

Resource Scheduling through Resource-Aware Simulation of Emergency Departments

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Efficient Resource Use: Important but Hard

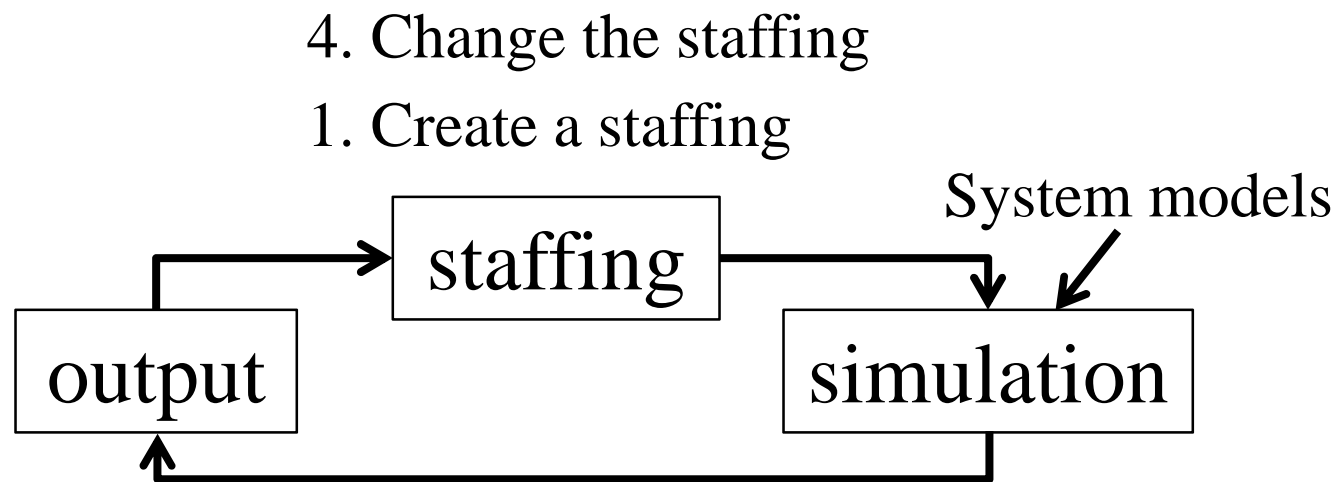
- Organizations need to be efficient
 - Requires efficient use of resources
- But their resources are very diverse
 - Humans
 - Machines
 - Software
 - Materials
- And subject to many complex constraints
 - Time
 - Budget
 - Domain-specific policies

Resource Scheduling Problem

- Assigning resources to tasks
 - Subject to constraints
 - Aimed at optimizing an objective function
 - NP-hard
- Computational complexity
 - Exponential search space in the number of the resources
 - No efficient search to find optimal solutions
- Dynamic context
 - Environment change
 - Resource capability change

Discrete-Event Simulation

- Decision making process
- How do we guide staffing decisions?



