

# TALK SERIES

# Clinical Engineering Benchmarking

Alan Gresch, VP of HTM Consulting Phoenix Data Systems

globalcea.org

### Past Benchmarking Efforts in US

- ECRI Biomedical Benchmarking
  - Average annual PM hours by Device Type
  - Average annual CM hours by Device Type
  - Average PM Intervals by Device Type
- AAMI Benchmarking
- Truven (Health Analytic's Action I-O Operational Performance Improvement Solution)

### AAMI Sponsored CMMS Collaborative

| Company              | СММЅ                |
|----------------------|---------------------|
| Accruent             | Connectiv, TMS, EAM |
| EQ2                  | HEMS                |
| MediMizer            | MediMizer           |
| Nuvolo               | Nuvolo              |
| Phoenix Data Systems | AIMS                |
| TMA Systems          | WebTMA              |











### Failure Codes

| Option                                   | Definition   | Examples   |  |  |
|--|--|--|--|--|
| Accessory or Disposable<br>Failure ✓     | Failure of device accessory or<br>disposable, not a failure of the<br>device itself.           | ESU footswitch. Infusion<br>pump cassette.   |  |  |
| Calibration Failure 🗸                    | Failure of a device to meet<br>calibration parameters, requiring<br>recalibration.             | Need to adjust low-battery alarm trigger point.                                      |  |  |
| Component Failure<br>(Battery) ✓         | Failure of the battery that<br>provides power for device<br>operation.                         | Battery fails to hold a charge.<br>Battery reconditioning fails.                     |  |  |
| Component Failure (Not<br>Battery) 🗸     | Failure of a device component other than the battery.  | Infusion pump pressure<br>sensor. Device power cord.<br>Device display.              |  |  |
| Failure Caused by<br>Maintenance ✓       | Failure of a device resulting from maintenance activities.                                     | Physical damage during<br>maintenance. Overvoltage<br>during testing.                |  |  |
| Failure Caused by Abuse<br>or Negligence | Failure of a device resulting from<br>damage caused by intentional<br>misuse or negligent use. | User drops defibrillator.<br>Patient damages infusion<br>pump.                       |  |  |
| Network or Connectivity<br>Failure       | Functional failure external to<br>device from failure of network or<br>connectivity.           | Network connection not<br>accessible. Infusion pump<br>library not updated.          |  |  |
| Software Failure                         | Functional failure of a device<br>resulting from malfunctioning<br>software.                   | Infusion pump software<br>malfunctions. Physiological<br>monitor required rebooting. |  |  |





### Failure Codes

| Option  | Definition  | Examples   |
|---|---|--|
| Use Error (Use Failure)                       | Failure of a device to support<br>achievement of a clinical<br>objective.                     | User error. Infusion pump<br>programming error.                                |
| Failure Caused by Utility<br>System           | Functional failure of a device<br>resulting from failure of or access<br>to a utility system. | Electrical power. Medical gas<br>or vacuum. Ventilation.                       |
| Failure Cause by<br>Environmental Factor      | Functional failure of a device<br>resulting from an environmental<br>factor.                  | Excessive ambient<br>temperature. Excessive relative<br>humidity.              |
| Failure Could Not Be<br>Identified            | Reported failure could not be<br>reproduced or identified by<br>testing.                      | Inaccurate or incomplete<br>report of failure. Intermittent<br>device failure. |
| Failure Not Diagnosed—<br>Device Not Repaired | Reported failure indicated<br>that testing or repair was<br>unwarranted.                      | Device replacement was more<br>cost-effective than testing or<br>repair.       |
| No Failure Associated with the WO             | There was no failure associated<br>with the work order (included<br>for completeness).        | PM work order completed<br>normally. PM work order<br>could not be completed.  |

