



**KAHRMM**

Kansas Association for Healthcare  
Resource & Materials Management

## **June 2021**

### **President's Message – Moving Forward with KAHRMM**

Greetings fellow KAHRMM members, I hope this finds everyone doing well. The KAHRMM Board met face-to-face on May 14, 2021, in McPherson, for the first time since January 2020. It was great to reunite and see everyone attending.

During the meeting, we discussed moving forward with KAHRMM's activities, hopefully in September or October. With the elimination of the Central Plains Expo, we are planning to have an event this year to include KAHRMM members and Materials staff. We are hoping for a Golf tournament, vendor show, as well as a day and evening of education/discussion opportunities. The KAHRMM Board will continue to work out details at the June KAHRMM Board meeting. More information coming soon.

Additionally, KAHRMM would like to offer a KAHRMM-branded educational event offering continuing professional education credits. Please let any KAHRMM Board member know if you are willing to help with this program so you can be included in the planning discussions. Nothing has been set in stone, and it will take members' help to host the event.

Finally, AHRMM has moved their convention on Aug. 23-25, from Boston, MA to Nashville, TN. A few KAHRMM members are planning to attend. Scholarships available and we are trying to offer group transportation of some sort. Please stay tuned, and let me know if you are interested in attending.

Thank you for all you do!

*--Mike Morgan*

### **Making a Case for 'Just in Case' or 'When Is Too Much Enough?'**

As a perennial student of all things supply chain, I've come to trust the best practices of our industry. They are tried and true, and they rarely, if ever, fail us. One of those long-held concepts in our profession is the practice of just-in-time. JIT makes sense from a business perspective, a patient-safety perspective, a LEAN perspective and a space-utilization perspective. Understanding there are some occasional, necessary modifications to JIT, based on geography, seasons and supplier performance (which are topics for a future article), I think we can all agree it makes sense to keep just enough product on hand to do our job but not so much as to clutter our storage areas. Clutter is often the result of 'just in case' thinking, whereas, JIT is a sound concept that is widely accepted in the supply chain profession.

Since I first learned of the concept of JIT, I trusted it based on historical performance and my experience. That is why I was just as surprised as everyone else, 15 months ago, when we submitted product orders for all types of personal protective equipment and related supplies, and we were told by our primary suppliers these products were not available or at least not available in the quantities we requested. We were told these products were manufactured in China and other countries overseas, and due to the devastating effects of COVID-19, there were manufacturing and transportation delays and shortages throughout the world.

To exacerbate the problem, when we looked into the PPE stockpiles we had on hand, 'just in case' of an unexpected disaster, we determined the calculations we had used to determine days-on-hand were based on our normal, average daily usage that existed pre-COVID-19. With the rapidly changing Centers for Disease Control and Prevention, World Health Organization, National Institute of Health and all the other agencies changing PPE requirements on a daily or weekly basis, we quickly determined a normal, 15-day supply of PPE amounted to about four to five days worth during COVID-19, and that was if we rationed those supplies.

Naturally, this was sub-standard, so all sourcing and procurement teams went into immediate overdrive. We needed PPE, and we needed it fast. We received negative responses from suppliers more often than we received affirmative responses. When our primary, preferred suppliers couldn't help us, we quickly shifted directly to the manufacturers. When the manufacturers couldn't help us, we shifted to secondary and alternate suppliers. There were times PPE was so critically short that some in our profession briefly flirted with the idea of using gray-market suppliers.

In the end, most of us were able to keep our heads above water, thanks to the valiant efforts of many people in the industry. Hospital sourcing and procurement leaders pushed their teams to overcome obstacles. Networking with other leaders in our industry, we were able to share information about the dead ends we hit and the successes we were having.

