

# Executive Summary: Healthcare Operations Analytics

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**Project:** Laboratory Workflow Optimization & Cost Reduction

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## 1. Problem Statement

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The clinical laboratory is currently facing operational inefficiencies characterized by inconsistent Turnaround Times (TAT), particularly during morning peak hours (06:00 - 09:00). These delays directly impact patient discharge times and increase length of stay (LOS). Additionally, sporadic analyzer downtime and QC failures are contributing to workflow bottlenecks, leading to increased overtime costs and staff burnout.

## 2. Key Findings & Insights

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### Turnaround Time (TAT) Analysis

- **Morning Bottleneck:** The average TAT for STAT specimens spikes to **>75 minutes** between 07:00 and 09:00, exceeding the 60-minute service level agreement (SLA).
- **Test Type Variance:** Coagulation tests (PT/INR) show the highest variability in TAT, correlating with specific analyzer maintenance schedules.
- **Impact:** 15% of routine morning draws are delayed beyond noon, affecting physician rounding decisions.

### Operational Risks

- **Analyzer Reliability:** The **Sysmex XN-3000 (Hematology)** accounts for 40% of all recorded downtime minutes, yet handles the highest volume of tests. This single point of failure represents a critical operational risk.

- **QC Failure Rate:** A 5% QC failure rate was observed on Chemistry analyzers during the night shift, necessitating re-runs that delay morning start-up by an average of 30 minutes.

## Staffing vs. Workload Mismatch

- **Shift Imbalance:** The night shift is understaffed relative to the volume of “early morning run” specimens arriving at 05:00. Staffing levels remain static while volume surges by 300% during this window.

## 3. Strategic Recommendations

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### Immediate Actions (0-30 Days)

1. **Shift Staggering:** Adjust night shift end-times from 07:00 to 08:00 or introduce a “mid-shift” (04:00 - 12:00) to cover the morning volume surge.
2. **QC Scheduling:** Move routine maintenance and QC for Chemistry analyzers to 03:00 (low volume) instead of 06:00 to prevent start-up delays.

### Long-Term Improvements (1-6 Months)

1. **Preventive Maintenance:** Implement a predictive maintenance schedule for the Sysmex XN-3000 based on the identified downtime patterns to prevent unplanned outages.
2. **Auto-Verification:** Increase auto-verification rules for normal CBCs and CMPs to reduce manual review time by an estimated 20%.

## 4. Financial Impact Estimate

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Implementing these changes is projected to reduce average STAT TAT by **15 minutes**. According to hospital benchmarks, reducing lab TAT by this margin can decrease Emergency Department LOS by up to **20 minutes per patient**, potentially saving the hospital **\$150,000 annually** in operational efficiencies and improved patient throughput.