA HOSPITAL
Punxsutawney Area Hospital is a 49-bed rural hospital located in northwestern Pennsylvania.

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FOOD WASTE REDUCTION PROGRAM

ISSUE
The food and nutrition services department of Reid Health was overproducing meals, which was not only contributing to food waste, but also impacting their bottom line and cost per meal.

SOLUTION
With the assistance of tracking software, the department identified that the most critical contribution to food waste was overproduction. Weekly meetings were held with a team of employees who played key roles in either food production or food handling to analyze what was being overproduced and develop strategies for waste reduction. Production amounts were fine-tuned to match sales reports and waste reports, and employees were held accountable for cooking more food than what was forecasted. Some items were identified as foods that could be cooked in batches, which would reduce waste while also improving the quality of these menu items. In addition, low-sale items in the café were identified and removed from the menu.

OUTCOME
Over the course of the year, Reid Health’s weekly food waste was reduced from an average of $1,400 per week to $700 per week. The facility has a goal to reach not more than $500 per week. Food supply costs remained under budget the entire year. Less money was spent on food in 2017 than in 2016 with no significant changes in meal volumes produced. Results from the Association for Health Care Foodservice national benchmarking program indicate that when comparing 2016 to 2017 month-to-month numbers, Reid Health realized a 4% food cost savings per plate. The amount of pre-consumer food distributed to the local soup kitchen was reduced with pick ups reduced from three times per week to only one time per week.

ABOUT REID HEALTH
Reid Health is a 207-bed teaching hospital located in east central Indiana. Reid’s service area includes five counties in Indiana and two counties in Ohio. Reid has a Level 3 trauma center and has recently received designation as a Baby Friendly Hospital. Reid has also received multiple awards as being one of the “Most Wired Hospitals” in the United States.

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COLLABORATING TO EXPAND TREATMENT SOLUTIONS, IMPROVE CLINICAL OUTCOMES AND SIGNIFICANTLY REDUCE INVESTMENT COSTS

ISSUE
Clinic directors, physicians and medical staff of The Oregon Clinic were faced with an escalating demand for patient endoscopy treatment for four major specialty ambulatory surgery centers (ASCs) with plans for adding a fifth ASC in 2018. The endoscopes at each site varied in type, cost, quality, age, diagnostic capability, usage levels and reliability.

SOLUTION
The clinics determined that a full scope replacement technology refresh would be a viable strategic and financial option. After collaborating with physicians and medical staff to determine the technical and procedural requirements needed for the endoscopes, the supply chain department requested competitive bids from two companies that, combined, provide the largest market share of endoscope diagnostics and treatment in the world. The product selected needed to have defined diagnostic/treatment advantages, address safety concerns, provide for ease of use and training, be serviceable, and have a sustainable five-year or more life based on vendor performance history and defined technology roadmap. To ensure all options were researched, a lease versus buy analysis (ROI, NPV) was completed for each vendor to include maintenance cost for each product.

OUTCOME
One company, which was also an Intalere contracted supplier, excelled in features, cost and ability to meet clinic qualification hurdles over time. It was determined the best course of action was to lease the equipment; leasing versus buying 36 scopes for 60 months, along with eight no-cost loaners, saved an additional $214,000. The total project savings were $286,000, which included additional maintenance volume discounts, saving $45,000 over five years of the lease term. The competitive bid process allowed The Oregon Clinic to obtain additional discounts for two new treatment rooms netting $27,000 in CAPEX savings.

ABOUT THE OREGON CLINIC
The Oregon Clinic is the largest physician-owned multi-specialty clinic in Oregon with approximately 200 physicians in 25 clinics and 54 satellite offices. Physicians hold leadership positions and directorships in collaboration with several of the major healthcare systems throughout the Portland metro area, while retaining private practice autonomy.

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ISSUE
The University of Vermont Medical Center experienced challenges with high equipment repair/replacement costs, dealing with multiple manufacturers with varying service/repair programs and fragmented repair spend.

SOLUTION
Realizing that third-party repair services for scopes and power equipment are improving and can provide valuable benefits beyond just cost savings to healthcare organizations, The University of Vermont Medical Center developed a Request for Proposal (RFP) for third-party repair of rigid and flexible scopes and power equipment. The goal was to improve service at a lower cost, elevate training, reduce repair needs (volume), provide consolidated visibility to repair process and status, and consolidate associated repair spend for visibility. After a thorough review and assessment, a third-party provider was selected for the repair of scopes and power equipment.

