

# Sanford Health: 10 Lessons Learned

## Case Study **Summary**

**The Sanford Health Fargo Sterile Processing team is leading an effort to optimize physician preference cards, in collaboration with the Supply Chain and Perioperative teams, resulting in a 90%+ preference card accuracy rate.**

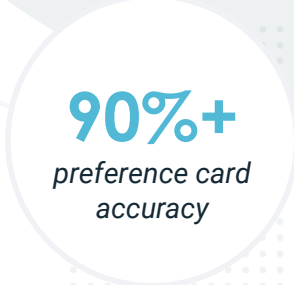
Since 2014, Sanford Health and Tecsys have been partnering on an initiative to automate supply inventory tracking throughout its hospitals. Working in collaboration with Orthopedic Surgical Services (OSS) within the walls of Sanford South University Medical Center (SUMC), the Sanford Health and Tecsys teams embarked on a transformational journey to achieve it.

Following the integration of the Tecsys Elite™ Healthcare POU solution in 2018, the Sterile Processing team discovered low scanning compliance in the OR and confirmed that about 45% of items they picked based on preference cards and sent to the OR came back to them unused resulting in significant waste and expense, and in some cases, jeopardizing patient care and safety.

Through multiple trials and errors, the "Maintain Gains" (MG) team developed an effective system to measure utilization rates and create a steady process to support preference card optimization subsequently allowing them to impart their successful strategy with other teams.

To date, they have achieved \$1.4 million in savings through on-hand inventory reduction alone, not including labor and productivity gains. They have automated and systemized data capture, closed the data loop on preference card picking cycles, eliminated redundant processes and driven down on-hand inventory value.

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A circular graphic with a light blue background and a white border. Inside the circle, the text "90%+" is written in a large, bold, blue font, and "preference card accuracy" is written in a smaller, black font below it.

**90%+**  
preference card  
accuracy

### **Maintain Gains (MG):**

*A Sanford Health team assembled to carry out a suitable approach for preference card optimization and improve efficiency among the surgical services team (SPD and OR).*

### **Leading the efforts:**

**Susan Pfeifer** – Director of Sterile Processing

**Sarah Puhalla** – Sterile Processing Improvement Manager

**Madison Mayer** – Special Projects Specialist

Here are 10 key lessons learned by the Sanford Health Sterile Processing team from their work to date.

## 1. Be a team player, not a lone wolf

Because preference cards impact so many functions within a hospital, including the Operating Room (OR), Sterile Processing department (SPD) and Supply Chain, successful change starts with gaining buy-in from the top, as Pfeifer explains:

“It’s important to have executive leadership support. They must recognize and understand what SPD does and believe in your efforts for cost savings and improvements ... otherwise you are a lone wolf and will not survive.”

Once senior leadership understands the broad implications of low utilization rates, all the way through to patient billing and reimbursement, they can help engage the necessary stakeholders to support card optimization efforts.

## 2. Start with proven successes in your own department

Before the SPD team could convince the OR to let them lead the preference card initiative, they had to first prove they could clean up their own processes.

In Pfeifer’s words, they “consistently excelled during Joint Commission surveys” with their high-quality standards. This includes elimination of immediate use steam sterilization (IUSS) in 2011. In December 2008, they implemented a just-in-time (JIT) case picking approach that resulted in efficiency metrics that were “off the charts,” according to Pfeifer. This project ignited all Lean-influenced process improvement work over the next decade.

## 3. Lead with data

Pfeifer and team had attempted multiple improvement projects on surgical preference cards at the beginning of their transformation journey, but acknowledged that their failure was a result of not having the systems and data to support it.

It was not until Sanford Health implemented the Tecsyst Elite™ Healthcare POU solution that they had the data and analytics needed to prove preference card waste and address the root causes.

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“We knew it was necessary to demonstrate that SPD could make improvements in our own processes to show the value we could bring to OR. We desired for the organization to understand how we’re not just people in the basement, but valuable partners in delivering high-quality, cost-effective care.”

**Susan Pfeifer**

*Director of Sterile Processing*  
Sanford Health

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“We needed technology to support our work, provide analytics and really, truly identify where the burden of work could be removed for stakeholders within those value streams.”

**Susan Pfeifer**

*Director of Sterile Processing*  
Sanford Health

## 4. Ease the burden rather than adding to it

Having worked closely with the Perioperative team for many years, Pfeifer and Puhalla understood their resistance to change, especially if it meant taking time away from the patient. Therefore, they developed a POU approach where data capture was as streamlined as possible.

