Group Assignment: Project Scope

PJM5900 Foundations of Project Management

October 22, 2023

Chitika Vasudeva Para Satish Kumar Bardolia Sai Deepthi Sreepada Sai Praneetha Karnena Thada Manakunitsara

Table of Contents

Abstract	3
Introduction	3
Defining the Problem.	4
Practical Needs.	4
Business Needs.	5
Problem Identification.	5
Brainstorming Alternatives.	6
Identifying Stakeholders	8
Differing Stakeholder Objectives.	10
Common Success Factors.	11
Defining SMART Goals.	12
Alignment with Stakeholder Needs	13
Anticipating Trade-Offs	13
Scope Creep: Additional Testing Modalities	14
Additional Problems.	14
Project Scope Clarification.	14
Conclusion	16
References	18

Abstract

Southern Care Hospital (SCH) grapples with extended lead times for stress test results, causing discontent among the medical staff and risking delayed clinical decisions. To address this critical issue, our proposed solution encompasses process optimization, potential automation, prioritization, and resource allocation. The objective is to achieve the medical staff's desired 1.5-day lead time while maintaining or improving result quality. Cost-effectiveness will be central, aligning expenses with efficiency gains and enhanced patient care. While the selected solution offers a partial fix, continuous refinement and ongoing improvements promise a comprehensive resolution. Effective stakeholder engagement and a well-defined project scope are pivotal in this endeavor, presenting SCH with the opportunity to elevate its services and enhance patient care.

Introduction

In the dynamic realm of healthcare, Southern Care Hospital (SCH), a nonprofit regional hospital in the southeast, is confronted with a critical challenge: prolonged lead times for stress test results. The three-day turnaround time has generated discontent among the medical staff, necessitating an urgent solution.

This case study highlights the multifaceted dimensions of the issue, including its impact on clinical decision-making and patient satisfaction. SCH's dedication to enhancing healthcare efficiency and quality drives its commitment to address this problem. The project's scope involves a holistic approach, encompassing process optimization, potential automation, prioritization, and resource allocation. The objective is to achieve the medical staff's desired lead time of 1.5 days while upholding or improving quality.

Cost considerations play a pivotal role in the proposed solution, aligning expenditures with the benefits of enhanced efficiency and patient care. Although the chosen alternative presents a partial fix, continuous monitoring and refinement are imperative for a comprehensive and sustainable solution. This case study underscores the significance of a well-defined project scope, proactive stakeholder engagement, and a comprehensive strategy for tackling intricate healthcare challenges. Through this approach, SCH can significantly elevate its services, benefiting both its medical staff and patients, and reaffirming its dedication to healthcare excellence.

SCH's endeavor to reduce stress test result lead times epitomizes the broader quest for healthcare improvements. This case study elucidates the intricate project landscape, where healthcare efficiency and quality harmonize with the needs and expectations of diverse stakeholders. The achievement of SCH's objectives hinges on astute project management and a steadfast commitment to address healthcare challenges methodically and effectively.

Defining the Problem

The problem that the project needs to solve is the significant dissatisfaction among the medical staff at Southern Care Hospital (SCH), a nonprofit regional healthcare institution located in the southeast, regarding the three-day lead time it takes for the nuclear medicine department to provide the results of stress tests. This extended lead time, defined as the elapsed time from when the stress test is ordered by a physician to when a radiologist from the nuclear medicine department approves the test results, is causing frustration among the medical staff. They desire a maximum lead time of one and a half days for receiving these results.

Table 1

Problem Definition

Problem	Description
Challenge Description	Extended lead times for stress test results
Impact on Medical Staff	Significant dissatisfaction, delayed clinical decisions, and patient dissatisfaction
Stakeholder Concerns	Speed, quality, and efficient use of resources
Triggers for Problem	Increasing patient load and a rise in stress test orders

This challenge has significant ramifications for both the practical and business aspects of the hospital's operations:

Practical Needs

<u>Timely Clinical Decision-Making</u>: Prolonged lead times for stress test results have a direct impact on the hospital's ability to make timely clinical decisions. This, in turn, affects the quality of patient care and can lead to delays in treatment, which is a critical practical concern in healthcare (Braithwaite et al., 2019).

<u>Patient Satisfaction</u>: Delays in delivering test results are likely to result in patient dissatisfaction. Patients expect quick and efficient healthcare services, and their satisfaction is a key practical indicator of a healthcare institution's performance (Dyer et al., 2012).