3. See what happens

2. Run simulation

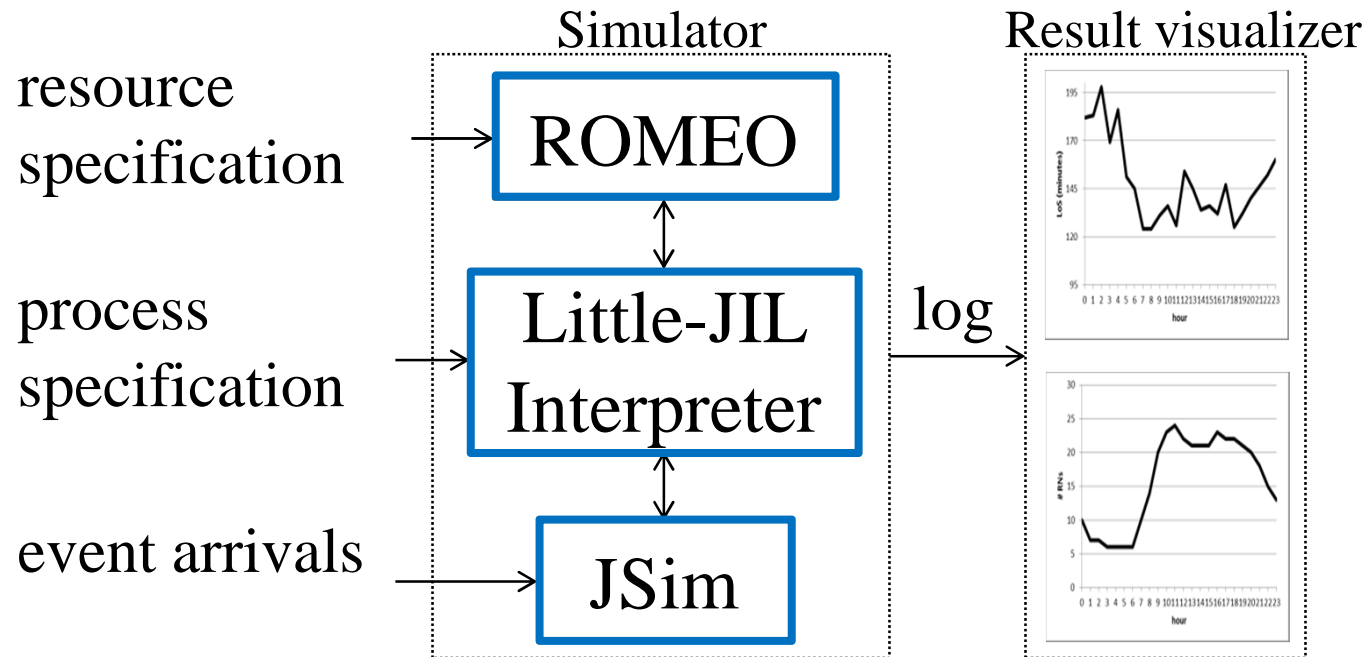
6. See the effects

5. Run simulation

Commercial Discrete-Event Simulators

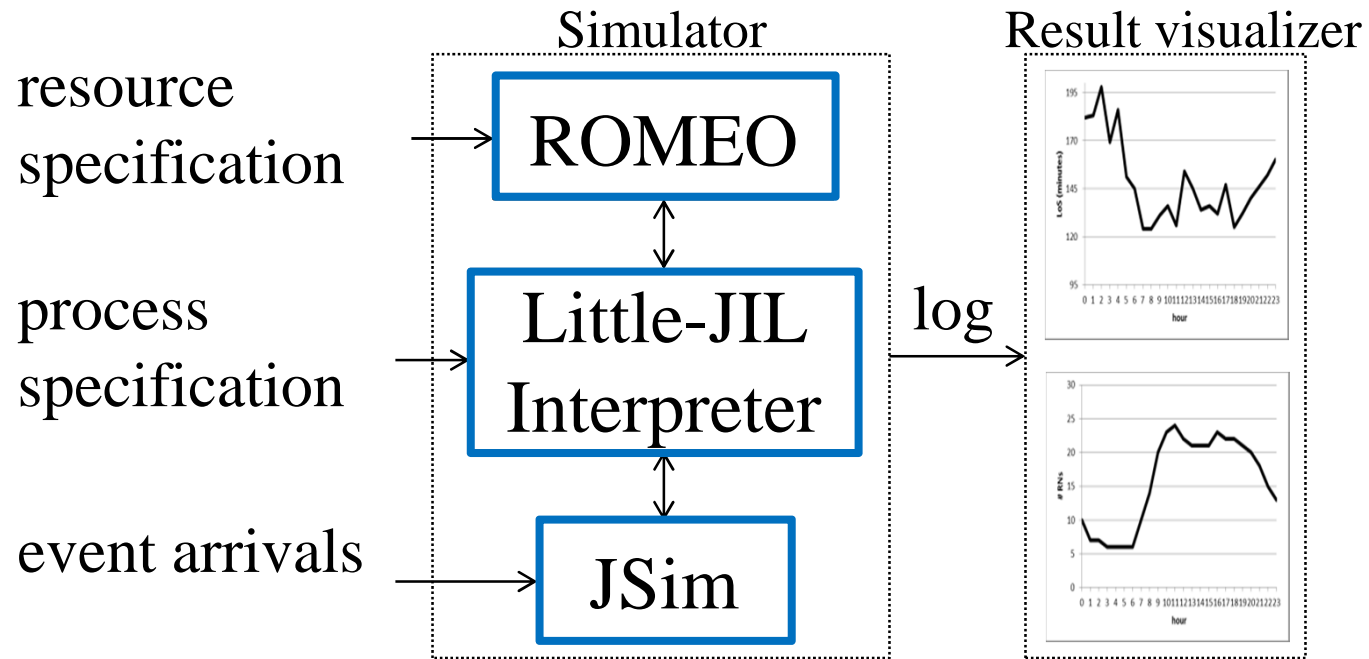
- Arena by Rockwell Automation
 - Process control flow
 - Queuing model
- SimEvents by MathWorks
 - Hybrid system
 - Discrete and continuous dynamics
- Our Approach
 - Process model
 - Resource model

Process and Resource Models



- Separation of concerns
- Example applications
 - Software development
 - Product quality, time to market, development cost
 - Medical processes
 - Patient care quality, waiting time, net revenue

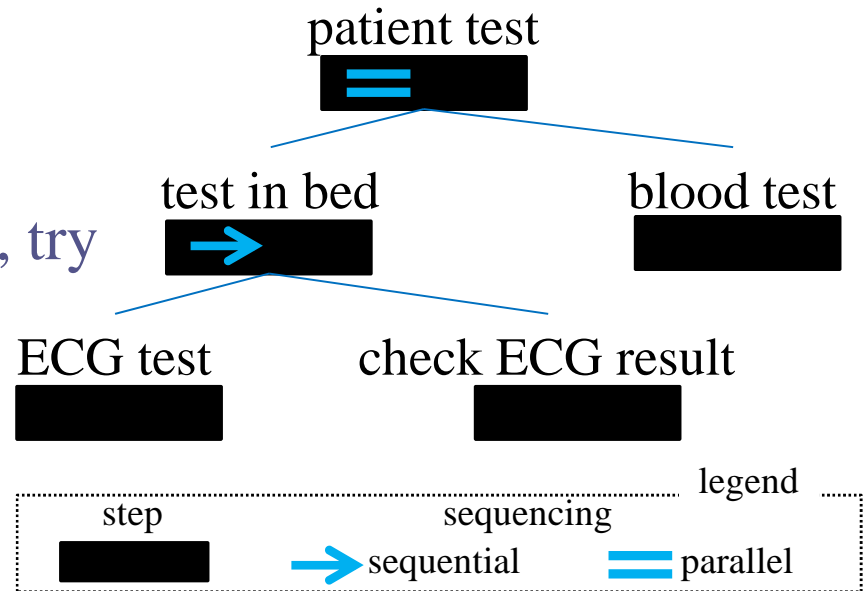
Separation of the Resource Concerns



- Decrease system description complexity
- Flexible constraints change
- Easy tracking of the resource usages

Little-JIL Language

- Rich semantics
 - Sequencing
 - sequential, parallel, choice, try
 - Exception handling
 - Pre/post requisites



- Effective in specifying resource requests
 - Step Request
 - ECG test RN(registered nurse), ECG
 - check ECG result MD(medical doctor)

Resource Specification

- Type
 - Attributes
 - Capacity
 - Capabilities
 - Constraints
 - Availability
 - Policy
- Instance

[Resource type]
Type: medical doctor

Attributes:
name, location

Capacity:
patients

Capability:
patient care steps

Constraints:
working hours
patient care policy

[Instances]
Phil, David, John

[Instance: Phil]

Attributes:
name: Philip L. Henneman
location: main track 1st floor

Capacity: 4

Capability: check ECG result, ...

