Community Health Network accelerates internally with PAR Excellence pit crew on call

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WHEN IT COMES TO ADOPTING AND IMPLEMENTING ANY KIND OF INFORMATION TECHNOLOGY SYSTEM – NEW OR UPGRADE – SOME ORGANIZATIONS SIMPLY PREFER TO HANDLE THE TRANSITION INTERNALLY THEMSELVES.

Yet an effective and helpful vendor partner – when absolutely necessary – can make all the difference in the world.

Indianapolis-based Community Health Network found a way to balance the strategic need to activate and operate a useful system they preferred with the tactical desire to control and manage implementation so they could minimize expenses using internal resources.

While Community Health Network’s Supply Chain team favored the technology offered by PAR Excellence Systems they also wanted to keep a tighter rein on implementation costs and reinforce their professional relationships with their clinical customers – namely, nurses, according to Jeffrey Firman, Director of Inventory Management and Community’s PAR Excellence Systems at the integrated delivery network (IDN).

“By deploying our own manpower, the expense of installation was reduced compared to the cost of utilizing [external] installers at consulting prices,” Firman said. “The second reason revolved around in-house or ‘tribal’ knowledge of the products used in each of the supply rooms and throughout the network.”

Firman explained that Community Health Network does not manage warehouse space in its facilities, instead running a “low-unit-of-measure” (LUM) supply system used by the nursing staff. Even though PAR Excellence capably could have installed the PAR Express system the effort largely would have disrupted nursing workflow, he acknowledged.

“Having that knowledge allowed us to arrange product according to how the nursing staff uses it prior to installing the scales and to build in the quantity to sustain each area according to our supply delivery schedules,” Firman noted. “This eliminated the need to rearrange the product again after installation was

“Self-installation of the PAR weight-bins system is not only much less expensive, but it is more beneficial in that your staff and team get to know the system very quickly.”
complete. This also satisfies the nursing staff’s need for locating product in a timely manner which can be critical for patient care.”

Community Health’s Supply Chain team felt that the IDN’s product mix and variety remained unique enough that it “would be extremely difficult for the PAR Excellence staff to know and understand all the different types of products available and in use,” according to Firman.

“Contract installers would have had to ask the nursing staff for assistance with the placement of product prior to prepping the supply room and installing scales,” Firman indicated. “We had enough knowledge to arrange the product without involving the nursing staff in most cases. We also had some product usage information that may not be available to the contract installers. We arranged every supply room the same way that a nurse from one campus could walk into any supply room in any hospital and find the same basic layout.”

STAFFING UP NEEDED, VALUED

Did Community Health Network Supply Chain have to add staff to make this happen? Yes, according to Firman, but they felt the return-on-investment justified the decision. They drew from the product recall and materials management staff to fill the four original positions for installation.

“In the long run those four positions were back-filled with three new people,” Firman recalled. “However, given the amount of work we completed with the advantage of having a working knowledge of our hospitals, the staff-up paid for itself a few times over. Also, we are all still here maintaining the system, which we believe is extremely important for our end users and continued Network cost savings.”

Another reason for the self-installation and implementation emerged a few months into the project that involved system maintenance.

“During installation we acquired knowledge about the intricacies of the system along with the ability to diagnose complicated technical issues,” he said. “It’s not possible to maintain the system properly without this kind of experience and knowledge. Other than cost savings, this is by far the most important thing we took away from the project. We became completely self-sufficient in all aspects of the PAR Excellence system apart from the server it runs on. We found our initial dependency on the PAR Excellence Support staff diminished dramatically, thereby reducing scale downtime and inconveniences that could impact the nursing and materials management staffs.”

Firman credits PAR Excellence for providing the initial training, but once the Community Health Network Supply Chain team members started working on their own they experienced a number of situations that did not occur during the training period. PAR Excellence support staff made themselves available if Community Health Network’s team called.

“We made a point of solving those issues without any outside help, and in most cases, we were successful,” Firman said. “There were a few occasions when we had to involve the PAR Excellence support staff. They were always able to help us through those items that we just couldn’t figure out.”

As Community Health Network’s Supply Chain team progressed through the first hospital installation, “everything fell into place, and at that time, we realized we could finish all the other hospitals with minimal help from PAR Excellence,” Firman shared. He acknowledged that self-installation can be “complicated” but if an organization has the “right staff involved, self-sufficiency is very achievable and, in our opinion, desired.”