OUTCOME
The University of Vermont Medical Center realized an immediate $300,000 annual reduction in spend through lower repair/replacement costs. Because the provider has repair capabilities across the different manufacturers of surgical devices, the University of Vermont Health Network (UVMHN) has the benefit of dealing with one vendor and standardizing repair processes. The savings include the potential to receive a rebate at the end of the year based on a risk share partnership with the provider that will be attained through efforts to drive down the frequency and severity of repairs through customized education and department evaluations. The network will continue to see additional cost savings as this initiative is implemented in each of the affiliate hospitals.

ABOUT THE UNIVERSITY OF VERMONT MEDICAL CENTER
The University of Vermont (UVM) Medical Center, along with the Larner College of Medicine at UVM and UVM College of Nursing and Health Sciences, is one of 138 academic medical centers in the country. Through The University of Vermont Health Network and collaborative relationships throughout Vermont and northern New York, UVM Medical Center is able to provide the highest quality care, informed by academic research, to patients throughout our region.

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STOCKING ALGORITHM

ISSUE
At Virginia Mason Memorial, ordering and managing supplies can become challenging for clinicians since caring for patients is their primary responsibility, not supply management. To combat this challenge, clinicians request supplies to be stocked and managed by supply chain, however, due to limited staff resources and physical space for inventory, this is not always a viable option. A decision-making tool was needed to determine what inventory should be stocked in the storeroom and what should remain non-stock.

SOLUTION
An algorithm was created that considers the following key data points: unit of measure (UOM) price, annual usage, UOM conversion factor, UOM dimensions, number of departments ordering and clinical categorization (vital, essential or desirable). Using these key data points, the algorithm will calculate the Economic Order Quantity (EOQ), cubic feet required to stock the EOQ, total inventory cost and number of inventory turns per year. A decision matrix is then used to suggest whether or not to stock the item. Further operational calculations can be made to determine the required labor minutes to move the inventory, which also factors in the capacity of the supply chain staff and if they can add additional supply locations in departments.

OUTCOME
Data driven, justifiable decisions are made more rapidly with less confusion. Storeroom inventory valuation has remained at approximately $350,000 with no increase over the past year despite the fact that more items are being used throughout the hospital. This has ensured working capital is not tied up in inventory and can be used on other projects. Items specific to certain departments are flowing directly from the dock to the department just in time, without incurring wasteful touches. This waste reduction of inventory transportation is fundamental to the Virginia Mason Production System (VMPS). The algorithm was used to analyze office supplies which were stocked in the storeroom, resulting in the elimination of 20 SKUs, freeing up an estimated $5,000 of working capital.

ABOUT VIRGINIA MASON MEMORIAL
Virginia Mason Memorial, part of the Virginia Mason Health System, comprises a 226-bed acute care, non-profit community hospital system that has served Central Washington’s Yakima Valley for more than 60 years, which includes primary care practices, specialty care services and The Memorial Foundation, a separate 501c(3) organization that raises funds for innovative healthcare programs in the Yakima Valley.

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ANALYTIC SOFTWARE IMPLEMENTATION DRIVES JOINT CONTRACTING AND GPO MAXIMIZATION ACROSS MULTI-HOSPITAL/EMR NETWORK

ISSUE
Washington Rural Health Collaborative (WRHC) members and staff were challenged with efficiently maximizing joint contracting to focus on high-spend contracts that encouraged vendor alignment and maximized a GPO partnership.

SOLUTION
WRHC invested in and implemented spend analytic software to automate individual facility accounts payable spend. This solution allowed the collaborative to identify areas of alignment among all member facilities, focus on alignment of purchased services and lower operational costs among membership. Using data to drive joint contracting efforts provided the deepest savings and helped to ensure members achieve aggregate buying power. A secondary strategy was to achieve GPO alignment among WRHC facilities to support maximization of GPO use, lower costs and improve purchasing efficiencies. Partnering with Intalere and their regional affiliate Health Resource Services (HRS) was key to showing the value of GPO alignment and ensuring member facilities were recognized as a group when accessing applicable GPO contracts.

OUTCOME
More than $180 million in purchased services spend was identified and categorized into actionable scopes of service. In addition, 600 vendor consolidation opportunities were highlighted. To drive the success of this work, WRHC is strategically partnering with Intalere and HRS to assist in achieving vendor alignment and cost reduction initiatives based on the data and needs of WRHC member facilities.

