

Okay, in truth, the current process is reasonably good.



But it could be better





So what exactly is wrong with the current process?



INEFFICIENT AND EXPENSIVE

On average, it costs

\$39.91 & \$87.40

for every daily order process



for every weekly order process

INEFFICIENT AND EXPENSIVE

On average, it takes about

10 hours and 45 minutes to complete a daily order



But only about

1 hours and 45 minutes is actually spent working

INEFFICIENT AND EXPENSIVE

On average, it takes about

14 hours and 35 minutes to complete a weekly order



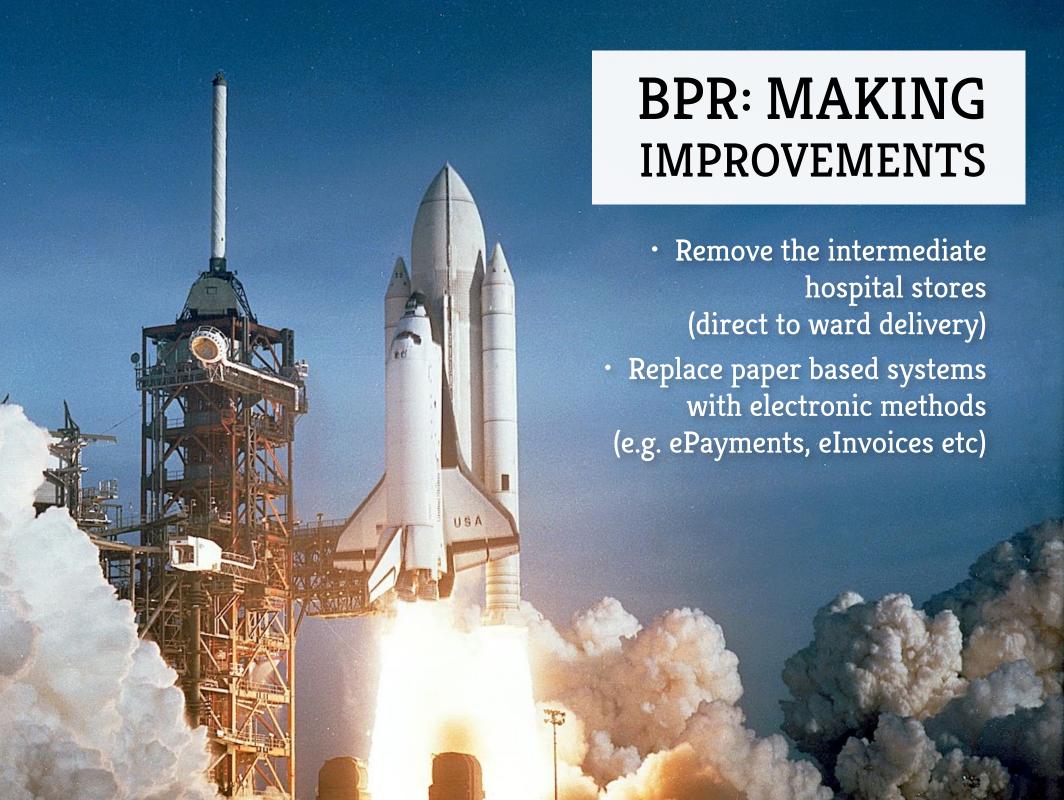
But only about

3 hours and 20 minutes is actually spent working

INEFFICIENT AND EXPENSIVE

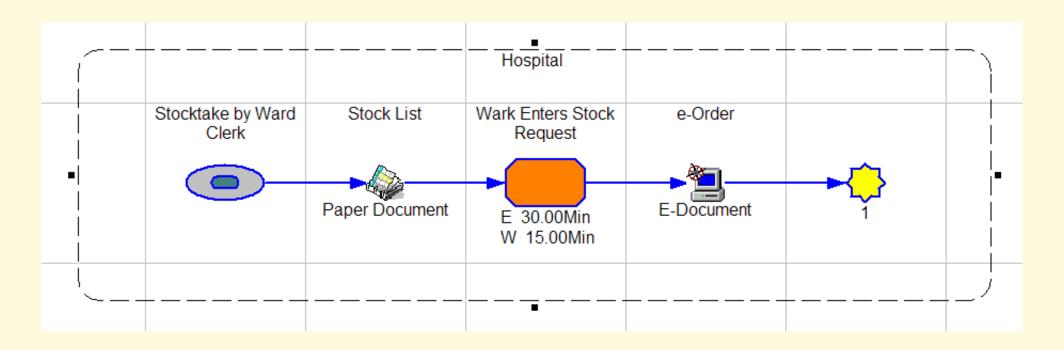
- There is a significant wait time to receive goods into wards if the item is out of stock
- Checking if an item is out of stock also takes time and is a manual process
- · Plus many more issues