Before Community Health Network Supply Chain’s leadership team, which comprises Steve Bell, Vice President, and Beth Kanzler, Executive Director, chose to set up an internal installation project, PAR Excellence had completed installing PAR Scales within the Cancer Centers at Community Health Network’s North and South hospitals.

Kanzler asked Firman and his product recall team colleague Jim Means to lead the internal installation effort. Neither had been involved with the Cancer Center installs, and Firman admitted only having been with Community Health Network for about eight months at the time. Further, Firman was not familiar with PAR Excellence nor the installation project at the Cancer Centers. “We learned the system install process on the fly,” he quipped. “No time for prep.”

Firman previously worked with United Airlines where he served as Manager, Strategic Planning in Technical Operations. Meanwhile, prior to joining Community
Health Network, Means hailed from Stanley Works where he served as Manager, Marketing Literature.

Firman and Means typically began their day dealing with newly issued product recalls and following up with previously issued recalls. Then they would migrate to the South Hospital to work on the PAR Excellence installation project, preparing the supply rooms for the PAR Excellence scales.

"Initially we would spend 80% of our day working on PAR Excellence prep and the remaining 20% with recalls," Firman indicated.

A few months into the project, Kanzler and Bell recognized that Firman and Means needed to concentrate more of their time on the PAR Excellence installation, so they added someone to work on product recalls and assigned a department supervisor to oversee the recall process. This enabled Firman and Means to serve as full-time installers of the PAR Excellence technology.

Firman and Means worked with PAR Excellence support staff for a few weeks, and then Firman recruited the rest of the team based on his assessment of the skills that were needed to move forward. But it soon became apparent to Firman that while he and Means felt they could install the system; they were missing a very important component.

"We needed people with an in-depth knowledge of the healthcare products we were working with. Our two-man team came from outside of healthcare and didn’t have the expertise needed to arrange rooms in a way that would meet the needs of the Nursing staff and Materials Management. Fortunately, I had spent a good amount of time on the North campus with their Materials Manager, where we completed several walk tours of their supply rooms in preparation for PAR Excellence.

Firman recognized how "extremely neat and orderly" several of the rooms looked and asked who was responsible. Stephanie Myers and Walker Zurschmeide, each Materials Management Supply Associate possessing notable computer skills and detailed product knowledge, then joined the team within a few months, thanks to efforts by Kanzler and Bell to fortify the team’s resource needs, according to Firman.

Both had to learn the basics from scratch, just like their two teammates making up this quartet.

"The only knowledge they had was the information we gave them after working with the system for a few weeks," Firman recalled. "Like Jim and me, they came into the job blind."

Community Health’s team also enjoyed a valuable human resource advantage from PAR Excellence before Firman launched the system rollout. His name? Nick Katsetos, who had been with the company for several years.

PAR Excellence assigned Katsetos to Community Health Network in June 2017. Katsetos recognized that prepping the supply rooms for PAR Excellence scales would make the process and project easier in the long run, according to Firman. "We took his process and expanded upon it using our internal product knowledge," he added.

"[Katsetos] fit right in with the personalities of our team and was our teacher for PAR Excellence during the South Hospital installation," Firman said. "He taught us the install techniques and methods we needed. A few months into the project we developed our own techniques and processes that have worked perfectly to this day."

Firman labels Katsetos "an amazing asset" from PAR Excellence. "We consider Nick a team member, and today he is still our best teacher!" he enthused. "Nick will always be our PAR Excellence connection and friend."

"Building a strong team and a good plan is half of the requirement... Communication with clinicians is also key. You’d be surprised at how excited clinicians are to see inventory automation installed."
CHARTING THE COURSE

Firman’s team developed a strategic plan for supply room conversion and implementation.

“Generally, we targeted the supply rooms that we felt would present the biggest obstacles first,” he said. “In nearly every case the first conversion [concentrated on] the ER Supply Rooms, [involving] the largest number of items with the most restrictive space. They were also on the first floor, which meant we worked ground up. That allowed us to tackle those tough issues first and possibly finish with what we would consider some of the easier supply rooms.”

Of course, Firman chuckled at the “easy” term.

