

11 Reisman Supply Chain

The Problem

The Clean Utility Room on Reisman 11 was in disarray with no clear organization as to where the 365 stocked items were on the carts. This made it difficult and very time consuming for staff to locate necessary items needed to provide the best care to patients. In addition, many items were either under or overstocked, creating safety concerns for patients. Under stocked items require a call to distribution, while overstocked items would accumulate, and eventually expire. Staff all agreed, it was important and a priority to have what they needed, when they needed it, so more time could be spent at the patient bedside and less wasted time searching for equipment and supplies.

Aim/Goal

- Organize the Clean Utility Room to:
 - Reduce searching for items
 - Increase pick efficiency by co-locating similar items
- Adjust par levels based on usage to:
 - Reduced cost of overstocked items
 - Reduce likelihood of items expiring

The Team

- Kervin Burrell, Par Stocker, Distribution
- Martha Clinton, PCT, 11 Reisman
- Mary O'Connell, Nurse Manager, 11 Reisman
- Kerri Petraitis, Operations Coordinator
- Marlena Pettit, RN, 11 Reisman
- Bill Pyne, Manager, Material Logistics
- Lean Program Team

The Interventions (7/07 - present)

- Created functional carts with correct par levels
 - Wound Care • Gloves & Masks • Respiratory
 - GU/GI • ADL • IV
 - MD Cart • Housekeeping • Syringes
- Labeled items with common clinical terms
- Put process in place for maintaining par levels
- Used color-coded right-sized bins to insure correct par level

- Mistake-proofed respiratory cabinet and IV Cart
- Gravity fed carts
 - Reduce likelihood that items expire before use
 - Easy reach for nurses, easy fill for par stockers
 - Better visibility of items
 - Impossible to overstock

The Results

Metrics	Baseline (Nov '07)	Target	Results (as of Mar '08)	% Change
<i>Time to find supplies in clean utility room (min) (no training, no publicizing, one instance)</i>	3:17 min	1:38 min	1:22 min	58%↓
<i>Cost of overstocked items</i>	\$10,193 ⁺	\$0	\$77	99%↓
<i>% of stocked items</i>	154%	0%	101%	53%↓

Lessons Learned

- Staff who do the work should be a part of the decision making process, as they are the ones who know the process best.
- Well meaning distribution staff wanted to ensure that the RNs had what they needed, but the result was an overstocked supply room, caused because it was not clear how much was needed.
- Used actual usage data to determine right-sized par levels
- By using visuals and logical set-ups, per diem RNs and consulting MDs could locate needed items immediately

Next Steps/What Should Happen Next:

- Continue to monitor progress and tweak par levels based on data.
- Expand redesign into Medication Room on 11Reisman.
- Create a roll-out plan to extend improvement hospital-wide.