Constraints:
working hours: 9AM-5PM
sickest patient first

```
<instance type="medical doctor" id="3" set_attribute="name" value="John" />  
<instance type="medical doctor" id="3" set_attribute="location" value="main-track" />  
<instance type="medical doctor" id="3" set_attribute="shift" value="11PM-7AM" />
```

Evaluation

- Using the simulator to answer resource-specific questions
 - Challenges in Emergency department modeling
 - Experiments

Challenges in Emergency Department Modeling

- Six acuity levels
 - Different treatment processes, protocols about priorities
- Staffing
 - Shift representation
- Same doctor, nurse constraints
 - Domain specific patient care constraint
- Fast & main tracks
 - Independent resources
- Handoff
 - Fast track closing, shift ending

Experimental Questions

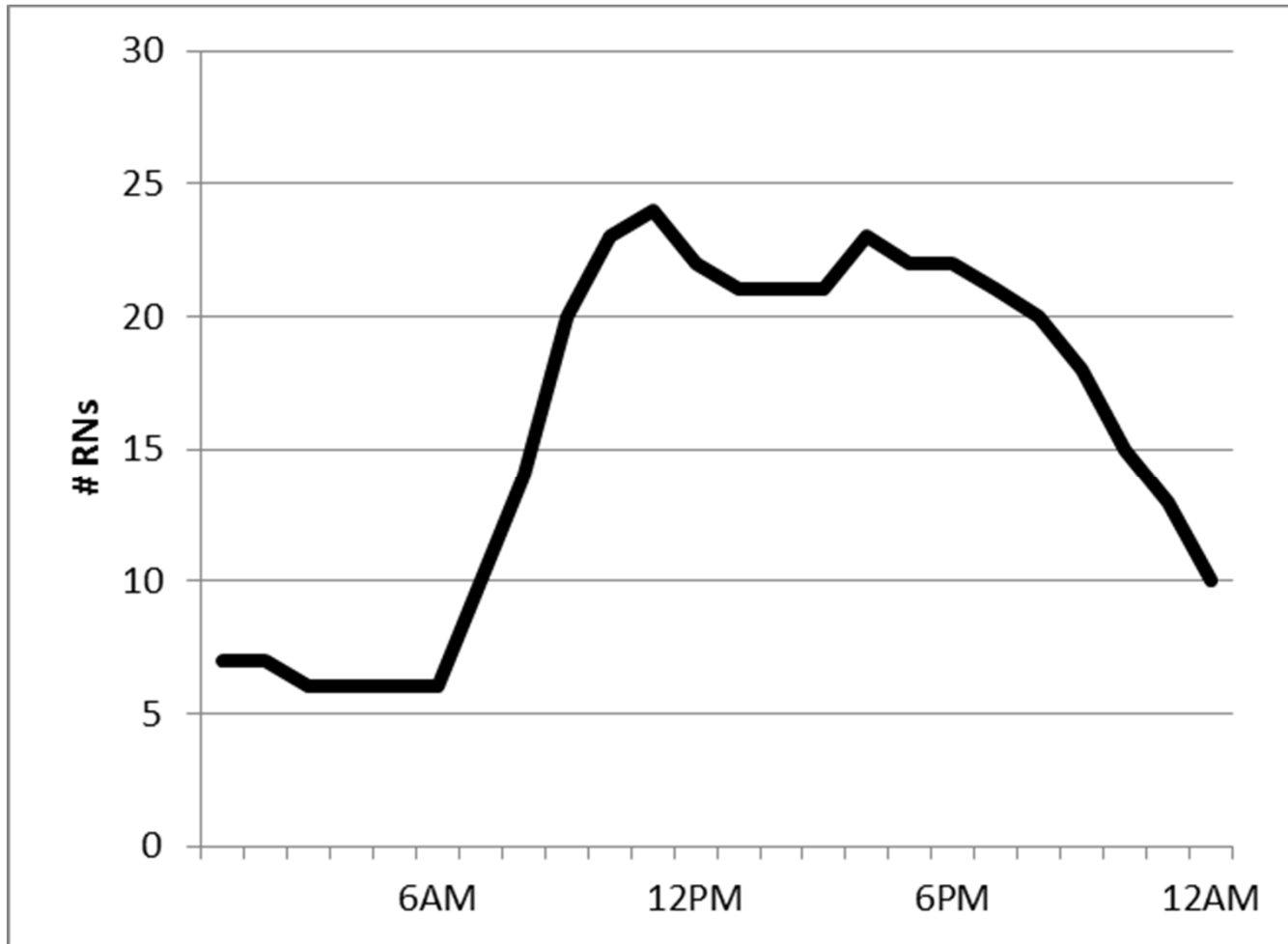
- How do we find an efficient staffing?
 - Example: registered nurse
- How do we decide the number of non-human resources?
 - Example: bed, x-ray room

How do we find an efficient staffing?