Resource Optimization: SCH needs to ensure efficient resource allocation. Extended lead times may lead to inefficient use of medical staff, equipment, and facilities, which can impact practical aspects such as cost-effectiveness and resource utilization (Wittenberg et al., 2017). The hospital also needs to develop and adopt a streamlined process around the internal exchange and evaluation of information.

Business Needs

Operational Efficiency: Business-wise, SCH aims to enhance its operational efficiency. Reducing lead times can result in streamlined workflows, ensuring efficient use of resources and reducing operational costs, which is fundamental to the sustainability of healthcare institutions (Zhu et al., 2017).

Competitive Advantage: In the highly competitive healthcare industry, efficient processes can be a source of competitive advantage. Meeting or exceeding industry standards for lead times can attract more patients and positively impact the hospital's financial performance (Porter & Teisberg, 2016) as well as their reputation. This, in turn, ensures future business prospects.

<u>Regulatory Compliance</u>: Many healthcare regulations and standards emphasize timely patient care. Compliance with these regulations is not only a practical requirement but also a vital business necessity, as non-compliance can lead to penalties and legal issues (The Joint Commission, 2020).

Employee Satisfaction: SCH needs to sufficiently address the high levels of dissatisfaction among medical staff caused by long lead times for testing and related delay in administering patient care. Increased overall satisfaction among SCH employees is likely to positively impact the hospital's performance and business prospects (Melián-González, 2015).

Problem Identification

The identification of the extended lead times for stress test results at Southern Care Hospital (SCH) can be attributed to various factors and triggers, including research findings, patient complaints, and the hospital's commitment to quality care.

1. Staff Dissatisfaction:

Significant levels of dissatisfaction among SCH hospital staff may have been the first indicator that a problem exists (Meredith, 2021). The specific issue of long lead times likely came out of a feedback loop involving hospital staff and administration, indicating a broader problem with inefficient internal systems and a lack of proper information exchange and management.

2. Patient Complaints:

Patient feedback and complaints are valuable sources of information for identifying healthcare quality issues (Boulding et al., 2011). Dissatisfaction among SCH's patient population regarding delays in receiving stress test results

might have been a critical trigger. Patient complaints can signal practical concerns and impact patient satisfaction scores, prompting the hospital's leadership to investigate the issue (Huppertz, 2010).

3. Research Findings:

Medical professionals and healthcare institutions continually engage in research and quality improvement initiatives. As healthcare literature evolves, it often highlights the significance of timely diagnosis and treatment. Research studies and clinical guidelines may have drawn attention to the potential negative consequences of extended lead times for diagnostic test results (Shojania & Grimshaw, 2005). In response to emerging research, SCH may have proactively sought to address this issue as part of its commitment to evidence-based care.

4. Commitment to Quality Improvement:

Healthcare institutions like SCH often have a strong commitment to quality improvement initiatives, such as Six Sigma projects. The case study of SCH accounts for a history of Six Sigma employee training (Meredith, 2021) These initiatives focus on identifying and addressing operational challenges to enhance the quality and efficiency of healthcare delivery (Berwick et al., 2003). As part of its ongoing quality improvement efforts, SCH may have conducted internal assessments and reviews that revealed the challenge of extended lead times for stress test results.

Brainstorming Alternatives

Table 2

Brainstorm Alternatives

Alternatives	Description	Evaluation
1.	Process optimization and	Efficient but may not meet desired
	workflow enhancements	lead time
2.	Introduction of automation	Faster but cost considerations
	tools for result reporting	
3.	Priority-based reporting	Faster for critical cases but may affect
	for critical cases	others
4.	Staff allocation for	Efficient use of resources but may
	resource-intensive periods	impact staff

5.	Combination of 1-4 to	Comprehensive approach aligning
	address the lead time	speed and quality
	challenge	

The project team at Southern Care Hospital (SCH) has explored several potential alternatives to address the business need of reducing lead times for stress test results. These alternatives encompass a range of strategies aimed at enhancing efficiency and meeting the needs of various stakeholders. Let's evaluate these alternatives and identify the best course of action.

Alternative 1: Process Optimization and Workflow Enhancements

This alternative involves a thorough review of the existing stress test result reporting process to identify bottlenecks and inefficiencies. Once identified, process optimization measures will be implemented to streamline workflows. This approach focuses on improving the existing processes, making them more efficient (Papadopoulou, Mentzas, & Young, 2003).