The lessons many of us took away from this event is JIT for PPE is a moving target at best, and a SWAG at worst. We can't always depend on our normal suppliers during abnormal situations. We can't always depend on our normal manufacturers when they are trying to supply globally, under abnormal conditions. Suddenly, it didn't make sense to keep only seven, 14 or even 30 days of PPE on hand. Many of us realized this situation may arise again due to the delicate and tightly linked infrastructure of the global health care supply chain. If we have even one weak link in the chain, we could suddenly find our facilities short on crucial PPE once again.

In order to minimize the risk of running out of crucial PPE, many leaders decided to increase levels of PPE DOH to 60 or even 90 days. Personally, I'm a proponent of the 60/90 rule, 60 days is the reorder point, and 90 days is the maximum on-hand. Without a doubt, there are some common-sense considerations to take into account with PPE levels; specifically, available storage space, expiration dates and stock rotation. However, if a facility has the available storage space and can accurately rotate stock to avoid product expiration, I think it would be wise to maintain an abundance of DOH, when it comes to PPE.

As Healthcare Supply Chain professionals, we are responsible for acquiring, storing and delivering the necessary supplies to protect the lives of our patients, co-workers and visitors. Every health care leader I have talked to has indicated they never again want to be at the mercy of a delicate supply chain that can rapidly crumble during an international crisis. The desire to be self-sufficient and minimize risks to patients, staff and visitors is what drives many supply chain leaders to reconsider 'just in case' vs. 'just in time' when it comes to PPE. It's advisable to have enough PPE on hand JIC it's needed, but not so much as to be too much.

If you haven't done so already, it is time to consider and decide what is right for your facility and your peace of mind. Good luck!

--Craig Rohleder

### **AHRMM Update – AHRMM21 Conference and Exhibition**

AHRMM is offering three ways to participate in its educational programs. AHRMM21 (in-person conference) and AHRMM21+ (virtual conference) are the leading education and networking events for the health care supply chain. The events bring together providers, affiliates, academics and vendors for three days of insightful keynotes, practical learning labs, new product presentations and face-to-face discussions and networking activities.

#### **In-Person**

*AHRMM21 Health Care Supply Chain Innovate. Engage. Connect*, Aug. 23-25, has been moved from Boston, MA to Nashville, TN. Learn about the latest in health care supply chain trends, tools and resources to build a more connected, resilient and efficient health care supply chain.

#### **Virtual**

If you are unable to attend the in-person conference, AHRMM will offer a virtual conference Sept. 14-16. During the virtual conference, you can view the recording of the Nashville session, as well as new sessions.

#### **In-Person AND Virtual (Hybrid)**

A third option is to attend both the in-person and virtual hybrid for maximum education, resources and networking opportunities.

For the lowest registration rates, register from May 25 to June 28 and receive the early bird rates. Want to learn more? [The AHRMM21 web pages](#) include information on rates, education and general sessions, continuing educations credits, conference educational tracks, CMRP examination, hotel and travel, and the full agenda of the AHRMM 21 Virtual Conference. The website also contains FAQs, conference tips, justification tools and tips, as well as scholarship opportunities.

Join your friends and colleagues for an outstanding program, renew old friendships and make some new friends. See you soon in Nashville!

## Remembering KHA President Don Wilson



*Remembering KHA President Don Wilson*

Written by Chad Austin, president and CEO, KHA

Originally published in the May 21 issue of KHA's *Current Report* weekly newsletter.

*Throughout this week, the Kansas Hospital Association family has been mourning the passing of former KHA President Don Wilson. Don was a thoughtful, staunch leader and faithfully served the KHA membership from 1982 until his retirement in 2004.*

*When Don first arrived at KHA in 1982, he already had a wealth of health care experience. He started his career in health care in 1969, as the administrator of the Ellsworth Municipal Hospital in Iowa Falls, IA. Subsequently, he transitioned his career into association management where he served as a vice president for the Iowa Hospital Association. Shortly thereafter, he left that position to become the new president for the Kansas Hospital Association.*