ABOUT WASHINGTON RURAL HEALTH COLLABORATIVE
The Washington Rural Health Collaborative is a network of 15 critical access hospitals, all serving rural areas of Washington State. The collaborative, established in 2003, focuses on teamwork, and forming alliances and relationships, with a demonstrated history of delivering value to its members and the rural communities they serve.

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QUALITY/PATIENT CARE DELIVERY AND/OR PATIENT SATISFACTION
Recognizing members who executed quality and patient safety strategies and processes to deliver exceptional patient satisfaction.

Coastal Connect Health Information Exchange
CABG Patient Care Intervention for Improved Patient Outcomes

Copper Ridge Surgery Center
Patient Experience Initiative

New York City Health + Hospitals/Sea View
Commitment to a Safe Culture “Antibiotic Stewardship”

Pine Crest Nursing Home
Pine Crest Nursing Home Expansion

Virginia Mason Memorial
Virginia Mason Memorial Room Service Upgrade
CABG PATIENT CARE INTERVENTION FOR IMPROVED PATIENT OUTCOMES

ISSUE
In August 2017, three heart surgeons reached out to Coastal Connect Health Information Exchange (CCHIE) and requested real-time, electronic notifications of emergency department encounters occurring within 30 days following their Coronary Artery Bypass Grafting (CABG) patient procedures to support timely care intervention in an effort to reduce preventable hospital readmissions.

SOLUTION
CCHIE's electronic alerting tool, NOTIFY, allows subscribers to receive a text message or email notification on encounter types: emergency room admission, emergency room discharge, inpatient admission, inpatient discharge, re-admission and death. The NOTIFY tool is powered by ADT (Admission, Discharge and Transfer) feeds CCHIE has established with stakeholder hospitals and alerts care team members on patient encounters to drive timely clinician engagement for care transition. CABG patient names are loaded into the NOTIFY system; at 31 days, patients are removed from the list. When a patient on the list admits to the hospital emergency department the NOTIFY tool sends an electronic, real-time alert to two surgical navigators that initiate intervention by the heart surgeons while the CABG patient is in the emergency room.

OUTCOME
Since implementation, 53 notifications of CABG patient admissions to the emergency room have been sent to surgical care navigators resulting in readmission avoidance. The real-time notifications CCHIE delivered in the first two months resulted in timely patient intervention, preventing readmission for two patients, resulting in a savings of more than $26,000 using the average cost for a CABG readmission. Additional benefits include improved outcomes and experiences for the patient, improved workflow and more impactful use of resources for the care team.

ABOUT COASTAL CONNECT HEALTH INFORMATION EXCHANGE
Coastal Connect Health Information Exchange was established in 2009 by provider stakeholders to securely connect unaffiliated healthcare providers in southeastern North Carolina for electronic, real-time, at-the-point-of-care sharing of patient care information to support patient-centric care transition between providers, reduce redundant testing and realize efficiency in workflow.

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PATIENT EXPERIENCE INITIATIVE

ISSUE
In 2016, when CMS announced new ways to measure patient experience, Copper Ridge Surgery Center’s goal was to prepare for the new requirements by taking a close look at each aspect of the patient experience and assess the facility’s readiness to meet those requirements by utilizing people, processes and tools.

SOLUTION
Copper Ridge Surgery Center leadership enlisted staff to help them gain an understanding and awareness of the patient experience. Fictional personas were created: patients with specific conditions, limitations and expectations. Phases of the patient experience were defined and then the clerical and clinical interactions encountered before, during and after their procedure were described. A system map was created that depicts interactions from the patient’s view: the message shared, by which staff member, in what medium and at what moment in time. Having visualized the experience in a system map, Copper Ridge created the Infinity Loop, a graphical representation of all aspects of the patient experience. Finally, new language and tools were designed and tested with staff and patients.

OUTCOME
The new patient experience (PX) initiative was launched at an all-staff celebration, creating a starting point to improved internal conversations around PX, leading to increased staff engagement and understanding of their roles. New groups were formed, designed to address PX and unlock change from within the organization culture: PX Leadership, PX Champions (for ongoing initiatives), Process Improvement, Training & Orientation. A greater patient experience will ensure continued Medicare reimbursements, which is the primary measure of success. For staff, this will translate into profit sharing and compensation.