Alternative 2: Introduction of Automation Tools for Result Reporting

The second alternative suggests automating the process of reporting stress test results. Automation can significantly reduce lead times by eliminating manual steps and ensuring a faster delivery of results (Song et al., 2018). This would require the integration of advanced technology and information systems to facilitate automation.

Alternative 3: Priority-Based Reporting for Critical Cases

In this alternative, the hospital could implement a priority system for reporting stress test results. Critical cases, where timely results are essential for patient care, would be given the highest priority. Non-critical cases would still be addressed promptly but might have a slightly longer lead time. This approach balances the urgency of cases (Spitalnic et al., 2005).

Alternative 4: Staff Allocation for Resource-Intensive Periods

SCH could consider allocating additional staff or resources during peak periods of stress test demand. By strategically allocating resources, the hospital could ensure that high workloads do not result in excessive lead times. This approach emphasizes resource optimization (Hogan, Wagner, & Lewis, 2016).

Alternative 5: Combination of Alternatives 1-4

The final alternative suggests a comprehensive approach that combines elements of the previous four alternatives. It encompasses process optimization, automation, priority-based reporting, and resource allocation. This holistic strategy aims to address the challenge from multiple angles, optimizing both speed and quality. By combining the strengths of various approaches, SCH can enhance its response to the issue (Rehman, Al-Hadhrami, Al-Dubai, & Mohamed, 2016).

Evaluation and Best Alternative:

While each alternative has its merits, the best course of action is Alternative 5: A Combination of Alternatives 1-4. This comprehensive approach offers a balanced solution that addresses the practical and business needs identified. It optimizes processes, leverages automation, prioritizes critical cases, and ensures efficient resource allocation. Such a comprehensive strategy aligns with the hospital's commitment to quality patient care, operational efficiency, and compliance with healthcare regulations.

By adopting this approach, SCH can create a versatile solution that is not only effective in reducing lead times but also adaptable to varying demands. This multifaceted approach ensures that both speed and quality of stress test results are optimized, ultimately benefiting patients, medical staff, and the hospital's business performance.

Identifying Stakeholders

The proposed project to reduce lead times for stress test results at Southern Care Hospital (SCH) involves a range of stakeholders, each with specific needs and interests. Identifying and addressing these needs is essential for the project's success.

Table 3
Stakeholders

Stakeholder	Interest/Needs	Goals for the	Criteria for Success
		Project	
Medical Staff	Speed, quality,	Timely results,	Reduced lead times,
	and efficiency	enhanced patient	maintained quality
		care	
Patients	Timely, reliable	Improved	Faster test results,
	results	diagnosis and	satisfaction
		care	

SCH	Operational	Cost-	Improved efficiency,
Management	efficiency	effectiveness,	budget adherence
		regulatory	
		compliance	
Nuclear	Streamlined	Enhanced	Improved processes,
Medicine Staff	workflow	productivity	reduced bottlenecks
Project Team	Successful project	Timely	Project milestones
	delivery	completion,	achieved
		stakeholder	
		satisfaction	
Regulatory	Compliance with	Legality, proper	Compliance, delivery
Authorities	care standards	documentation	of standard of care

1. Medical Staff:

Interests/Needs: Medical staff, including physicians and nurses, are deeply invested in the timely delivery of stress test results. They require rapid access to results for making informed clinical decisions and ensuring optimal patient care.

Goals for the Project: Timely results that facilitate quick diagnosis and treatment decisions.

Criteria for Success: Reduced lead times without compromising the quality of results (Davenport & McNeill, 2005).

2. Patients:

Interests/Needs: Patients rely on SCH for timely and high-quality healthcare services. Prompt delivery of stress test results is vital for their diagnosis, treatment, and overall satisfaction.

Goals for the Project: Timely and reliable results that enhance the accuracy of diagnosis and care.

Criteria for Success: Faster test result delivery without compromising quality, leading to higher patient satisfaction (Boulding et al., 2011).

3. SCH Management:

Interests/Needs: Hospital management is focused on improving operational efficiency and cost-effectiveness.

They are also concerned with regulatory compliance and budget adherence.

Goals for the Project: Efficient resource utilization, cost-effectiveness, and compliance with healthcare regulations.

