Exercise 2.10
Esteban Torres

# Presentation Outline – "Preparing for Influenza Season: Staffing Strategy Based on Flu Trends"

## 1. Introduction

- Greet the stakeholders
- State the purpose: optimizing staffing based on influenza trends
- Briefly introduce the data and hypothesis

## 2. Key Findings from Data Analysis

- Seasonal flu death trends
- Impact of age on flu mortality

## 3. Staffing Recommendations

- Peak staffing months and regions
- Recommendations by age-risk groups and hospital admissions
- Adjustments based on vaccination gaps

## 4. Next Steps

- Gathering stakeholder feedback
- Finalizing the plan
- Implementing staffing adjustments for the upcoming season

## 5. Conclusion

- Reiterate importance of data-driven staffing
- Invite questions and feedback

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# Presentation Script

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### Intro

"Hello, everyone. Thank you for joining me. My name is Esteban Torres, and today, I'll be walking you through our data-driven project plan for staffing strategies ahead of the upcoming influenza season."

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### Project Purpose

"The goal of this project is simple but vital: to help medical agencies and hospitals optimize their staffing in advance — using past flu trends and demographic data — to ensure better patient outcomes and reduce the strain on medical teams."

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### Hypotheses Driving the Analysis

"Our analysis was driven by the hypothesis, if a person's age is >65 then they will be more likely to pass away from the flu than a person <65 years of age.

We gathered data on mortality from a census, split the population into age groups, and viewed flu shot rates from 2009 to 2017 in order to test this hypothesis."

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### Key Findings

"Here's what the data revealed:

- Flu deaths tend to peak in the winter months, especially January and February.
- Older age groups consistently show higher mortality rates.

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### Staffing Recommendations

"Based on these insights, we recommend:

- Increasing frontline staff availability during peak months, especially January and February, but realistically November through the end of March.

- Ensure adequate coverage in facilities that serve vulnerable populations — especially elderly patients and those with chronic conditions."
- More medical staff should be allocated to California, New York, Texas, and Florida.

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**Next Steps & Deliverables**

"Next, we'll finalize the staffing plan based on stakeholder feedback. Alongside this verbal presentation, you'll receive:

- Determine how to allocate additional medical staff within each state based on vulnerable populations.
- Figure preventative measures for future years.
- A written report with detailed staffing recommendations and sources,

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**Final Thoughts**

"Strategic planning based on real data helps us not only manage resources better but ultimately save lives. I welcome your feedback and look forward to refining our plan with your input."

"Thank you for your time — I'm happy to take any questions or suggestions now."

## Data Limitations and Metrics

- Were there any limitations that prevented you from conducting an analysis? *It didn't prevent me from conducting the analysis but it did skew the data and would help having it in terms of accuracy.*
- Did your data have any limitations that may have affected your results? Consider this in terms of data quality and data bias.

  *I believe the biggest limitation was gather information on underage people as they are protected and therefore their information was suppressed by the CDC.*
- How might you monitor the impact of the staffing changes you recommended?

I can monitor the impact by gathering the data of the year in question and analyzing it for differences. Preferably there is a downward trend in the CDC mortality reports.

We could also conduct a survey of the staff to get their initial thoughts on the staffing burden.

- Is there a metric that could be used for monitoring this impact?

  A survey score or responses from staff and hospitals.

Links:

https://vimeo.com/1077429456?share=copy#t=0

https://public.tableau.com/shared/FKT65XC28?:display_count=n&:origin=viz_share_link