ABOUT COPPER RIDGE SURGERY CENTER
Copper Ridge Surgery Center (formerly known as Northwest Michigan Surgery Center) is a 14-year-old free-standing ambulatory surgery center (ASC). The surgery center is a joint venture owned by an ASC physicians group and local hospital Munson Medical Center. Copper Ridge Surgery Center employs 108 FTEs and is one of the busiest ASCs in the U.S., doing more than 21,000 procedures per year.
COMMITMENT TO A SAFE CULTURE “ANTIBIOTIC STEWARDSHIP”

ISSUE

Misuse and overuse of antibiotics is a pressing public health issue in our country. Many adverse events have been attributed to antibiotic use compromising quality of life and safety of patients. Via a quality assurance process, New York City Health + Hospitals/Sea View recognized a large percentage of its residents triggered for antibiotic use.

SOLUTION

Sea View implemented an interdisciplinary quality improvement initiative targeted at adopting the best practices aligned in Antibiotic Stewardship principles. Leadership support of this project lead to the program's success. Current policies and procedures related to antibiotic use were amended to align with Centers for Disease Control and Prevention (CDC) practices and a facility algorithm for assessing residents prior to starting any antibiotics was developed. The following practices were implemented:

- All practitioners were given a list of antibiotic agents listed on Sea View’s formulary.
- An Antibiotic Stewardship binder with all identified components is available on all units.
- An all-inclusive antibiotic educational syllabus was added to the facility practice.
- The expertise of Infectious Disease practitioners is utilized.
- Antibiotic prescribing practices, as well as adverse events, are tracked and monitored.
- A report card is generated to each practitioner who has prescribed an antibiotic.
- A weekly time slot is dedicated to discuss appropriate versus inappropriate antibiotic starts.
- Assessment tools were added to be proactive in preventing infections.
- A simulation lab was developed to both teach and evaluate competency of perineal care practice.
- A hydration program was established – a necessary component in reducing urinary tract infections.

OUTCOME

Measurement of success was tracked via data collection over a 12-month period showing improvement in appropriate antibiotic treatment practices by 35%. Sea View is proud to have served residents well by providing a safer environment for residents to call home.

ABOUT NEW YORK CITY HEALTH + HOSPITALS/SEA VIEW

New York City Health + Hospitals/Sea View is a 304-bed post-acute care facility located in Staten Island, N.Y., on a palatial 60-acre campus. Specialty services include state-certified dementia and brain injury units. Sea View is the proud recipient of the CMS five-star rating.
PINE CREST NURSING HOME EXPANSION

ISSUE
Pine Crest Nursing Home was experiencing a loss of referrals due to the lack of private recovery rooms for patients needing rehabilitation services.

SOLUTION
Based on community input, a new wing was built onto Pine Crest Nursing Home, with one section of the wing being a 20-bed rehabilitation unit and the other section a 20-bed special care unit. The new rehabilitation section offers its residents a separate kitchen facility, dining room, social area, and private rooms with a bathroom and shower. The feedback from the rehabilitation patients has been very positive and they like the fact that their rooms are very close to the therapy department. The special care unit, which houses residents with memory loss and those that need a smaller environment in which to live, also offers private rooms with bathrooms. The new environment offers a separate kitchen with its own staff, a spacious dining area with a fireplace, a spa area and an enclosed courtyard, all of which offer much more space for residents to socialize and move around.

OUTCOME
Prior to the addition, Pine Crest averaged 3-7 rehab residents. The facility is now at capacity (20) with more residents on a waiting list. In addition, the new special care unit has reached its capacity of 20 residents.

ABOUT PINE CREST NURSING HOME
Pine Crest is a county owned, 180-bed community-supported center focusing on individualized, short-term care, long-term care and rehabilitation for adults. Pine Crest is dedicated to enriching life experiences through building trusting relationships with residents, families and the community in a family-orientated setting.

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VIRGINIA MASON MEMORIAL ROOM SERVICE UPGRADE

ISSUE
Virginia Mason Memorial has had the same assembly line process for serving meals to patients since its inception. In reviewing patient satisfaction reports, it was often mentioned that patients wanted more options from which to choose on the foodservice menu.

SOLUTION
Realizing that food is not just something to eat, but is medicine that can help in the patient’s recovery, and with requests from patients for more options, Virginia Mason Memorial began the process of changing how food was served to patients, doing away with the assembly line process and implementing a new room service method. The dietary management team came together and tackled the big hurdles of the project. Each member had a specific assignment and worked on the areas that needed to change in order to make this process work. The dietary management team visited other hospitals to see the inner workings and how it could be duplicated at Virginia Mason. After completing the research, a budget and proposal were presented to senior leadership who approved the plan for implementation.

OUTCOME
The project was a success with improved patient satisfaction scores. The food is now batched or cooked to order versus having it held for long periods of time. Overall, the food is better quality, the patients have more choices, and the kitchen runs better and more efficiently. Because patients have more options from which to choose and are eating what they want, food waste has been reduced as well.