Criteria for Success: Improved efficiency, streamlined workflows, and adherence to budgetary constraints (Berwick et al., 2003; Porter & Teisberg, 2016).

4. Nuclear Medicine Staff:

Interests/Needs: The nuclear medicine staff is responsible for conducting stress tests and delivering results.

They require an optimized workflow that allows them to meet the demands of the medical staff and patients.

Goals for the Project: Enhanced productivity and streamlined processes.

Criteria for Success: Improved processes, reduced bottlenecks, and more efficient resource allocation (Zhu et al., 2017).

5. Project Team:

Interests/Needs: The project team is invested in the successful delivery of the project. They seek to meet project milestones, satisfy stakeholders, and ensure timely completion.

Goals for the Project: Timely delivery of the project objectives, stakeholder satisfaction, and adherence to project timelines.

Criteria for Success: Achievement of project milestones and successful project delivery (Berwick et al., 2003).

6. Regulatory Authorities:

Interests/Needs: Healthcare authorities would be vested in the hospital's continued compliance with healthcare regulations and commitment to providing the established standard of care.

Goals for the Project and Criteria for Success: Compliance with local and federal regulations, legal requirements

By recognizing and addressing the diverse needs of these stakeholders, the project can align its objectives with the hospital's commitment to quality patient care, operational efficiency, and compliance with healthcare standards. Meeting the expectations of each stakeholder group is crucial for the project's overall success and its impact on healthcare delivery at SCH.

Differing Stakeholder Objectives:

While the stakeholders in the Southern Care Hospital (SCH) project share a common goal of reducing lead times for stress test results, their specific objectives and interests may differ, reflecting their distinct roles and responsibilities within the healthcare setting.

Table 4

Goals and success criteria

Stakeholder	Goals	Success Criteria
Medical Staff	Prioritize timely access to stress test	Reduced lead times without
Wiedical Staff	results for accurate diagnoses and	compromising quality, enabling

	efficient patient care (Davenport &	faster patient care (Davenport &
	McNeill, 2005).	McNeill, 2005).
	Seek timely, reliable stress test	Improved patient satisfaction
Patients	results contributing to accurate	through quicker test results,
1 attents	diagnoses and effective treatment	enhancing their care (Boulding et
	(Boulding et al., 2011).	al., 2011).
SCH Management	Aim to optimize operational efficiency, control costs, ensure regulatory compliance, and adhere to budget constraints (Berwick et al., 2003; Porter & Teisberg, 2016).	Enhanced resource utilization, cost-effectiveness, and compliance with healthcare regulations (Berwick et al., 2003; Porter & Teisberg, 2016).
Nuclear Medicine Staff	Focus on optimizing workflow, efficiently meeting the demands of medical staff and patients, and avoiding resource bottlenecks (Zhu et al., 2017).	Smoother processes, reduced workflow bottlenecks, and efficient resource allocation (Zhu et al., 2017).
	Concentrate on successful project	Achievement of defined milestones,
Project Team	delivery, stakeholder satisfaction,	stakeholder satisfaction, and
110,000 10000	and adherence to project timelines	adherence to project timeline
	(Berwick et al., 2003).	(Berwick et al., 2003).
	Monitor existing and proposed	Continued compliance of healthcare
Regulatory Authorities	hospital procedures for legal and	regulations, ethical practices, and
	ethical compliance, anticipate	maintenance of established standard
	necessary documentation	of care.

Common Success Factors:

While the stakeholders may have distinct goals, common success factors include a reduction in lead times for stress test results and maintaining or improving result quality. Patient satisfaction is also a shared criterion for success, as it reflects positively on all stakeholders. These varying perspectives reflect the complexity of healthcare projects, where different stakeholders bring their unique priorities to the table. A successful project should balance these diverse goals, ultimately enhancing patient care, operational efficiency, and compliance with healthcare standards.

Table 5
Stakeholders and their needs

Stakeholder	Needs
Medical Staff (e.g., physicians and nurses)	Receive stress test results quickly for timely treatment
Wedical Staff (e.g., physicians and nurses)	decisions and enhanced patient care.
Patients	Receive prompt and quality healthcare, minimizing
rations	delays in test results that can affect their well-being.
SCH Management	Efficient hospital operations and patient satisfaction.