- Emergency department
 - Objective
 - manage average patient length of stay
 - How to schedule staff to satisfy the objective
- Resource-aware discrete-event simulation
 - Emergency department model
 - Baystate medical center, MA
 - Objective
 - average patient length of stay must be between 15% and 30% of the minimum
 - Design a staffing satisfying the objective
 - Analyze the effects of the staffing

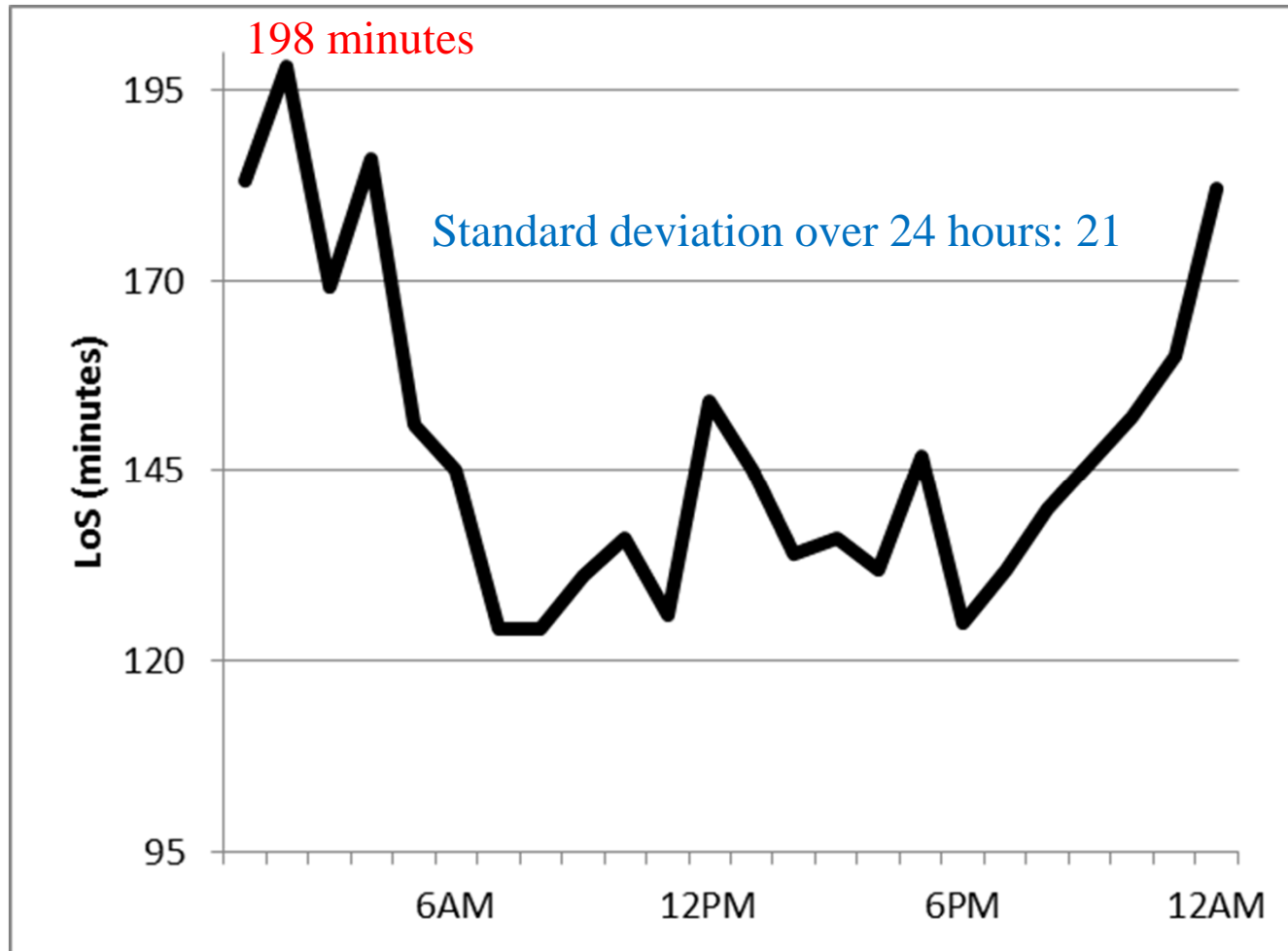
Design a staffing satisfying the objective