*During Don's leadership tenure, he was instrumental in leading KHA through a number of innovative initiatives still benefiting the KHA membership. Under Don's guidance, KHA established the KHA Workers' Compensation Fund, the KHA Political Action Committee and oversaw the merger of the Kansas City Area Hospital Association with KHA. He also directed KHA's involvement with the formation of the Health Alliance of MidAmerica, a partnership between the Missouri and Kansas Hospital Associations. Don was a true health care visionary. In recognition of this and upon his retirement, KHA established the Donald A. Wilson Visionary Award. This award recognizes hospital-related individuals who have made an outstanding, innovative contribution to improve the health and clinical outcomes of their community. While Don's leadership influenced the Kansas health care system, he also left his mark on the national level. Don frequently traveled to Washington, DC, where he met with congressional officials, as well as the leadership of the American Hospital Association. His involvement and role with AHA landed him the AHA's Board of Trustee Award in 2003.*

*While Don's contributions to the hospital community will continue to be noticed for years to come, it was his personality that many people remember. Don was an avid outdoorsman and always sought opportunities to gather with family and friends. Whether it was guided fishing trips, spur-of-the-moment golf outings or discussing college sports, Don enjoyed the company of those around him. The relationships Don developed over the years had a lasting impression on everyone he crossed paths with, including me.*

*You can't get very far in talking about Don without mentioning his wonderful wife Jan. Jan was regularly by his side and always filled with cheer and happiness. Together, they had three children...Mary, Michael and Philip; and seven grandchildren and one great-grandson.*

*While Don will be sorely missed, the legacy he built through his relationships with his family and friends will carry on. On behalf of the KHA family, we send Jan and the rest of the Wilson family our condolences and prayers during this difficult time.*

[View Don's obituary here.](#)

--Chad Austin

## KAHRMM Calendar of Events

May 25-June 28, 2021

Early Bird Registration

[AHRMM21 Conference and Exhibition](#)

2 p.m. on June 25

[AHRMM Webinar: \*The Intelligent Supply Chain: Exploring the Potential of Intelligent Automation\* \(More than Just Supplies Discussion Series\)](#)

Aug. 23-25, 2021

Change of Dates and Venue

[AHRMM21 Conference & Exhibition](#)

Nashville, TN

Sept. 9-10, 2021

[KHA Annual Convention & Trade Show](#)

Wichita

Sept. 14-16, 2021

[AHRMM21 Virtual Conference](#)

Oct. 3-9, 2021

[National Health Care Supply Chain Week](#)

### The KAHRMM Bulletin Board

**AHRMM Conference 2021:** *AHRMM21 Health Care Supply Chain Innovate. Engage. Connect.* Change of dates and Venue. The new dates are Aug. 23-25 in Nashville, TN. Visit the [AHRMM21 web pages](#) for more information.

**AHRMM21 Conference Early Bird Registration:** For the best rates to attend the *AHRMM21 Conference*, [REGISTER](#) between May 25 and June 28.

**KAHRMM Membership:** The KAHRMM Board has elected to extend your membership into 2021 if you paid your 2020 membership before the end of 2020. **The new amount for dues is \$50 and \$75 after Sept. 30.** Please see the [2021 KAHRMM Membership Form](#) on [KAHRMM's website](#).

**AHRMM MEMBERSHIP:** Consider becoming an [AHRMM member](#) for access to abundant information and resources. Explore [AHRMM's website](#).

If you have updates from your Supply Chain you would like to share with your KAHRMM peers, please send them to [Cindy Howard Reeves](#).