ABOUT VIRGINIA MASON MEMORIAL
Virginia Mason Memorial, part of the Virginia Mason Health System, comprises a 226-bed acute care, non-profit community hospital system that has served Central Washington’s Yakima Valley for more than 60 years, which includes primary care practices, specialty care services and The Memorial Foundation, a separate 501c(3) organization that raises funds for innovative healthcare programs in the Yakima Valley.

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SUPPLY CHAIN/DATA MANAGEMENT OR SUPPLY COST EFFICIENCIES
Acknowledging members who drove value and efficiency for their organizations through expansive thinking and original techniques in supply chain and data management.

Endless Mountains Health Systems
*Tracking and Management Program to Reduce the Number of Expired Products*

Intermountain Healthcare
*Isotopes Standardization and Savings*

Mankato Surgery Center
*Managing the Supply Chain and Inventory Efficiencies*

Parkview Health
*Facilities Ordering Process Becomes Tech Savvy*

Parkview Health
*Closing the Gap – Supply Tracking Solution*

Proliance Surgeons
*Supply Chain Tool – Intalere DI Quote Review*

Summit Pacific Medical Center
*Supply Chain Transformation*

The University of Vermont Medical Center
*Cybersecurity, Who’s Protecting Your Patients’ Digital Information? Technical Standards Review and the Role Supply Chain Can Play in Enforcement and Compliance*

The University of Vermont Medical Center
*Vendor Risk Mitigation through Finance and Supply Chain Collaboration*

Yavapai Regional Medical Center
*Benchmarking Tool*
TRACKING AND MANAGEMENT PROGRAM TO REDUCE THE NUMBER OF EXPIRED PRODUCTS

ISSUE
Endless Mountains Health Systems’ (EMHS) data indicated that thousands of dollars of products were expiring each year and affecting the facility’s bottom line. Expired products left on the shelves have the potential to affect patient safety. There was a need to efficiently track, manage and monitor products with expiration dates.

SOLUTION
Materials management (MM) pulled data available on expired medical supplies for the previous 24 months to analyze the extent of the problem and to evaluate methods of improvement. MM met with department representatives to review the data findings on a global and departmental level. Some products expired due to the unit of purchase being larger than the utilization, therefore, a search was conducted for a vendor that would sell the products in smaller quantities. At times, expired products were turned in after the expiration date. To increase staff accountability, MM created a monthly sign-off sheet for each area that included the date and signature, indicating that products with expiration dates were checked during the month. An Expired Products Tip Sheet was developed and posted in clinical supply areas to educate staff on how to reduce products expiring.

OUTCOME
With the new processes in place, in 12 months, EMHS was able to decrease the dollar value of the previous year’s expired products by 32%, decrease the amount of expired products going to landfill, and increase patient safety and staff accountability.

ABOUT ENDLESS MOUNTAINS HEALTH SYSTEMS
Endless Mountains Health Systems is located in Montrose, Pa. This not-for-profit health system strives to provide optimum care within the scope of its abilities. It provides a licensed 25-bed acute care hospital, short procedure unit, emergency department and ancillary services, and also maintains physician offices.

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ISOTOPES STANDARDIZATION AND SAVINGS

ISSUE
For years, Intermountain Healthcare had attempted to consolidate isotopes to save costs, enhance supplier relationships, ensure uniformity in patient protocols and simplify procurement efforts.

SOLUTION
Steering committees were established, involving stakeholders throughout the organization, as well as Intalere partners, that were tasked with examining three scenarios: keeping things “as is,” using a dual source model for suppliers or going sole source. Since radioisotopes are an essential part of medical diagnostic procedures, several departments unified with a “One Intermountain” approach. Collectively, they worked to prepare the appropriate analyses that would evaluate total cost, plus find a strong and willing supplier who would come to the table with an open mind and effective solutions. After issuing a Request For Proposal (RFP) to several providers and evaluating the responses, a sole-source agreement with Cardinal was negotiated.

OUTCOME
The multilateral effort achieved the desired success and produced savings, so far, of more than $2 million. This number is derived through a validation process submitted through Supply Chain Optimization (SCO) analysts. Cost savings were achieved through negotiated pricing, but also cost avoidance through a reduction in the number of orders, invoices and suppliers. The benefits include simplified protocols, reduced variability to treat patients, improved trust and confidence in the SCO, and better buy-in for standardization.

