# Managing Laboratories in a Health System

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# Johns Hopkins Medicine

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**Johns Hopkins Hospital, Baltimore**

**Johns Hopkins Bayview Med. Ctr., Baltimore**

**Howard County Genl. Hosp., Columbia**

**Suburban Hospital, Bethesda**

**Sibley Memorial Hospital, Washington, D.C.**

**All Children's Hospital, St. Petersburg**

# Why Should We Work Together?

- Your brand is already there.
- Ensure the brand is maintained.
  - Quality
  - Financial efficiency (capital)
- Financial negotiation
- IT Economics

# Identify Your Laboratory Role

- Laboratory health system leader
- Site laboratory manager
- Pathologist / faculty member
- Site participant (IT, QA, section lead, etc.)

All need to participate.

# Getting Started – Leadership Interviews

- What are senior central management goals?

  Save Money / Improve Quality

- What are senior local management goals?

  Save Money / Improve Quality

# What Are Local Management Issues?

- Human Resources
  - Recruitment / retention
- Finance
  - Budget reductions / Capital availability
- Information Technology
  - Response to both internal/external customers

# What Are Local Management Issues?

**(Continued)**

- Purchasing
  - Vendor negotiations
- Quality improvement
  - Regulatory / Service Improvement
- Compliance
  - Revenue / Billing

# Template for Introductions

## Day One

- Site interviews (Laboratory)
  - Managers
  - Pathologists
  - Supervisors
- Laboratory tour
- Lunch presentation:

  *Who is Johns Hopkins Pathology?*
- What are your issues?

# Template for Introductions

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## Day Two

- External Interviews:
  - Chief Operating Officer
  - Quality Management
  - Human Resources
  - Finance
  - Information Technology
  - Purchasing
- Exit Summary / Feedback
  - Goals

# General Goals / Projects

- Quality
- Site consolidation by discipline
- Vendor standardization
- IT synchronization

# Quality Management Process

- Quality Leader
- Quality Teams
  - Regulatory
  - Technical discipline
- System Site Surveys
  - Pre-CAP Inspection review
- CAP Survey Team Enhancement
- Outcomes Comparisons
  - TATs, Lost Specimens, Critical Action Value Callbacks

# Test Site Consolidation

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- Survey on-site needs
- Identify space availability
- Focus on areas of longer TAT:
  - Microbiology
  - Histology
  - Cytology
  - Reference Blood Bank
- Shared local responsibilities
- Regional hubs vs. centralization

# Test Centralization

Referral tests are first target.

Focus on areas of longer TAT and high complexity

- Acid-fast Bacillus
- Mycology
- Genetics / Molecular Testing
- Special Coagulation
- Specialized Immunology
- Flow Cytometry

# Challenges to Test Consolidation

- IT, IT, and IT
  - Interfaces vs. multi-site IT
  - Specimen tracking (lost specimens)
  - IT downtime protocols
- Specimen Transportation Schedules
  - Histology
  - A.M. Bloods
  - Microbiology Cultures
- Specimen Volume

# Vendor Standardization

- Capital planning (5-7 year process)
- Capital availability by site
- Vendor vs. Model (size)
- Specific local needs:
    - Patient population
    - Technologist strengths

# Financial Score Card (in Thousands)

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| | J. Hopkins | Bayview | Howard Co. | Suburban | Sibley |
|---|---|---|---|---|---|
| Blood Vendor | $561 | $70 | $42 | $341 | $50 |
| Platelet Wastage | | | $170 | | |
| Microbiology | $60 | $20 | | $20 | $8 |
| Coagulation | | | $4 | $100 | $25 |
| Reference Lab | $1,516 | $153 | $101 | $18 | $11 |
| Chemistry | $248 | | $31 | $100 | |
| Hematology | | | $26 | $100 | $25 |
| Histology | | | | $140 | |
| POCT | $73 | $15 | $30 | ____ | $10 |
| Total | $2,458 | $258 | $404 | $819 | $129 |

# Information Systems Goal

- Same LIS Everywhere:
  - Lab
  - Blood Bank
  - AP
- Reference Range Standardization
- HIS Orders Standardization
- Critical Action Values:
  - Inpatients
  - Outpatients
  - Emergency Rooms
  - Oncology, etc.

# Inter-Entity Contracts

- Define responsibilities
- Define services
- Define everyone's role:
  - Pathologists
  - Managers
  - Technical Consultants
- Include performance standards
- Fees associated with management and leadership
- Keep up-to-date with practice

# Day-to-Day Management

- **Maintain communication:**

  Conference calls
  Videoconferencing
  Skype (one on one)
  Email – Ugh!
  Blogs / Website / SharePoint Sites

- **Establish mutual timelines:**

  Three-year plan
  IT Rollouts / Upgrades
  Capital needs / Implementation
  Consolidations / Workflow adjustments

# Day-to-Day Management

- Accessibility:

  Site Visits – Labs, Pathologists, Lab Leadership

  *(I wear a different pair of shoes for every site.)*

- Solicit feedback from customers outside Laboratory:

  Physician Users, VP's, Nurses

# Celebrate Success!

- IT Go-Lives
- Equipment Changes
- Departmental Gifts – Lab Week
- Holidays

  (It doesn't have to be just Christmas anymore.)
- Promotions
- Retirements
- Quality Assurance Outcomes

(Find the "party person" and support him or her.)

# Questions??