- Input: patient arrivals, objective function



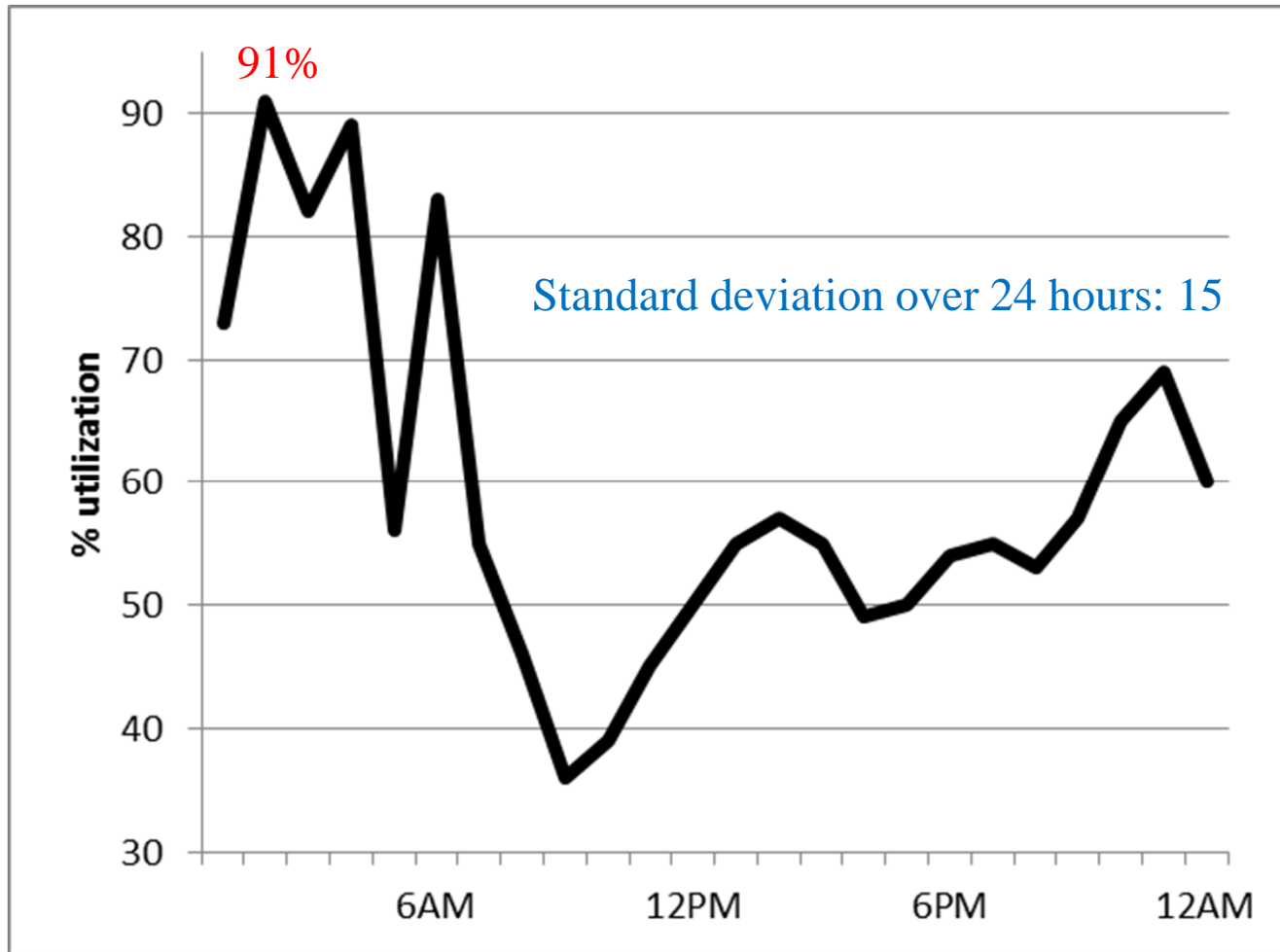
Analyze the effects of the staffing

- Input: registered nurse staffing



Analyze the effects of the staffing

- Input: registered nurse staffing

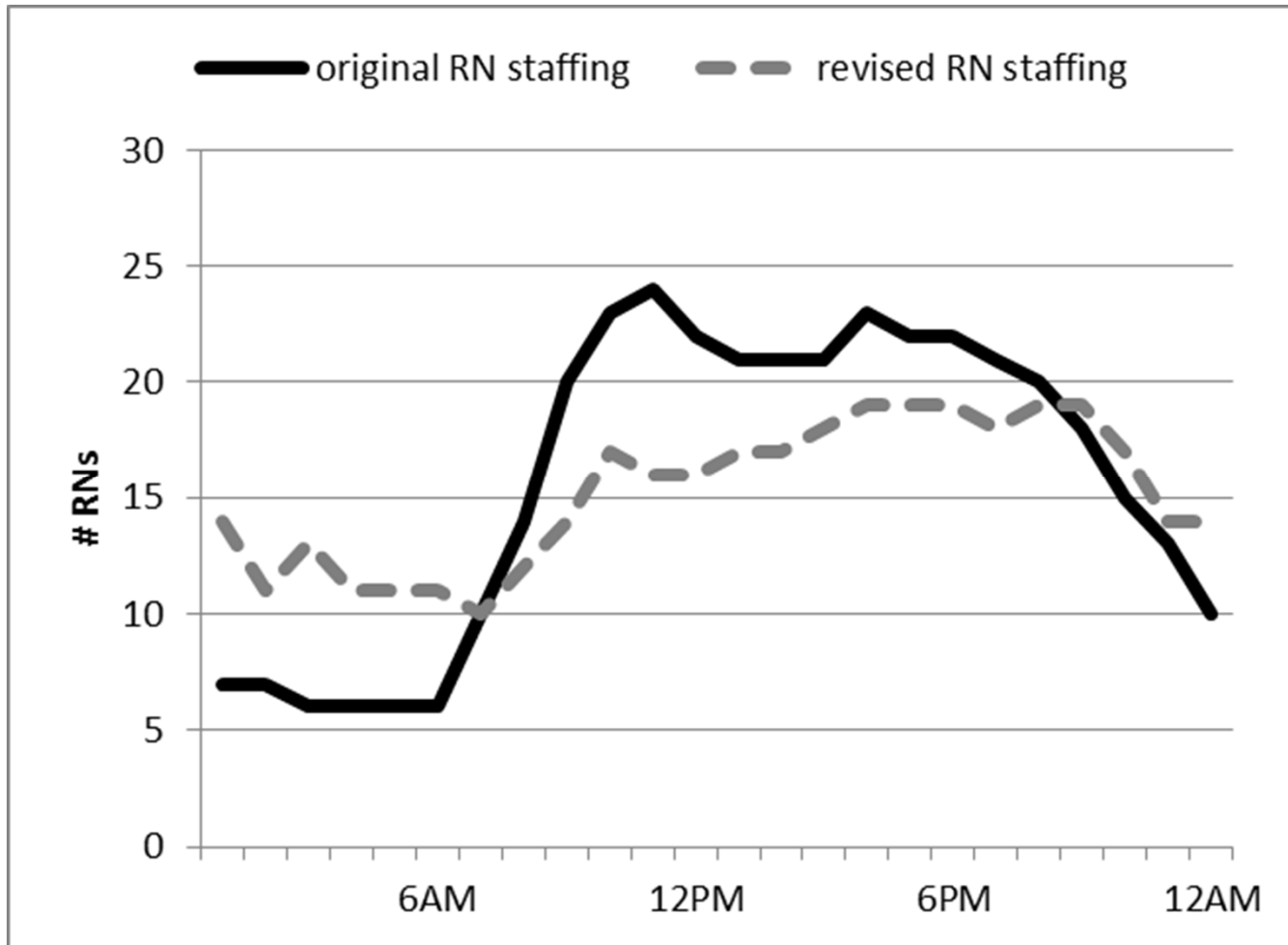


Observations about staffing results

- Satisfactory staffing for the objective function