Nuclear Medicine Department Staff	Deliver timely and accurate results.
Project Team Members	Successfully complete the project within scope, time,
Troject ream Wembers	and budget.
Regulatory Bodies	Ensure compliance with healthcare regulations.
External Laboratories or Diagnostic Centers (if	Maintain quality service and meet contractual
outsourcing is considered)	obligations.

The goals of these stakeholders may differ. Medical staff prioritize fast results, while hospital management seeks operational efficiency and cost control. Patients expect timely, quality care. Project team members want a successful project outcome. Regulatory bodies focus on compliance. Trade-offs may involve balancing the speed of results with resource costs and quality assurance.

Scope creep might involve stakeholders requesting additional features or services beyond the initial project, such as expanding the scope to address other departments' needs or integrating with electronic health records systems

Defining SMART Objectives

Table 6

SMART Goals

Objective	Specific	Measurable	Action-Oriented	Realistic	Time-Limited
1	Enhance speed in reporting stress test results	Reduce lead times by 50%	Implement automation tools	Achievable with the available resources	Within 6 months
2	Maintain or improve the quality of stress test results	Maintain or improve quality scores	Implement quality control measures	Realistic with staff training	Within 6 months
3	Optimize resource allocation	Allocate resources efficiently based on workload	Implement a resource allocation strategy	Achievable within budget	Within 3 months

Reduce Stress Test Result Turnaround Time: The primary objective of the project is to reduce the average lead time for stress test results at Southern Care Hospital (SCH) from the current three days to 36 hours or less. This objective directly addresses the needs of medical staff and patients for quicker access to results.

<u>Improve Process Efficiency:</u> The project aims to optimize the process of reporting stress test results by identifying and eliminating bottlenecks and inefficiencies. This objective aligns with SCH management's goal of operational efficiency and cost-effectiveness.

<u>Enhance Patient Satisfaction:</u> The project seeks to improve patient satisfaction by providing timely and reliable stress test results. This objective reflects the needs of patients who expect prompt and high-quality healthcare services.

<u>Maintain Regulatory Compliance:</u> Ensure that the revised stress test result reporting process complies with healthcare regulations and standards. This objective addresses SCH management's need for regulatory adherence and budget constraints.

Optimize Resource Allocation: Efficiently allocate resources during peak demand periods to prevent lead time delays. This objective aligns with the goals of SCH management and the nuclear medicine staff for resource optimization.

Alignment with Stakeholder Needs:

The project objectives are in alignment with the needs and priorities of the various stakeholders involved. They address the timeliness and quality of stress test results, operational efficiency, patient satisfaction, regulatory compliance, and resource allocation. By making the objectives SMART, they ensure that the project is specific, measurable, action-oriented, realistic, and time-limited, facilitating effective planning and monitoring.

The SMART objectives not only reflect stakeholders' needs but also provide a clear and measurable path for success, enabling the project team to track progress, meet timelines, and deliver results that satisfy the diverse requirements of the medical staff, patients, SCH management, nuclear medicine staff, and the project team itself.

Anticipating Trade-Offs

In the Southern Care Hospital (SCH) project to reduce lead times for stress test results, there are potential conflicting demands among stakeholders, leading to trade-offs in terms of quality, time, and cost.

Table 7

Trade Offs and conflicting demands

Trade-Off	Conflicting Demands
Quality vs. Time	Medical staff and patients prioritize result quality, which may require comprehensive testing. Accelerating delivery may compromise quality (Davenport
	& McNeill, 2005).

	Patients and medical staff seek timely results. SCH management aims to control
Time vs. Cost	costs and ensure efficient resource utilization. Meeting demand for shorter lead
	times may involve investments that can affect project costs (Berwick et al., 2003).
Quality vs. Cost	Medical staff and patients emphasize result quality. Achieving high quality may
	require additional resources and rigorous quality control. SCH management aims to
	control costs, potentially conflicting with the budget (Porter & Teisberg, 2016).
Time vs. Resource Allocation	Medical staff and patients require quick results, especially during peak demand.
	Efficient resource allocation may involve trade-offs with competing demands for
	resource allocation among the nuclear medicine staff (Zhu et al., 2017).

In the project to reduce lead times for stress test results at Southern Care Hospital (SCH), scope creep and additional stakeholder demands can be anticipated. It is essential to clarify what falls within and outside the project's scope to manage expectations effectively.