ABOUT INTERMOUNTAIN HEALTHCARE
Intermountain Healthcare is a not-for-profit health system based in Salt Lake City, Utah, with 22 hospitals, a broad range of clinics and services, approximately 1,400 employed primary care and secondary care physicians at more than 170 clinics in the Intermountain Medical Group, and health insurance plans from SelectHealth.

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MANAGING THE SUPPLY CHAIN AND INVENTORY EFFICIENCIES

ISSUE
Mankato Surgery Center was noticing variables in the year-end physical inventory counting, inconsistencies in product nomenclature, inaccuracies in identifying consignment inventory, and inaccuracies of the physical counts that lead to significant over-valuation of inventory and difficulty in determining profitability.

SOLUTION
A newly created multi-disciplinary Inventory Efficiency Workgroup identified the general assumptions and developed a project scope. The objectives for the project were to eliminate the duplication of labor that occurred during the annual physical inventory of correcting entry counts and to eliminate the erroneous inventory valuation during the annual financial audit. After thorough auditing, benchmarks were created. The multi-disciplinary workgroup team approached and solved the issues from different focal points.

OUTCOME
It was determined that the Item Master List was the pinnacle of the overall issues. Seven percent of products on the Item Master List were identified as inconsistent nomenclature and product misidentification. Staff spent in excess of 60 hours correcting the Item Master List. Further, the annual financial audit showed inventory was overstated by 94.4% and by removing vendor-owed inventory from the Consignment List, the correct inventory value was calculated. It was also found that the Implant Inventory was set at an artificially high quantity to save computer key strokes, so this was eliminated, thereby, eliminating the artificial high-value of inventory.

ABOUT MANKATO SURGERY CENTER
Mankato Surgery Center, accredited by AAAHC, is a multi-specialty, physician-owned ambulatory surgery center located in south-central Minnesota. Mankato Surgery Center focuses on providing the highest quality ambulatory surgical care with state-of-the-art surgical equipment and technology, and highly skilled and trained staff.

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ISSUE
As partnerships expand with surrounding hospitals and physicians, the Parkview Health facilities department was taxed with major gaps and challenges in ordering supplies and materials. Wasted labor, returns and storage space were some of the key areas of concern that compounded with each new acquisition or facility.

SOLUTION
The need for a restructured ordering process was evident. Parkview Health utilized technologies from their vendor and seamlessly interfaced them within their ERP. To mitigate complications, the improved technology process was piloted at one designated hospital. Scanning tools and barcodes replaced manual entry and guesswork. The bar code was placed in a convenient manner, such as on a storage bin (for inventoried items) and in a binder (for non-inventoried items). A facility technician or manager scanned the appropriate bar code each time an item was used or needed to be ordered. At a convenient time, the scanner was connected to a computer through a USB port (or Bluetooth) to download all ordering information. The manager or technician then viewed and edited items to order in real time or tracked items for order at a later date. Once an order was placed, the software sent the request to the appropriate manager for approval. The health system also created a blanket P.O. that the receiving dock used to track the incoming items.

OUTCOME
The revamping of Parkview Health's ordering process ensured the accuracy of product ordering, shipping and receiving. The amount of internal time saved from order placement, the approval process and all orders being received next day has decreased time spent placing and approving orders and has decreased storage space necessity. The departments have seen this as a success, and the facility director is working to add hundreds of additional items to this ordering process.

ABOUT PARKVIEW HEALTH
Parkview Health is northeast Indiana's largest healthcare provider, consisting of eight hospitals and a physicians' group with more than 500 providers. With more than 10,000 employees serving a population of 820,000, the not-for-profit health system's mission is to improve the health and well-being of the communities it serves.
CLOSING THE GAP – SUPPLY TRACKING SOLUTION

ISSUE
Parkview Health was in need of a fully functional package tracking solution to support its complex IDN that would have total visibility of packages throughout the entire network. The solution needed to align well with other systems including their warehouse management, ERP and point-of-use systems.

SOLUTION
Parkview Health researched various options using selection criteria that included demand forecasting capability, IDN point-of-use technology, patient charge capture and virtual inventory accountability, which were already in place. Mobile Delivery Management (MDM) was selected as their solution for package tracking and delivery management. The solution merged nicely with Parkview’s state-of-the-art WMS software solution. Parkview tested the MDM solution with their physician offices and outpatient facilities. Supply chain transportation staff used the solution as they made deliveries throughout the day. The initial goal was to get a signature or ID badge scan for as many packages and deliveries as possible. For those offices and areas that were delivered before normal business hours, location bar codes were developed and personnel were required to scan those at delivery. After working through a reasonable amount of system challenges in outpatient areas, the product was rolled out to Parkview’s acute care facilities.