- Unsatisfactory length of stay and utilization distributions
- Can we find a better staffing?
 - Objectives
 - Average patient length of stay must be between 15% and 30% of the minimum
 - Minimizing the standard deviation of the outputs

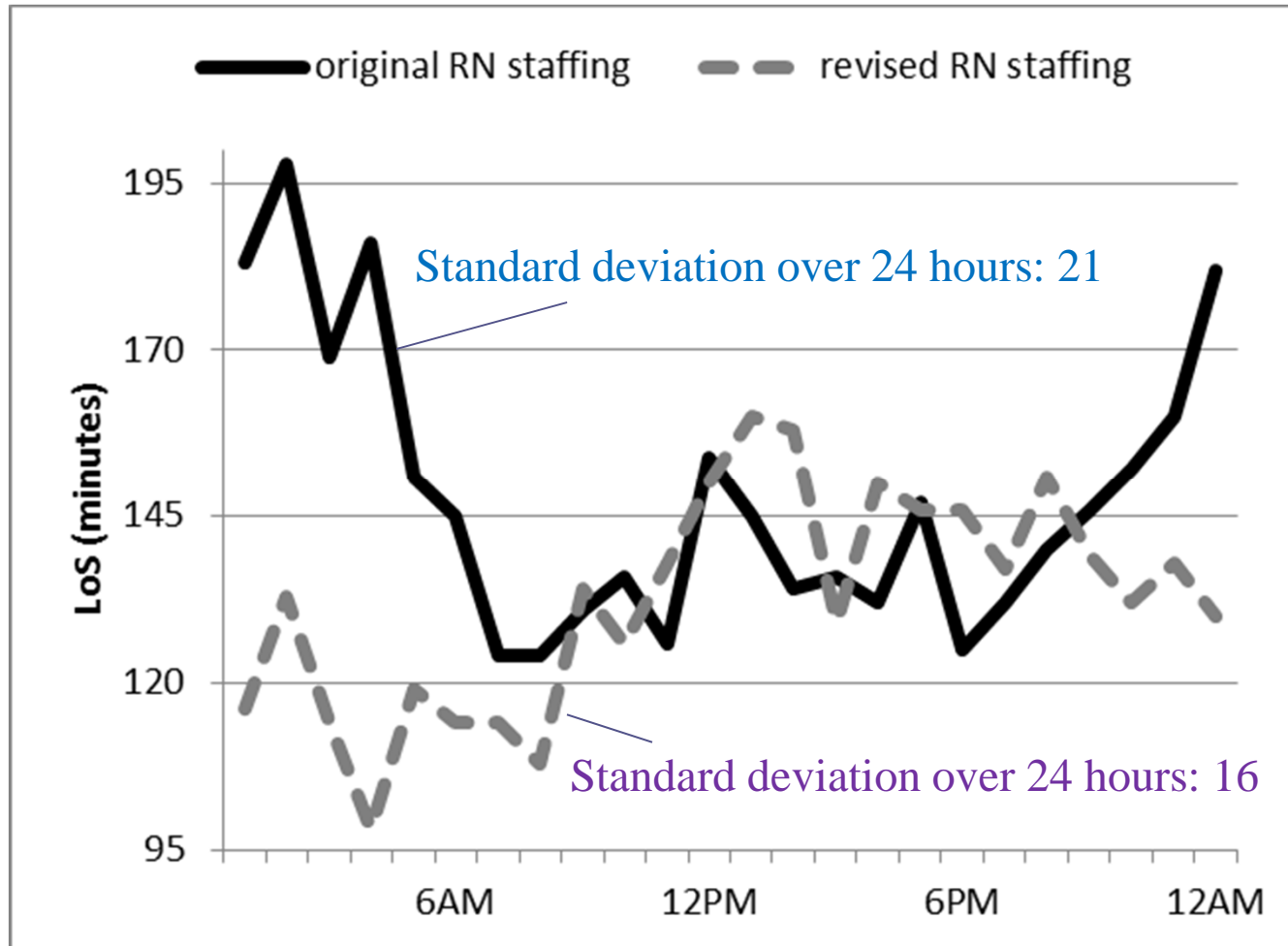
Design a staffing satisfying the objectives