“It turned out that some of those ‘easier’ supply rooms posed just as many problems as ER, but these challenges allowed us to gain invaluable knowledge as we moved forward,” he noted. “We also found that most supply rooms were small, [so] fitting all items on scales became a normal challenge.”

As a rule, each supply room had to be prepped before PAR Excellence hardware could be installed, according to Firman.

“If needed, construction crews would go in first and install the wall panels, platforms and electrical work,” he described. “Right after, product experts [Myers and Zurschmeide] would go in to ‘right-size’ product bins and arrange them on the walls and platforms for scales, all according to the needs of the nurses and Materials Management staff.”

Generally, they configured all supply rooms nearly the same way to bring a semblance of standardization to the network, according to Firman.

“After completing a room, they would move on to the next, following the construction crews,” he continued. “[Means] and I would follow right after and install all the hardware, wiring and bring all the computers online, which completed the installation for that room. The teams would follow this process throughout the hospital until all supply rooms were complete. It was incredibly efficient and streamlined but required a lot of preplanning and coordination. We had the right people for the entire process.”

For Firman, however, working with Supply Chain represented the “easiest part” of the entire project. Their expertise complemented the PAR Excellence technology being used.

“The materials managers and supervisors, along with many great Community staff made our jobs so much easier,” he said. “They know their PAR rooms and product. They also know the nurses and nurse managers and helped us coordinate the conversion of their supply rooms to PAR Excellence with minimal intrusion.”

TEAM-BUILDING

Firman’s team also worked with construction companies at each site to prepare all supply rooms with standard layouts. Wall panels to mount the scales, 20-inch-deep platform footers for larger scales and product, along with data drops and power outlets placed in every room. They repurposed wire shelving from other areas or purchased new equipment and installed where needed for scales and supplies.

“Our team developed and implemented custom shelving for nearly all PAR rooms we touched,” Firman noted. “This maximized space and provided a substantial cost savings by using leftover wire shelving. All room layouts and designs were determined with input from all four team members.”

Today, four years later, the core group remains intact.

“Our roles have changed a little since the beginning, but we really have enjoyed working together,” Firman said. “This project created a very tight knit group.”

Firman serves as Director with Myers serving as Manager, courtesy of her computer and organizational skills helping to facilitate the installation process. Firman anticipates Means and Zurschmeide advancing to higher positions in the future. “[Katsetos] will always be our 5th man,” he added with a smile.

Firman saluted Community Health Network’s IT department, too, as they were heavily involved with the installation project.

“They spent time pulling data cables and connecting PAR Excellence to the VLAN it now functions on,” he said. “Jeremiah Jackson and Grant Selmer were key in helping
us coordinate the data connectivity. Ben Ping from IT also played a major role. He installed all the monitors and mini PCs into the supply rooms along with VLAN connectivity. He also aided our work with configuring the PAR Excellence portion of those PCs and was always available when we needed him.

Firman pointed to Gina Walker in IT as Supply Chain’s main contact for “all things PAR Ex” and lauded her as essential to the success of the system.

“Gina maintains the software security, plans and implements software upgrades, and has worked with our team to make sure the database remains sound and accurate,” he noted. “She has always been there for us, and every company using PAR Excellence needs this type of committed teammate to help from the IT side.”

“Everyone in IT has been extremely helpful and cooperative during the install and the continued maintenance of PAR Excellence,” Firman continued. “They embraced the new system, and we really built a great working relationship. IT is an essential piece in making PAR Excellence work.”

Orchestrating the movement of all components of this project centered on Elizabeth Doherty who arranged weekly meetings with all key players. Firman’s team created a working timeline for the project from which Doherty oversaw progress and completions.

In fact, the team remained, by and large, “on track or ahead of schedule and on budget for the duration of the installations,” according to Firman.

Spanning roughly 3½ years (41 months) between April 2017 through September 2020, the PAR Excellence installation project encompassed five hospitals and two cancer centers within Community Health Network. Within those facilities they installed more than 32,000 PAR Excellence scales in 258 supply rooms. Firman admitted that the onset of COVID-19 in March 2020 halted and stalled production at the final facility, Community Hospital Anderson, for some five months, pushing out the actual completion date to February 2021. But they’re not finished yet. They started a sixth hospital installation project in May 2021.

**MAKE AN INFORMED DECISION**

Firman favors self-installation as an option and recommends providers who acquire PAR Excellence technology to consider taking the plunge if they’re on the fence.