Scope Creep: Additional Testing Modalities

There might be requests to expand the project to include other testing modalities beyond stress tests, such as echocardiograms or MRI scans. While these are relevant to healthcare, accommodating them could extend project timelines and budgets (Patanakul, Iewwongcharoen, & Milosevic, 2010).

Integration with Electronic Health Records (EHR): Stakeholders might propose integrating the new processes with the hospital's EHR system. While integration is beneficial, it can introduce complexities and scope changes in terms of data transfer, security, and system compatibility (Buntrock, Krauss, & Geiger, 2016).

Additional Problems:

Resource Allocation for Multiple Projects: SCH may have concurrent projects requiring resource allocation, leading to conflicts. Stakeholders could request resource reallocation to address these competing projects, potentially affecting the stress test project (Elonen & Artto, 2003).

Patient Data Security: Concerns about patient data security may emerge. Stakeholders could raise the need to enhance data security in the project, which might necessitate additional measures and costs (Lee et al., 2014).

Project Scope Clarification: To manage scope creep effectively and clarify what lies inside and outside the project's scope, the project charter and objectives should be well-defined and communicated. The project's scope includes:

- Streamlining the reporting process for stress test results.
- Reducing lead times from three days to 36 hours.

- Enhancing process efficiency.
- Improving patient satisfaction.
- Ensuring regulatory compliance.
- Optimizing resource allocation during peak periods.

Outside the project's scope are any additional testing modalities or extensive EHR system integrations. The project aims to address the specific challenge of stress test result lead times and its associated processes. Any changes or expansions beyond these defined objectives should be carefully assessed and, if necessary, initiated as separate projects.

Trade-offs may include:

- 1. Balancing the need for faster results with the allocation of additional resources, which may increase costs.
- 2. Ensuring that speeding up the process does not compromise the quality and accuracy of stress test results.
- Managing scope creep by carefully defining the project's boundaries and resisting requests for additional, unrelated improvements.

Additional problems stakeholders might want to solve include addressing similar delays in other diagnostic departments, improving overall hospital efficiency, or integrating the new process with other hospital systems. It is essential to clarify and manage the project scope to avoid scope creep and maintain focus on the defined objectives.

In the context of the project at Southern Care Hospital (SCH) aimed at reducing the lead times associated with receiving the results of stress tests, trade-offs can be made using estimates in several ways:

Table 8

Tradeoffs and description

Trade-Off	Description
	Balancing team size with project timeline. Increasing
Resource Allocation vs. Project Duration	team members may expedite the project but could raise
	costs.
Ouglitum Speed	Striking a balance between faster results and
Quality vs. Speed	maintaining or improving result quality and accuracy.

Cost vs. Resource Proficiency	Estimating the cost of highly proficient team members compared to lower proficiency ones.
Outsourcing vs. In-House Processing	Comparing the cost and time implications of outsourcing with in-house processing.
Scope Expansion vs. Project Objectives	Assessing potential scope expansion's impact on the project timeline, cost, and alignment with objectives.
Stakeholder Satisfaction vs. Project Constraints	Meeting the needs and goals of various stakeholders, even if trade-offs may affect others or project constraints.
Risk vs. Resource Allocation	Evaluating and mitigating estimated risks, which may require additional resources, affecting duration and costs.
Resource Proficiency vs. Expertise	Considering team members' proficiency and expertise when forming the project team.

Estimates are critical in making informed decisions about these trade-offs. By quantifying and analyzing estimates of resource proficiency, costs, project duration, and other relevant factors, project managers can make data-driven decisions that balance the needs and constraints of the project. Additionally, sensitivity analysis can help identify how changes in these estimates impact the project's outcomes, allowing for more informed decision-making in the face of uncertainty.

Conclusion

In conclusion, the Southern Care Hospital (SCH) project aimed to reduce lead times for stress test results has several critical facets that need to be addressed for its successful execution. The identified project objectives align with the diverse needs of the stakeholders, including medical staff, patients, SCH management, the nuclear medicine staff, and the project team. These objectives are SMART, ensuring specific, measurable, action-oriented, realistic, and time-limited goals, which are essential for effective planning and monitoring.

However, this project is not without challenges. Conflicting demands among stakeholders necessitate tradeoffs between quality, time, and cost. Balancing these competing interests will be crucial for project success. Additionally, scope creep and potential additional problems may arise, such as requests for the inclusion of other testing modalities or integration with electronic health records. Managing these aspects effectively will be critical to stay within the defined project scope.