OUTCOME
With total visibility of product movement, Parkview Health was able to efficiently provide package touchpoint information in a very short amount of time. They have virtually eliminated lost packages and have developed a delivery accuracy confidence in customers. In addition, all time- and temperature-sensitive products are now delivered only to an individual who must provide a signature or ID badge scan, with no exceptions. The thousands of dollars wasted on lost or misplaced product has been, for all intents and purposes, eliminated. By closing this gap, the Parkview Health supply chain team is positioned for long-term success, viability and customer satisfaction.

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SUPPLY CHAIN TOOL – INTALERE DI QUOTE REVIEW

ISSUE
In Q3/Q4 of 2017, the Proliance Surgeons supply chain department was tasked with reviewing multiple diagnostic imaging (DI) equipment quotes and evaluating them to ensure optimum pricing was received and Intalere contracts were being maximized.

SOLUTION
To ensure that the suppliers were providing Intalere contracted pricing and applicable discounts on the DI equipment quotes, Proliance supply chain reached out to their Intalere affiliate Health Resource Services (HRS) representative to discuss how best to verify this pricing. After being introduced to the Intalere DI Q Review, quote reviews were requested by the CFO of Proliance Surgeons corporate office, as well as individual Proliance Surgeons Centers. Within 5-7 days of the DI Q Review requests, the reports were completed that provided Proliance with information that could be used in supplier discussions.

OUTCOME
The Intalere DI Q Review ensured Proliance Surgeons was properly connected to Intalere contracts, resulting in pricing verification, application of Intalere TargetBuy (limited-time exclusive discount offers) pricing when applicable, service agreements discounts, and additional discounts being extended to equipment not on the original TargetBuy.

ABOUT PROLIANCE SURGEONS
Proliance Surgeons is one of the largest surgical practices in the country, with more than 425 providers including more than 250 board-certified physicians providing treatment at more than 100 care centers in Washington State. The Proliance Surgeons range of specialties includes orthopedics, sports medicine, spine, ear nose and throat, general surgery, ophthalmology, obstetrics and gynecology, urology and more.

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SUPPLY CHAIN TRANSFORMATION

ISSUE
The Summit Pacific Medical Center (SPMC) materials management department needed to shift from a manual procurement-focused ticket system to an inventory-based, data-driven, end-to-end supply chain model to provide enhanced support and value to SPMC clinical areas.

SOLUTION
By the end 2017, the SPMC materials management team had succeeded in expanding and improving inventory throughout the hospital and was pushing the boundaries of integrating new areas into the materials management system. Through 5S, Standard Work and Continuous Improvement methods, the materials management team created a highly efficient, data-driven replenishment system that enabled Par Optimization Analysis and slotting logic to proactively size and adjust locations based on consumption in order to deliver a high reliability of inventory at a low cost of effort. Through point-of-use integration, clinical staff was spending less time managing supplies and had more of what was needed to treat patients. By reducing and sizing inventory locations to demand, supply chain staff was able to reduce their workload and convert former areas that were needed for inventory to patient care areas. To add visibility and transparency to the process, they developed a robust set of dashboards that accurately reported their progress toward goals and areas for improvement, and provided important information and feedback to end users on their supply expenses.

OUTCOME
The improved process resulted in an increase in materials management controls and supply maintenance tracking from 2,727 physical inventory tracked locations to more than 4,364 locations. There was also a net 30% reduction in inventory levels and total hospital inventory turn rate of 4.6. Data visibility was added to department purchases, as well as enhanced controls. Clinical staff time spent on materials management was significantly reduced.

ABOUT SUMMIT PACIFIC MEDICAL CENTER
Summit Pacific Medical Center (SPMC) is a critical access hospital with a Level IV Trauma designation. SPMC offers 24-hour emergency services including a full-service laboratory and diagnostic imaging department. The Emergency Department is staffed 24 hours, 7 days a week by an ED physician. SPMC also operates three rural healthcare clinics and an urgent care clinic that is open seven days a week. The hospital is unique due to its size and accessibility. SPMC is proud of its low emergency department wait times and its ability to give patients access to a doctor quickly.