**PLEASE VISIT the [KAHRMM WEBSITE](#).**

### **KAHRMM Board of Directors**

[Mike Morgan](#), CMRP, President, McPherson, (620) 241-2251

[Lori Knoeber](#), CMRP, President-Elect, Salina, (785) 452-7497

[Craig Rohleder](#), Immediate Past President, Hays, (785) 623-5838

[Teresa McHenry](#), Secretary, NW Representative, Ellsworth, (785) 472-3111

[Chrissy Fink](#), RN, CMRP, Treasure, SC Representative, Salina, (785) 452-7949

[Lisa Feil-Neavitt](#), NE Representative, Atchison, (913) 360-5555

[Tammy Jackson-Noland](#), NC Representative, Parsons, (620) 820-5362

[Mick Pond](#), SE Representative, Neodesha, (620) 325-8367

[Pat Tabor](#), FAHRMM, FACHE, SW Representative, Lawrence, (785) 505-6131

[Larry Wenthe](#), Vendor Representative, Tescott, (785) 392-7644

**Ambassador:** [Cindy Howard-Reeves](#), Ulysses

### **Advisory Council**

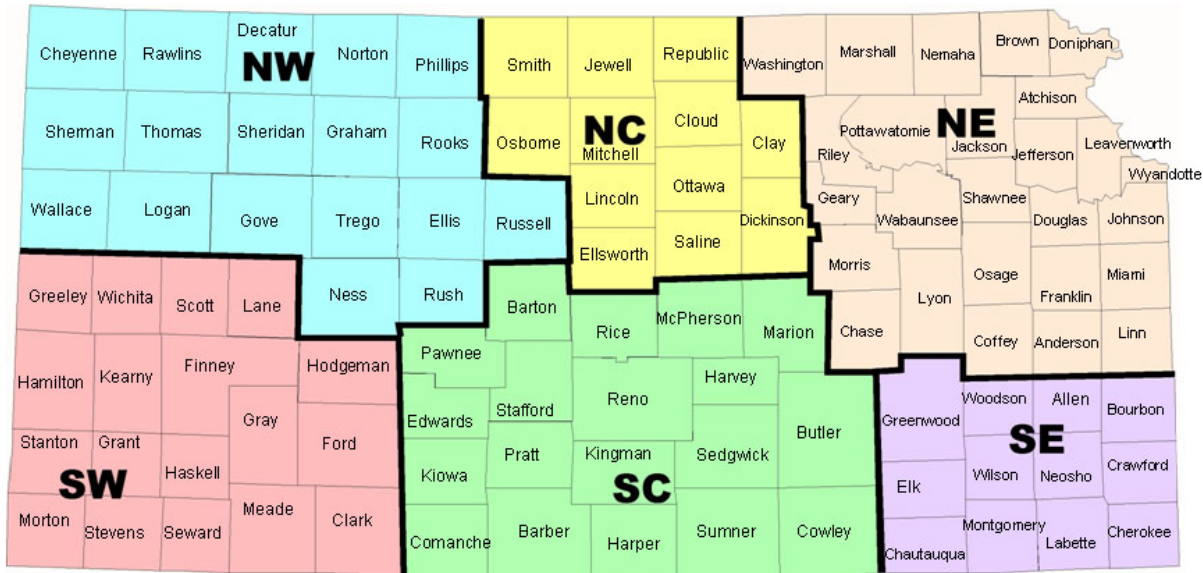
- [Rebecca Flora](#), Phillipsburg;
- [Randy Lott](#), Salina;
- [Dale Montgomery](#), FAHRMM, Hays;
- [Corey Schmidt](#), CMRP, Shawnee; and
- [Cindy Howard-Reeves](#), Ulysses

**KHA Liaison:** [Bruce Frerking](#), Overland Park

### **Committees**

- **Central Plains Expo:** [Mike Morgan](#) and [Randy Lott](#)
- **Chapter Affiliation:** [Cindy Howard-Reeves](#)
- **Finance:** [Chrissy Fink](#) and [Mike Morgan](#)
- **Golf:** [Randy Lott](#) and [Dale Montgomery](#)
- **Marketing:** [Mick Pond](#)
- **Membership:** [Lori Knoeber](#)
- **Newsletter:** [Cindy Howard-Reeves](#)
- **Program and Continuing Education:** [Lisa Feil-Neavitt](#) and [Tammy Jackson-Noland](#)
- **Scholarship:** [Chrissy Fink](#), [Mike Morgan](#) and [Lisa Feil-Neavitt](#)
- **Special Olympics:** [Dale Montgomery](#) and [Randy Lott](#)

