



LEARN HOW A LARGE, NON-PROFIT HOSPITAL MOVED AWAY FROM PAPER-BASED WORK ORDERS INTO THE DIGITAL WORLD WITH THE HELP OF TMS

This Accruent customer is the largest private, not-for-profit hospital in Arkansas. It is a nationally recognized, faith-based hospital. Its Little Rock campus has over 800 licensed beds and serves as the organization’s flagship hospital.

THE CHALLENGE

One primary concern for the hospital was working with a database that still operated via a manual, paper-based work order system.

As their CMMS Administrator explains, “I was hired by [the hospital] to elevate the TMS database to industry-leading standards. When I first arrived [...] there were many issues with the existing TMS database. I was tasked with organizing the data and transitioning the facilities work order system to a paperless system. This was the exciting part. Knowing what the database could be was my motivation.”

The first challenge was organization of the paper-based system for their preventive maintenance work orders that included inconsistencies and variations in:

- Procedures
- PM schedules
- Location hierarchy
- Capitalization and grammatical errors
- Nomenclature (for example, one user calling an asset a “refrigerator” while another referred to it as a “cooler”)

Because the administrator is a team of one for TMS administration at the hospital, these challenges took years to rectify.

THE SOLUTION

Standardizing In TMS

The first step was to fully familiarize himself with TMS. As the administrator explains, “After watching several training videos provided by Accruent, mastering the TMS Quick Convert tool, understanding mass edits, and reaching out to Accruent customer support several times, I finally started getting a handle on it.”

The second step was to review every PM (Preventive Maintenance) or PE (planned event) work order to evaluate each procedure. The administrator then had to re-write several procedures, reschedule PM’s/PE’s, and assign the proper technician to each schedule. At the same time, he took a full inventory to verify current assets. He then implemented Quick Close and trained the team on proper standardizations and to take ownership of completing their own work orders. The final portion of this phase was the installation of The Joint Commission PM Compliance Package for TMS, which automatically adjusts PM due dates based on Joint Commission standards.

He then worked to make sure that all relevant personnel could utilize the system effectively. To this end, he installed 57” monitors in several areas of the facilities departments for technicians to check their TMS work order dashboard queue. These monitors also displayed unassigned work orders for the second and third shifts. This eliminated the need for technicians to log into a desktop computer, then log into the TMS account, ultimately saving time and helping to improve technician productivity.



Moving to TMS OnLine

Additionally, once the move from TMS On-Premise to TMS OnLine was complete, the administrator implemented a paperless work order system and started utilizing the TMS pager system. He also purchased iPads and iPhones, and implemented a training class to help technicians become more familiar with the Sidekick mobile app.

Using the app in conjunction with the newly created technician specific dashboard tabs eased the transition to a paperless work order system for technicians. The hospital has also rolled out QR codes to breakrooms and nurses' stations to ease web requests submissions. Because they are free from the On-Premise restrictions, anyone from any mobile device can now submit a new work order request without having to log into a networked computer.

The hospital's facilities department is now proudly 99% paperless, with four other campus locations at or above 80%. Also, as a byproduct of going paperless, the CMMS administrator implemented Joint Commission virtual binders. The hospital has converted all five accredited campus locations to virtual binders, and this was achieved by creating work order, asset, and PM schedule custom forms to include Joint Commission EC/EP's. Self-built data sources and automatic email reports have helped gather the information for the binders to automate the process.

"At the time I was hired by [the hospital], there were only 6 segments in our TMS database. Today, we have 12 campus locations that use TMS. Each campus shares commonality of procedures, PM schedule intervals and nomenclature. This process – and this level of organization – have taken years to accomplish and it couldn't have been possible without the relationship [between the hospital] and Accruent."

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