

FROM THE PAGES OF *LEADERS & LUMINARIES* E-MAGAZINE ...

Vintage Voice

What if ... healthcare supply chain simply didn't exist?

By Rick Dana Barlow

SCHAUMBURG, IL (July 9, 2024) – Disney's Marvel Comics and Marvel Studios share a multimedia brand and title known as "What If ...". The animated television series airs on The Disney Channel and enters its third and final season this year. The comic book series remains an endearing collectible to hardcore fanboys.

The premise of "What If ..." involves placing familiar characters in unfamiliar plots, roles, scenarios and situations to show what could or might happen to continuity and how those characters act, react and develop.

Through this exercise in fiction and imagination the viewers, readers and fans learn more about the characters as well as themselves.

This stimulates a curious question: What if ... healthcare supply chain didn't exist? Granted, the concept of supply chain always will exist because each one of us needs and wants something at least every hour of every day and must determine how to get it. The function of supply chain enables and facilitates access to the desired products and services, whether they reside on retail outlet shelves or through online exchanges.



But what if healthcare organizations – specifically providers (hospitals and other healthcare facilities) – didn't have a functioning department dedicated to supply chain activities?

Hollywood historically depicts the “supply chain guy” as being this adventurously swarthy, swashbuckling anti-hero (who may lean toward criminal) type who can be relied on to get you stuff – anything you want – for the right price. The SCG typically “has a guy” or a direct connection to seemingly endless contraband and stock – the forerunner to the futuristically primitive 3-D printer we tinker with today in real life and “Star Trek” replicator technology we see in reel life.

Granted, we're centuries away from fictional “Star Trek” technology (although researchers are experimenting with replicator- and transporter-like machines) and continue to develop relevant and useful applications for 3-D printing (from building materials, cars, consumer products and medical products to ... food, believe it or not), so we have to rely on human ingenuity and intervention, whether AI- or IT-motivated, to source, evaluate, pick, purchase, use and dispose of desired products and services.

In most healthcare organizations, such human ingenuity resides within the supply chain department, comprising executive leaders, managers and other professionals to fortify administrators, clinicians and visitors within a variety of facilities to provide services.

Consequently, in the vain of “Avengers: Endgame,” let's don our Infinity Gauntlet with the knuckles bejeweled by the cosmically magical Infinity Gems and snap our fingers. Poof! Supply Chain departments, executives, leaders, managers and professionals disappear and no longer exist.

Now what?

Each administrator and clinician simply will buy his or her own stuff. Sounds logical, right? Until you recognize and acknowledge the butterfly effect.

- All these disparate products must be researched, sourced, ordered and delivered to the organization. Researching, sourcing and ordering online

these days is easy enough, right? So, who accepts, retrieves and is responsible for the order(s)?

- All these disparate products must be stored somewhere and easily accessible to end users. Who handles that and where do they put all this stuff so that everything is organized and readily found by each person?
- All these disparate products must be budgeted for, financially accounted for and paid for. Who handles those functions? Most everyone knows that in this nation's predominantly payer-financed healthcare system, reimbursement from government and private insurance programs and companies won't cover all those costs – particularly the plethora of pricing variances.

Remember, a non-existent supply chain function means group purchasing organizations don't exist for contracting and volume discounts either.

This means that each person will buy what he or she wants and will have to pay the "sticker price" ... or at least send an invoice to the CFO for Accounts Payable to remit.

A notable scene in the premiere episode of the Netflix series, "The Crown," metaphorically depicts physician attitudes about supply chain. In it, Britain's King George VI is participating in a recreational duck hunt to advise new son-in-law Prince Phillip who married Princess Elizabeth. The actual duck hunt itself resembles something of an assembly line of royal supporters who pass a loaded rifle to the King for him to aim and shoot and then pass the empty weapon to the person next to him to transport through the cleaning and reloading process.

Why is this relevant? Simple. When push comes to shove, administrators and clinicians, by and large, want to be like King George VI. The products and services they want simply need to be there. They don't care how they arrive in front of them or where they go after usage.

Hence, the likelihood of the end users – administrators and clinicians – to painstakingly research, source, evaluate and negotiate all of the nitpicking details and nuances of each and every product with an underlying aim that their organizations

don't blow through budgets and hemorrhage funds within a week's or a month's time is slim to none.

Whether they realize it, administrators and clinicians (e.g., physicians, surgeons, nurses, laboratorians and diagnostic imaging specialists) rely on supply chain professionals to equip and fortify operations, patient care and services in a way that satisfies their customers and keeps the organization afloat financially so that their customers can provide patient care and services. It's a delicate balance that deserves respect.

Too many clinical, financial, management and operational crises begin when everyone forgets, ignores or omits supply chain involvement and participation from the get-go. In fact, many healthcare problems turn into crises and disasters when supply chain isn't consulted ahead of time or upfront.

If the global pandemic taught us anything about the qualities that define supply chain it's this triad: "Always on;" "Bend, don't break;" "Touches everyone and everything."

Do you want to know the secret behind many of the leading healthcare supply chain executives today? It's not how much money they saved or other quantitative measures. Those are all symptoms of a cause. Innovative, pioneering and visionary supply chain pros – the ones awards are named after and who earn awards – are people who come through for others who can rely on them whenever needed. For an example, click on <https://www.bellwetherleague.org/II/II6/II-issue-6.php> to read my "Vintage Voice" column in last fall's *Leaders & Luminaries* magazine.

In the 2005 film, "Batman Begins," Christian Bale's Batman tells another character, "It's not who I am underneath, but what I do that defines me." Perhaps more accurately for the authentic supply chain leader, it's how you relate to others that determines what you do and shows who you are.

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