## KHA DISTRICT MAP



### KAHRMM Mission

The Mission of the Kansas Association for Healthcare and Resource Management is to advance the profession of health care purchasing and materials management by:

- Assisting members through training and mentoring opportunities which promote excellence
- Establishing proactive, collaborative partnerships through networking
- Promoting high ethical standards

### KAHRMM Code of Ethics

- Consider first, the interests of our hospitals in all transactions and to carry out and believe in its established policies.
- Buy without prejudice, seeking to obtain the maximum ultimate value for each dollar of expenditure so the patient may receive the best care possible at as low a cost as possible.
- Be receptive to competent counsel from our colleagues and to be guided by such counsel without impairing the dignity and responsibility of that office.
- Respect our obligations and to require that obligations to us and to our hospitals be respected, consistent with good business practice.
- Subscribe to and work for honest truth in buying and selling, and to denounce all forms and manifestations of commercial bribery.
- Decline personal gifts or gratuities that might in any way influence the purchase of materials.
- Avoid sharp practice.
- Give a prompt and courteous reception, as conditions permit, to all who call on a legitimate business mission.



# KAHRMM

Kansas Association for Healthcare  
Resource & Materials Management

Allied with the Kansas Hospital Association



## 2021 Membership Form

Active, voting memberships are available to persons professionally engaged in health care purchasing, resource or materials management; group purchasing organizations; as well as medical manufacturers, vendors or distributors. Membership may also be obtained by those professionals in other healthcare related settings not mentioned.

I hereby apply for membership in KAHRMM and/or AHRMM and certify that I meet the membership requirements.

Name (please print): \_\_\_\_\_ Title: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: Work \_\_\_\_\_ Cell \_\_\_\_\_ Home \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Hospital Employee \_\_\_\_\_ Healthcare Supplier \_\_\_\_\_ AHRMM Member \_\_\_\_\_

**KAHRMM / AHRMM One-check option:** AHRMM membership is not required for KAHRMM membership. As a service to our membership, KAHRMM will coordinate your AHRMM membership renewal payment. Select your KAHRMM and AHRMM membership options below, and send one check to KAHRMM for the total amount. **When your AHRMM membership is due to renew, send your AHRMM membership renewal notice / invoice to the AHRMM Treasurer and your AHRMM dues will be paid.**

KAHRMM \$50 \_\_\_\_\_ After Sept 30th \$75 \_\_\_\_\_ New or Renewal Member (please circle)

**Note:** Due to the initial AHRMM membership questionnaire, new AHRMM applicants are encouraged to join on-line at the AHRMM website ([www.AHRMM.org](http://www.AHRMM.org)). After your first year of AHRMM membership is complete, use the One-check option to renew your AHRMM membership.

**AHRMM Renewal Membership Categories** (Select one category - see AHRMM website for membership category descriptions)

Supply Chain Provider \_\_\_\_\_ \$165.00    Affiliate / Supplier \_\_\_\_\_ \$240.00    Military \_\_\_\_\_ \$165.00  
Supply Chain Executive \_\_\_\_\_ \$220.00    Young Professional Associate \_\_\_\_\_ \$135.00  
Full-time Student \_\_\_\_\_ \$109.00    Retiree \_\_\_\_\_ \$109.00

CMRP Year Earned \_\_\_\_\_

AHRMM Fellow Year Earned \_\_\_\_\_

KAHRMM \$ \_\_\_\_\_  
Renewal AHRMM \$ \_\_\_\_\_  
**Total Check Amount** \$ \_\_\_\_\_

Make check payable to **KAHRMM** and mail to:

**Chrissy Fink, RN, CMRP**  
**Materials Management**  
**Salina Regional Health Center**  
**400 S Santa Fe**  
**Salina KS 67401**

Check # \_\_\_\_\_ Date Received \_\_\_\_\_

To renew with credit card, please contact Chrissy at [cfink@srhc.com](mailto:cfink@srhc.com).