- Input: patient arrivals, objectives



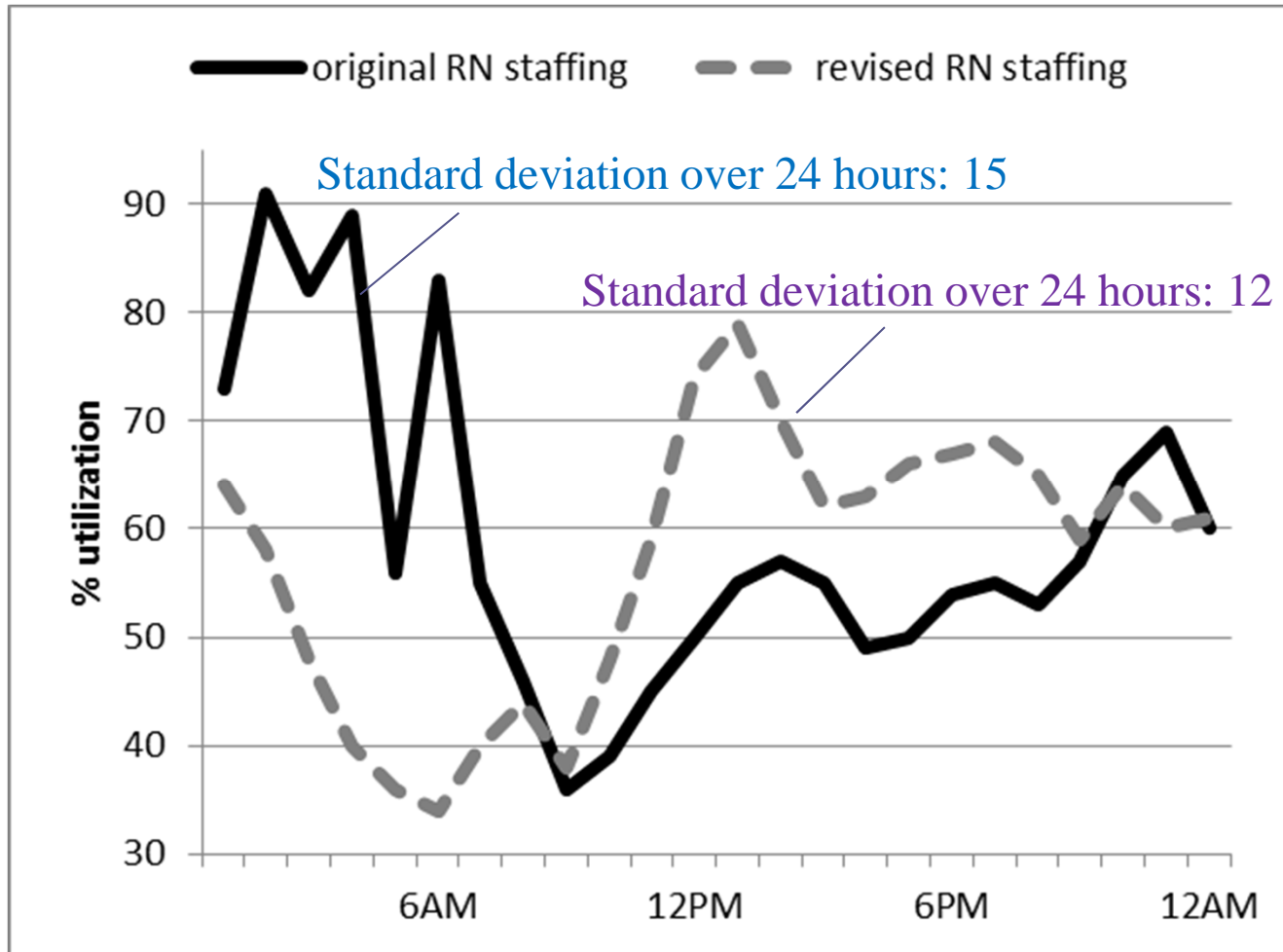
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Analyze the effects of the staffing

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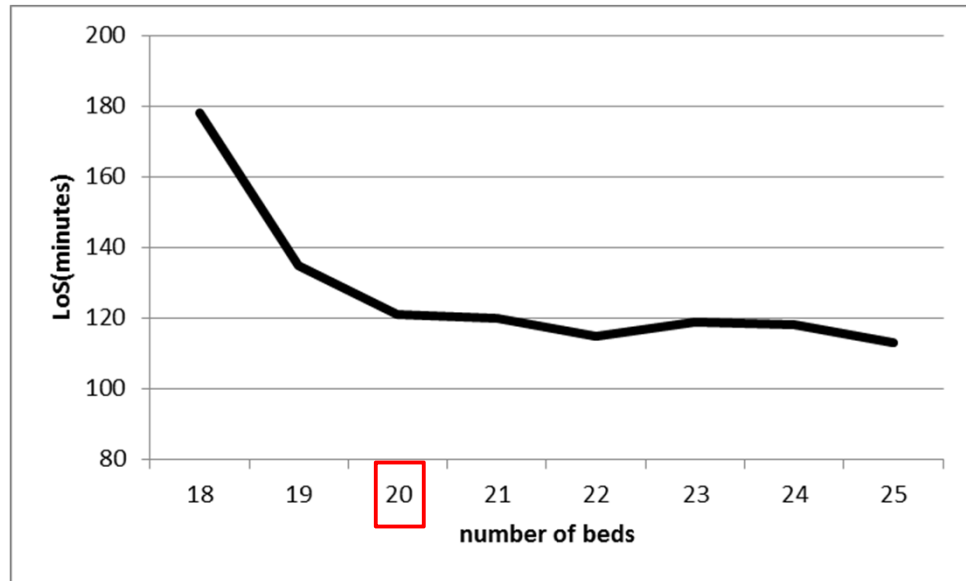