Based on the experience at Community Health Network, Firman offers some useful tips for PAR Excellence customers looking to pave their own way.

“Finding the right people with the right talents is crucial, along with the support of your leadership team,” he advised. “There needs to be a diverse mix of people with product knowledge, computer skills, planning and organizational abilities, analytical skills and some mechanical skills.

**But those concerned about throwing themselves in the deep end need not worry.**

“Plan to own the system,” he said. “That means not only installation but maintaining PAR Excellence going forward. PAR Excellence Support is there to monitor facilities and to help with diagnostics when you can’t figure it out on your own. Scale downtime can cause ordering delays or other issues, which in turn will result in empty product bins. If you can resolve problems on your own, downtime will be reduced to a minimum with no adverse effects on patient care.”

**Organizations need to fortify and invest in their staff to handle this.**

“The people you choose should have permanent positions to maintain and support the PAR Excellence system,” Firman indicated. “They will be the best resource for all PAR Excellence hardware and software. With their expertise and analysis, they will help to maximize product usage, which can bring about cost savings by reducing the amount of inventory carried within a hospital or network. It will also reduce waste from expired product by right-sizing product bins and par levels and allow insight to areas that may need additional product emergently, avoiding stat shipments.”

**Training takes time and effort, Firman acknowledged.**

“There is so much to learn about this system, and it helps to have that knowledge and experience for install and maintenance,” he said. “We came into this job with no experience so we know people can be trained over time, but you can’t do this job on Day One without one expert. It takes months to really understand everything. We still learn new things every day.”
Myers echoes Firman’s encouragement.

“For [organizations] contemplating self-installation I would say, do it,” she asserted. “Being able to know how the PAR Excellence installation works from start to finish has helped in the long run. When product needs to be moved around, we know how to remove scales and add them with ease. You really need to have dedicated staff that can just focus on installation. By utilizing the supply chain staff who already know the product and the hospital units has made the transition very easy.”

SELF-INSTALLATION REQUIRES INTROSPECTION

Certainly, healthcare organizations can contract with PAR Excellence for the technology itself and the installation and ongoing maintenance as one option, but Firman highlighted the economic considerations to contemplate before deciding to self-install.

“Huge cost savings came from using our own installers,” he noted. “PAR Excellence consulting fees, which included installers and all travel expenses along with travel blackouts on Mondays and Fridays are very expensive compared to using our internal Materials Management installation team. Blackouts are defined as time for PAR Excellence staff to travel to and from the PAR Excellence home base, which keeps their employees within the bounds of an 8-hour day. That means they are not available to work for half a day or more at our facilities. We have a full work week when utilizing our own team.”

In-house, internally maintained product knowledge created soft-dollar savings, Firman estimated.

“Consultants or outside vendors do not have the innate product knowledge that we have, which benefits the Nursing and Materials Management staff,” he added. “That cannot be overstated.”

SUSTAINABILITY WAS A FACTOR, TOO.

“Another substantial cost savings came from repurposing wire shelving that were removed from supply rooms during the construction and bin installation phase,” he said. “Those shelves were replaced with wall panels where the scales and bins were placed. Our team did a fantastic job of taking those shelves apart and altering them to fit in areas that a full wire shelf would not normally fit, which maximized our supply room space. We estimate a savings of approximately $10,000 by not having to purchase new custom shelving.”

SCOPING OUT THE TECH

Regardless of installation preference, Firman encourages healthcare organizations to consider PAR Excellence as a useful and reliable technology to keep supply chain operations running smoothly. This includes exploring all the advantages the PAR Excellence system can provide for and beyond inventory management.

“For example, real-time quantity-on-hand at year-end or at any given time [and] for any item in your inventory is a major win for Materials Management, Inventory Management and the Nursing staff,” Firman insisted. “Having the ability to see who has an item available throughout the hospital or network of hospitals has given us the ability to share products that may have run low in a department. When products are shared the cost of those items can be transferred from one department to another in PAR Excellence, which gives us insight to real department product cost.”

Firman extols the flexibility of PAR Excellence auto-ordering functionality.

“This allows us to schedule orders for all supply rooms on any given day and time,” he said. “Materials Management staff used to place these orders by visually scanning each supply room for product that was low and entering the order into a handheld unit. Auto-ordering removes the emotional part of placing orders and allows the staff to focus on clean supply rooms and the removal of product that is about to expire.”