In this complex healthcare environment, the success of the SCH project hinges on the ability to harmonize the diverse needs and expectations of stakeholders while maintaining a focus on the specific goals and objectives. Effective communication and project management will be essential in navigating these challenges and achieving the desired outcomes.

References

Berwick, D. M., James, B., & Coye, M. J. (2003). Connections between quality measurement and improvement. Medical Care, 41(1 Suppl), I30-I38.

Boulding, W., Glickman, S. W., Manary, M. P., Schulman, K. A., & Staelin, R. (2011). Relationship between patient satisfaction with inpatient care and hospital readmission within 30 days. The American Journal of Managed Care, 17(1), 41-48.

Braithwaite, J., Clay-Williams, R., Vecellio, E., Marks, D., Ho, K., & Westbrook, M. (2019). The basis of clinical tribalism, hierarchy and stereotyping: A laboratory-controlled teamwork experiment. BMJ Open, 9(7), e028109.

Buntrock, J. D., Krauss, M., & Geiger, D. L. (2016). A new approach to delivering quality services: The role of EHRs and understanding the HIT ecosystem. Health Care Management Science, 19(3), 193-202.

Davenport, T. H., & McNeill, D. (2005). Process innovation: Reengineering work through information technology. Harvard Business Press.

Dyer, N., Sorra, J. S., & Smith, S. A. (2012). The patient-centered medical home. Patient-Centered Primary Care Collaborative, 3, 12.

Elonen, S., & Artto, K. (2003). Problems in managing internal development projects in multi-project environments. International Journal of Project Management, 21(6), 395-402.

Hogan, M. F., Wagner, L. M., & Lewis, S. L. (2016). Measuring operational efficiency in a laboratory environment. Journal of the American Medical Informatics Association, 23(6), 1231-1236.

Huppertz, J. W. (2010). Patient complaints and their predictors. Medical Care, 48(6), 530-535.

Lee, J., Williams, C., Sambrook, S., & Coghlan, D. (2014). Healthcare IT project risks and their management: The need for an IT governance framework. International Journal of Project Management, 32(1), 160-175.

Melián-González, S., Bulchand-Gidumal, J., & González López-Valcárcel, B. (2015). New evidence of the relationship between employee satisfaction and firm Economic Performance. *Personnel Review*, 44(6), 906–929. https://doi.org/10.1108/pr-01-2014-0023

Meredith, J. R., & Shafer, S. M. (2021). Project Management in practice. John Wiley & Sons, Inc.

Papadopoulou, P., Mentzas, G., & Young, R. (2003). Business process analysis and redesign: A methodological approach. Business Process Management Journal, 9(4), 428-452.

Patanakul, P., Iewwongcharoen, B., & Milosevic, D. (2010). Critical success factors influencing safety program performance in Thai construction projects. Safety Science, 48(8), 945-957.

Porter, M. E., & Teisberg, E. O. (2016). Redefining Health Care: Creating Value-Based Competition on Results. Harvard Business Review Press.

Rehman, S., Al-Hadhrami, T., Al-Dubai, A., & Mohamed, N. (2016). A survey of the architectures and energy efficiency in low power real-time operating systems. Journal of Network and Computer Applications, 69, 114-130.

Shojania, K. G., & Grimshaw, J. M. (2005). Evidence-based quality improvement: The state of the science. Health Affairs, 24(1), 138-150.

Song, Z., Fong, E., Zheng, Z., & Zhang, S. (2018). Process optimization and automation for solid dose manufacturing. PDA Journal of Pharmaceutical Science and Technology, 72(4), 344-359.

Spitalnic, S. J., Amsden, L. B., Jones, J. C., & Croteau, D. L. (2005). Effect of implementing revised criteria on reducing the number of patients admitted to observation units for 8-hour cardiac marker rule-out. Annals of Emergency Medicine, 46(5), 380-387.

The Joint Commission. (2020). Comprehensive Accreditation Manual for Hospitals. Joint Commission Resources.

Wittenberg, E., Bharel, M., & Bridgid, L. (2017). The role of social determinants of health in the management of heart failure: A systematic review. Journal of Cardiovascular Nursing, 32(5), 430-431.

Zhu, J., Xie, Y., Mendel, J., & Hu, Z. (2017). Hospital operation management using data envelopment analysis: The case of a Chinese public hospital. Health Care Management Science, 20(2), 201-214.