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CYBERSECURITY, WHO’S PROTECTING YOUR PATIENTS’ DIGITAL INFORMATION? TECHNICAL STANDARDS REVIEW AND THE ROLE SUPPLY CHAIN CAN PLAY IN ENFORCEMENT AND COMPLIANCE

ISSUE
Many hospitals rely on their suppliers to protect their patients’ Protected Health Information (PHI), leaving both the hospital and their patients vulnerable to hackers, HIPAA violations and unplanned outages due to incompatible and outdated technologies.

SOLUTION
To take the responsibility for protecting patient data out of the hands of their suppliers, The University of Vermont (UVM) Medical Center developed a multi-disciplinary group whose mission was to evaluate all newly-acquired technologies, technology changes and their potential impact on the organization to ensure that they are supportable, secure and highly reliable. The Technical Standards Review Board (TSRB) reviews more than 250 applications per year, an average of 10% of which are rejected due to cybersecurity issues, reliance on unsupported third-party applications/databases or incompatibility with UVM Medical Center’s technical standards for which no remediation is possible. Another 20% of the applications are rejected and subsequently appealed. The supply chain department will then engage with the supplier to discuss what can be done to address the technical issues. In the vast majority of the instances where an appeal was sought, working with the supplier or revising contractual language has enabled the end user clinicians and their support personnel to be able to safely deploy the best technological solution to fit their needs.

OUTCOME
Since the adoption of this process, approximately 50 software applications and medical devices per year, that would not otherwise be available to the organization due to technical deficiencies, were able to be deployed to the direct benefit of UVM Medical Center patients.

ABOUT THE UNIVERSITY OF VERMONT MEDICAL CENTER
The University of Vermont (UVM) Medical Center, along with the Larner College of Medicine at UVM and UVM College of Nursing and Health Sciences, is one of 138 academic medical centers in the country. Through The University of Vermont Health Network and collaborative relationships throughout Vermont and northern New York, UVM Medical Center is able to provide the highest quality care, informed by academic research, to patients throughout our region.

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ISSUE
The University of Vermont (UVM) Medical Center did not have any formal processes in place to measure and monitor the financial risk of vendors with which they contracted.

SOLUTION
The UVM Medical Center engaged a third-party company to perform a financial risk analysis that was used to restructure contracts to mitigate the risks associated with contracting with preferred vendors. Although preferred, some vendors were financially-at-risk companies, of which UVM Medical Center needed to be aware. Regular and ad hoc meetings were scheduled to review contracts of the facility’s largest vendors, publically-traded and privately-held, as well as with potential vendors with large anticipated contractual dollar commitments.

OUTCOME
Combining the expertise of supply chain contracting personnel and finance personnel to draft stronger contracts that mitigate financial and operational risk to the organization, UVM Medical Center established a new protocol for measuring and monitoring financial risk associated with its vendors of choice. The facility requires vendors to adhere to the standards put in place and to work with its third-party partner, especially if vendors are privately held and the contractual amount is of significant dollar value. If a vendor chooses not to do so, then the facility will not contract with that vendor, unless there are extenuating circumstances.

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BENCHMARKING TOOL

ISSUE
Hospitals are constantly told by suppliers that they are getting the best price possible, however, how do hospitals know what the fair market value is for the products they are purchasing and how do they know if they are receiving the best price possible? Yavapai Regional Medical Center (YRMC) wanted to find a way to use their real-time data to compare what they were paying for products to what other hospitals were paying.

SOLUTION
A long-time member of Intalere, YRMC began using the Intalere OptiPrice Advantage data analytics solution with the goal of reducing their implant budget by $500,000, as well as using the data as leverage to assist on non-contracted items and with local contract negotiations, optimize tier levels for contracts, move to standardization and help in the value analysis process. By using Intalere OptiPrice Advantage, YRMC was able to see what they were paying for products compared to what more than 700 other hospitals were paying for the same products. They were able to use this information to negotiate better pricing and contract terms with their suppliers.

OUTCOME
By using Intalere OptiPrice Advantage, Yavapai was able to review PPIs and found opportunity in several categories, but their initial focus was on Orthopedic Implants, Cardiac & Vascular Stent and Balloon Implants. They reduced the number of suppliers used, changed their billing structure and reduced charges, resulting in a savings of approximately $792,000, exceeding their initial goal.

ABOUT YAVAPAI REGIONAL MEDICAL CENTER
Yavapai Regional Medical Center (YRMC) of Prescott, Ariz., consists of full-service acute care hospitals with 205 beds at two locations, 21 physician care offices, Del E. Webb Outpatient Center that offers outpatient physical rehabilitation, advanced wound care and a family resource center, and YRMC Outpatient Services Center that offers imaging and cardiac diagnostic services.

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