Firman appreciates the breadth, depth and variety of reports that the PAR Excellence technology can generate to keep the system and overall network running.

“The Equipment Status report helps us see how the scales are functioning across the system,” he said. “It’s one of the first things we look at each morning to see if we need to address any scales that may be down or not reporting correctly. We fix all those before the product orders go out.”

“Most days we have no issues to address, but when we have internal network interruptions there can be many
supply rooms down,” he continued. “We have worked closely with our IT department to keep PAR Excellence up and running when those interruptions take place. A mass reboot command can be sent out to all PAR Excellence PCs as an example. That clears out any system connection errors that may have occurred and keeps the system running with minimal interruption.”

Usage reports allow Firman’s team to see items that aren’t moving so that they can address that with the materials managers and nurse managers to have those items removed.

“Par level analysis tells us how much product to keep in the supply rooms based on their historical usage,” he noted. “We can easily change those levels from our office laptops or from home if that’s where we are working at the time.”

The system also facilitates supply trafficking.

“The Department Transaction report helps us to track product that moves from one department supply room to another,” he said. “If a product should happen to run out on a given day in [any] given department, the nurses or materials management staff can locate that product on the PAR Excellence monitors that are installed in most supply rooms. It will show the location of that product across the network. They can then retrieve that product and charge it to their department.”

PLANNING FOR, THROUGH CRISIS

The threat of a major snowstorm in Indianapolis earlier this year put the PAR Excellence system through its paces at Community Health Network.

While Valentine’s Day fell on a Sunday this year, meteorologists predicted that 9 to 12 inches of snow would fall the next day.

“This meant our orders that normally occur on Monday for Tuesday delivery would probably be cancelled due to the snow,” Firman remembered. “Our product [distributor] Medline stepped up and staffed their facility in Jeffersonville, Indiana, on Sunday so we could place our orders and stock all our hospitals on Monday morning before the snow was predicted to begin.”

Prior to the PAR Excellence installation, Community Health Network would have had to declare an “all hands-on deck” red alert for Supply Chain.

“We would have had Materials staff walking through each of the supply rooms with handheld units, visually scanning for product that was low and placing orders, Firman said. “This would have required the entire staff to work for hours on a Sunday.”

Fortunately, the PAR Excellence technology saved the team from all that work and expense, according to Firman.

“At 11 a.m. on Sunday morning I placed a mass order for all facility supply rooms in just a few minutes,” he said. “That is the power of PAR Excellence ordering. We received all our product Monday morning. We also received 9 to 10 inches of snow Monday afternoon and into Tuesday morning. Instead of being short of supplies on Tuesday, we were fully stocked with no effect on patient care.”

LOOKING AHEAD

What’s next? Server migration.

The server on which PAR Excellence’s system runs belongs to IT, so Firman’s team relies on IT to ensure uptime. However, PAR Excellence will be moving Community Health Network’s entire system to the cloud in 2022 so that portion of the system will be completely maintained by PAR Excellence as the natural progression of system development, according to Firman. “That will take the burden of software upgrades, server upgrades and server security off our IT department,” he added.
SEE PICTURE BELOW:
The first two pictures below are new supply rooms at Community East Hospital with custom built shelving at the bottom.

This was our Endoscopy supply room prior to PAR Excellence. All product was on rolling shelves and very difficult to locate. Product ordering at that time was completed by Materials Staff with handheld units.
The next two pictures are of the same supply room for Endo after PAR Excellence was installed. We stripped out all the rolling shelves and installed wall panels for the scales. The room is now clean and organized with all product visible when you walk in the door. All ordering is now automated through PAR Excellence.

**PAR EXCELLENCE HIGHLIGHTS**

- **Founded:** 1993
- **Headquarters:** CINCINNATI, OH
- **Employees:** 109
- **317** Client hospitals and networks
- **1.5 MILLION** scales installed
- **7,000** Departments including: Surgery, Pharmacy, Nursing, Storerooms, Central Sterile, Ambulatory, Non-acute
- **Perfect for COUNTLESS products including:** catheters, CPTs, drapes, forceps, gloves, gowns, linens, medication, respiratory, shampoo, stents, sutures, trocars, wires **...and more!**