“One Lean principle is to make technology fit people,” Pfeifer commented. “It should remove the burden of work, not become burdensome. So, that was the premise of our guidance. We wanted the technology and supporting processes to be effective.”

## 5. Engage a Perioperative champion

Gaining support for card optimization from the Perioperative teams was challenging, even with credible utilization data in hand. The SPD team found a champion in Orthopedic Surgical Services’ (OSS) OR Director Karen Sanderson, who helped drive the initiative forward at that campus.

“She was empathetic with her team, but at the same time convinced them to try our Maintain Gains approach, put in the effort and see if it worked,” said Pfeifer. “I give a lot of credit to her passion and commitment in this space. I don’t know if we would’ve been able to move forward if she hadn’t owned the OR piece and recognized ‘it is work worth doing.’ Because of the work we developed with the OSS team, we’ve been able to take Maintain Gains to other campuses.”

## 6. Don’t sacrifice quality for speed

The “big bang” approach to preference card optimization, while aimed at quickly improving utilization rates on as many cards as possible, resulted in lower rates in many cases. It showed that using hard and fast rules to remove items doesn’t work. Rather, slow and steady wins the race – careful consideration must be made to each item on a card.

“It goes back to Lean. You must follow a developed standard process and if you try to deviate from that process to get bigger results faster, it isn’t going to work,” said Pfeifer.

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**Taiichi Ohno**

*chief architect of Toyota’s lean production system famously stated:*

*“Where there is no standard, there can be no improvement.”*

## 7. Offer an unbiased perspective

The SPD team believes the success at OSS with the advanced techs taking ownership of their preference cards is largely attributable to Mayer's relationship building with the OR team. As an unbiased party uniting the SPD and OR teams in collaborative improvement, Mayer was able to help right the ship on Maintain Gains following the big bang.

Mayer led with data and without the emotional filters that had developed in the OR and SPD over decades of struggling to work together. She worked to develop trust with the OR team from day one.

## 8. Make scanning compliance a priority

Throughout the Maintain Gains work, the SPD team faced pushback from advanced techs on reported utilization rates. What they discovered is that the data in Epic may not be totally representative of what is happening in the room because of poor scanning compliance. Therefore, they have made scanning compliance a priority in their work with the OR team.

“Scanning compliance has been our biggest beast in the past year,” said Mayer. “We have been struggling to get the OR to understand that failure to scan an item or failure to record when an open item is not used on a patient leads to a very large downstream impact on the data, on the cards and the ability to make data-driven decisions.”

She notes how today's healthcare staffing shortage and high turnover rates only add to the problem, stating:

“If the OR team is taking something out of room stock, they must scan it to document usage. But new staff members may not know to do this. While it's hard for someone new to learn everything they need to know about OR workflows, we are urging the Perioperative team to prioritize scanning compliance in their staff onboarding efforts.”

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“Two years ago, if that Bowling chart data had come from Susan or me, it wouldn't have flown,” said Puhalla. “They would've taken it from Susan and tossed it aside. Data coming from someone outside of the SPD means it was better received. The OR team is less likely to think poorly of it because they have no emotional filters against the person presenting it.”

**Sarah Puhalla**

*Sterile Processing Improvement  
Manager*

*Sanford Health*

## 9. Tie it back to the patient

To drive home the importance of POU scanning compliance, Mayer suggests tying it back to the patient. Help the OR understand how their choices impact documentation in the EHR and why failure to scan has safety ramifications.

“If you scan or do not scan this item it may affect the patient’s bill in the end, but it will also affect the accuracy of the medical record,” Mayer explains. “Considering recalls, we need to know what items were used on a patient. So, data and project aside, please ensure your patient’s medical record is correct by scanning those items.”

## 10. Consider all stock sizes

During their optimization work, the Sterile Processing team discovered items made available in different sizes during a procedure can skew product utilization data.

“For example, many of one surgeon’s cards had three size slings on each card because the staff in the room didn’t want to have to call us each time for a specific size sling when they do that case,” said Mayer. “When we added three size slings to the preference card, the surgeon would use the one needed and then send the other two back to us, which brought down the utilization rate.”

This has prompted the team to improve current core and room stock to support optimized Orthopedic preference cards. They are adding slings and braces and other items with poor utilization on the preference cards to secondary stock locations instead.

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