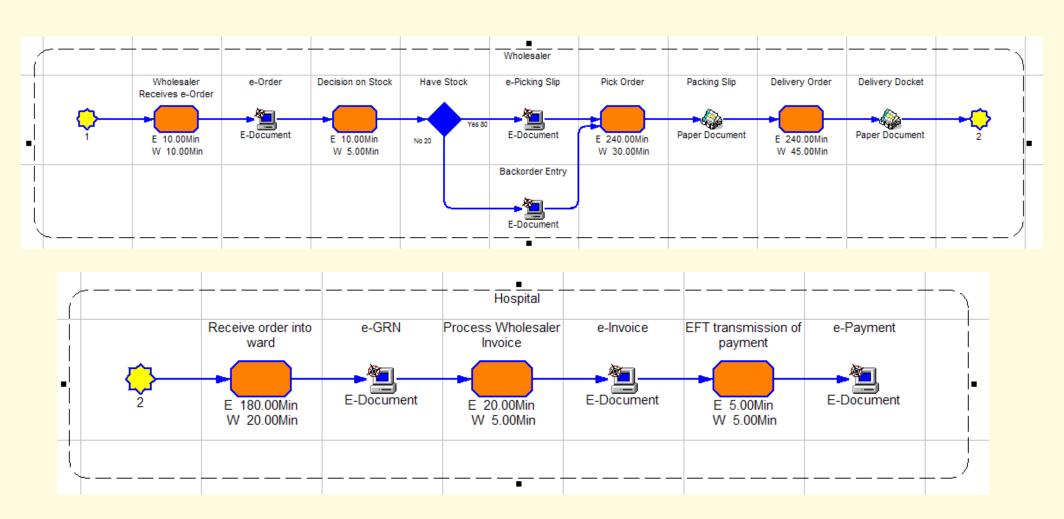
Stage 1

IMPROVEMENTS



Stage 1

IMPROVEMENTS





- Web Services is the recommended option
- It is a method of communication over the Internet
- Widely used, flexible, strong support, easy (and cheaper) to implement, bright future
- Suited for implementing an SOA



- What if a computerised agent makes orders automatically?
 - » Track orders/items with RFID tags
- · What happens now that there is no stores to 'buffer' orders?
 - » Batch orders at the wholesaler
- Could we automate payment with eOrders, ePickingSlips, eGRNs and RFID tracking?
 - » Yes, it is technically possible

Getting Real Fancy: More Improvements

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But a further, detailed study is recommended for RFID-related integations

Now for the

ADVANTAGES OF IMPROVING

- Significant cost reductions for both the hospitals and the wholesaler by eliminating steps in the supply chain
- Reduce inventory levels plus better understanding of ordering and stock
- Improved business relations between the hospital and suppliers

Now for the

ADVANTAGES OF IMPROVING

- Frees up more time for hospital staff to do more hospital related
- Improved strategic positioning for both the wholesaler and hospitals
- Future use in terms of integration, adaptation and implementing an SOA

Some Hurdles to Jump Through

Gateshead International Stadium

Gateshead International Stadium

- High-levels of coordination and planning are required to establish this integrated system
- Operations need changing and staff need to be trained (or new ones hired)
- New systems will need to be developed
- · The wholesaler needs to approve and be ready for the change

Hard-work and careful planning will yield big returns

But is this viable? How much will it cost?

Yes, the stage 1 improvements are viable

Yes, the stage 1 improvements are viable – if orders from many wards are batched

DEVELOPMENT COSTS

• **Development costs are high** — predicted to be in the order of hundreds of thousands



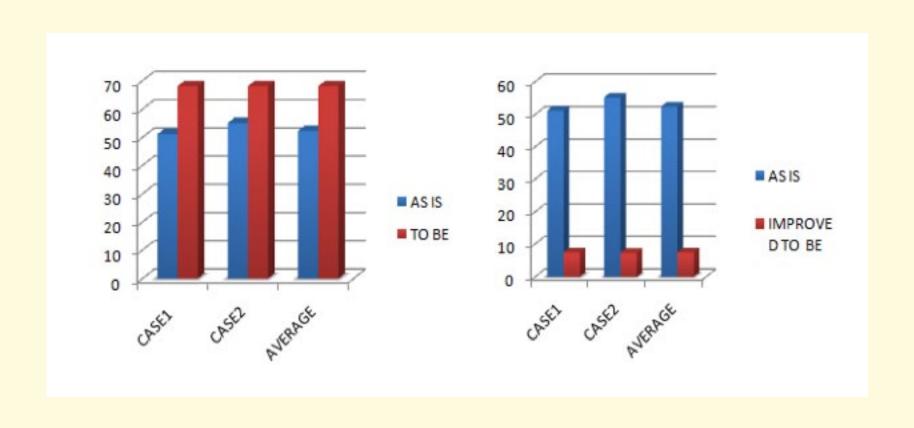
DEVELOPMENT COSTS

- **Development costs are high** predicted to be in the order of hundreds of thousands
- But returns are also high our improved model with batched orders suggests cost savings upward of 50% and significant daily time-to-order decreases

These metrics based on delivery to 10 wards. Savings depend on many factors including batching/dispatch.

As-Is vs To-Be

COMPARING IMPROVEMENTS





So all things considered,

IN CONCLUSION

- The current process is not perfect
- An eProcurement process will save time, cost and will create long-term benefits
- The improved process is a viable option that should not be ignored