Non-Human Resource Use

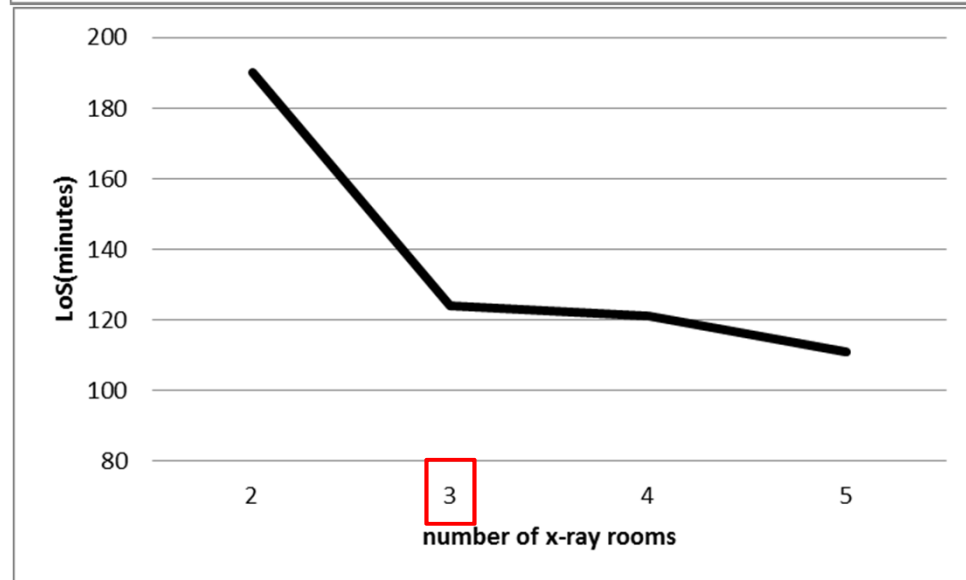
- Emergency department
 - Non-human resource management
 - Balancing patient length of stay and cost
- Resource-aware discrete-event simulation
 - Non-linear relation between length of stay and the number of resources
 - Adjust the number of beds
 - Adjust the number of x-ray rooms

Non-Human Resource Use

- Input: # beds



- Input: # x-ray rooms



Summary of Experiments

- Emergency department
 - Staffing problem
 - Complex relation between resources and processes

- Separated resource management component
 - Easy to make changes

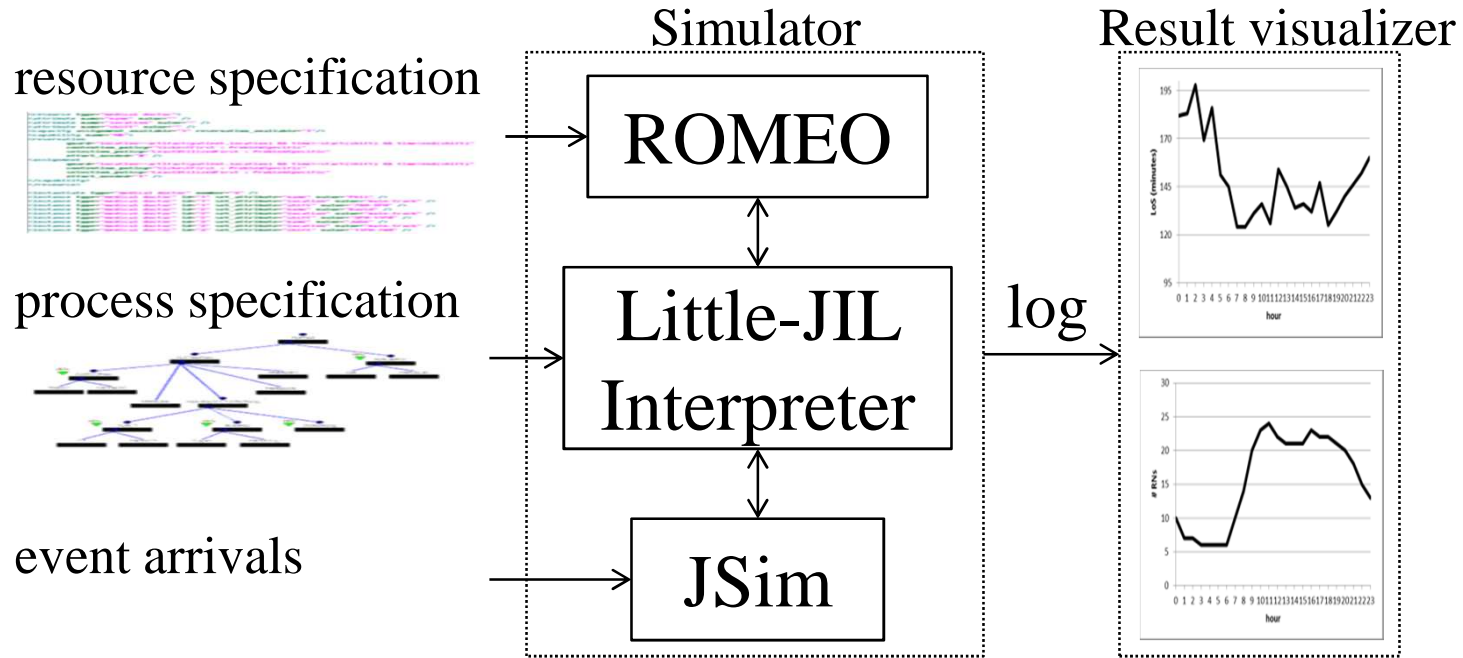
Related Work

- Approximating optimal solutions using randomized algorithms
- Staff scheduling using a queuing model based approach [Green01]
- Emergency department resource management using a discrete-event simulation [Beck09]

Future Research: Simulation Validation

- Do the simulations have real-world relevance?
 - Lack of oracles
- What properties need to be validated, and how?
 - Many properties and validation techniques
- Consistency validation among specifications
 - Different resource specifications
 - Resource specifications and other process specifications

Contributions



- Resource-aware discrete-event simulation
- Model and tool to study an emergency department
- Useful resource model for hospital administrators