

AHRMM Advisory Board Meeting Overview February 4 – 5, 2021

- AHRMM Advisory Board Chair, Steve Kiewiet, called the meeting to order and welcomed the new and
 existing Advisory Board members to the video conference. Laura Kowalczyk read the Anti-Trust
 statement, and the Advisory Board members read the AHRMM Values.
- Mr. Kiewiet shared his thoughts on the Advisory Board's direction for 2021, noting that it is an exciting year to be on the AHRMM Advisory Board. He emphasized that now is the time to take advantage of the opportunity to improve AHRMM and its value to members, and in turn improve the health care supply chain field and health care as a whole. Because of the pandemic, attention is focused on the health care supply chain, and AHRMM should be viewed as the go-to organization for resources, education, expertise, etc. There is a specific need to educate the C-suite on supply chain. The Advisory Board should strategically advise AHRMM and the American Hospital Association (AHA) on solidifying our mission and elevating our education and advocacy efforts.
- The Advisory Board met in three breakout groups to discuss their ideas for Strategic Goal Setting and the path forward for 2021. After the groups returned and gave their report outs, several similar themes and priorities emerged, including:
 - o Continue to strengthen AHRMM's advocacy and presence
 - o SC Role in Home & Telehealth, Alternative Care
 - o Continuing to incorporate the voice of Young Professionals
 - Connecting with other professional organizations
 - Developing a career framework
 - Position statement on Health Equity in alignment with AHA
 - o Program Development; Education and Content
 - o Simplify the definition of CISC; create "the why" and "how" Infographic
- The second set of AHRMM Keys launched in January of 2021. The Standards Task Force is working to identify additional meaningful metrics that could be included in Phase 3. At their first meeting of the year, Mr. Kiewiet and the Education Committee discussed opportunities to build educational content around the AHRMM Keys. The task force will begin a pilot with a platform where organizations can voluntarily input data to be used for benchmarking against themselves as well as comparative data from other participating organizations. The initial pilot program would include approximately 20 organizations.
- Dale Woodin, Vice President, Professional Membership Groups, American Hospital Association (AHA), presented the 2021 Environmental Scan and identified three distinct phases identified during the early part of the pandemic: Relief, Recovery, and Rebuilding & Reimagining. He pointed out that AHRMM was featured in the report recognizing its involvement in the Dynamic Ventilator Reserve and 100 Million Mask Challenge. Mr. Woodin also discussed the COVID-19 Pathways to Recovery document, which was created as a resource for organizations in the early days of the pandemic. AHRMM was highlighted as a resource for considerations regarding supply chain, specifically the Non-Traditional Vendor Vetting program. Mr. Woodin commended AHRMM on their work throughout the pandemic.

Mr. Woodin shared AHA's priorities for 2021 including improving behavioral health, strengthening the work force and focusing on health equity, diversity and inclusion. He commented on the voice that



AHRMM can have going forward regarding sustainability, and asked the Advisory Board to consider the impact of climate change and how AHRMM can contribute by collaborating with other groups, such as ASHE, American Society for Health Care Engineering.

- Mike Schiller, Senior Director of Supply Chain, shared an overview of the current CQO Strategy Group activities, as well as the newly formed Health Care Learning Community (HCLC) that was created as a result of this year's CQO Summit. The HCLC was created with the same model as the Learning UDI Community (LUC). There will be two HCLC work groups that will provide deliverables, such as white papers, case studies, eLearning, podcasts or webcasts. The Advisory Board discussed ways to ensure that rural hospitals as well as ambulatory surgery centers and long term care facilities will have a voice in discussions that come out of the HCLC.
- The Advisory Board continued their conversation about Strategic Goal Setting. The Advisory Board
 went through an exercise to help categorize the topics they discussed the day before. The goals were
 categorized as High Impact or Low Impact, and Hard To Do or Easy To Do. The Advisory Board
 members will prioritize the items and work with staff on the resources available for the most critical
 initiatives.
- Mr. Schiller provided an update on COVID-19 activities. He shared information on current and potential shortages, including nitrile gloves, wipes, reagents, testing supplies, oxygen, and sterile water. Resources include COVID-19 email updates three times a week, the Non-Traditional Vendor Vetting program, which has over 400 approved vendors, and a Weekly PPE Trends and Availability Survey providing a quick snapshot and early signaling of shortages. The data is shared with AHA senior leadership, the FDA and the State Department. Mr. Schiller emphasized the need for increased participation in the survey.
- The next Advisory Board meeting is May 6 -7.
- Mr. Kiewiet thanked the Advisory Board for their participation the last two days and their involvement and support of AHRMM.