 $\checkmark$  = PM-related failure

WO = work order





## Work Order Types

| Name                     | Code | Aliases/Synonyms  | Description   |
|--------------------------|------|---|---|
| Planned Maintenance ✓    | ΡM   | <ul> <li>Scheduled<br/>maintenance</li> <li>Preventive<br/>maintenance</li> <li>Preventative<br/>maintenance</li> </ul> | <ul> <li>Used for a single CMMS asset, not multiple assets. Costs associated with these activities are allocated to a particular asset.</li> <li>Activities (what we do) include: <ul> <li>Device restoration</li> <li>Safety &amp; function testing/inspection</li> </ul> </li> <li>Not used for: <ul> <li>Corrective maintenance discovered during PM</li> <li>Incoming inspection</li> <li>Safety &amp; function testing after repairs or other unscheduled activities</li> </ul> </li> </ul>  |
| Corrective Maintenance ✓ | СМ   | <ul> <li>Repair</li> <li>Unscheduled<br/>maintenance</li> </ul>   | Used for a single CMMS asset, not multiple assets. Costs<br>associated with these activities are allocated to a particular asset.<br>Circumstances for use:<br>• Found during PM<br>• Reported by equipment users (even if no deficiency is<br>actually found)<br>• Identified by HTM personnel (even if no deficiency is actually<br>found)<br>Activities (what we do) include safety & function testing to:<br>• Identify and correct deficiencies<br>• Confirm that equipment is safe & effective following CM<br>Not used for:<br>• Incoming inspection<br>• Installation<br>• Deinstallation, decommissioning, disposal<br>• Recall & alert management<br>• Software update/upgrade<br>• Cybersecurity remediation |





### Work Order Types

| Name               | Code     | Aliases/Synonyms | Description  |
|--------------------|----------|------------------|--|
| Training—HTM Staff | TRAINING |                  | Used to document HTM personnel technical training and professional development. Costs associated with these activities are not allocated to a particular asset.  |
|                    |          |                  | Activities (what we do) include:<br>• OEM/3rd-party technical training<br>• Peer-to-peer technical training<br>• Mentoring   |
| Support—Users      | SUPPORT  |                  | Used to provide non-maintenance support to users. Costs associated with these activities may or may not allocated to a particular asset.   |
|                    |          |                  | Activities (what we do) include:<br>• Rounds—informal check-in with users<br>• Training on specific medical devices/system   |
| Project            | PROJECT  |                  | An activity with a defined START and COMPLETION point<br>(date) that is not PM or CM. Has a specific objective that<br>is formally managed in terms of content, timeline, and<br>deliverables. Costs associated with these activities may or may<br>not be allocated to a particular asset.          |
|                    |          |                  | <ul> <li>Activities may include meetings as well as technical work.</li> <li>Installation</li> <li>Deinstallation, decommissioning, disposal</li> <li>Software update/upgrade</li> <li>Construction/renovation</li> <li>Medical device integration/interoperability</li> </ul>                       |
| Administrative     | ADMIN    |                  | <ul> <li>Ongoing activities with no definitive START and COMPLETION point (date). Costs associated with these activities are not allocated to a particular asset.</li> <li>Meetings (e.g., HTM department)</li> <li>Capital equipment planning</li> <li>Cleaning the workspace (HTM shop)</li> </ul> |





Work Order Types

| Name                                | Code             | Aliases/Synonyms | Description  |
|-------------------------------------|------------------|------------------|--|
| Cybersecurity 🗸                     | CYBER            |                  | An activity specific to:<br>• Mitigation<br>• Breach response<br>• Remediation   |
| Recall & Alert<br>Management 🗸      | RECALL           |                  | Initiated by the FDA and/or the OEM.   |
| Incident Investigation <sup>1</sup> | ADVERSE<br>EVENT |                  | An event resulting in, or the potential for, harm or death of a patient, staff, visitor.   |
| Incoming Inspection 🗸               | INCOMING         |                  | Activity required to complete a performance verification and<br>add (enter) equipment asset into MEMP and CMMS; any<br>device not already in the CMMS inventory:<br>• NEW<br>• Patient owned<br>• Reactivated<br>• Demonstration, loaned, rented |

✓ = Maintenance-related Work Order Type

MEMP = Medical equipment management plan

OEM = Original equipment manufacturer

<sup>1</sup> IT Services uses the term "incident" to describe any failure whereas HTM uses the term to refer to situations when there is patient/staff harm or the potential for harm.





#### Request/Work Order Codes (with clear definitions)

| PortugetCo/ | RequestDescription     | RequestDefinition/Notes   |
|-------------|------------------------|---|
| Requestion  |                        |   |
| 1           | Planned Maintenance    | Used for all scheduling purposes to track scheduled maintenance   |
| 2           | Safety Test            | First tier in for scheduling purposes to signify electrical safety was performed on the device  |
| 4           | Incoming Inspection    | Used for checking in, installing/delivering of new equipment  |
| 3           | Corrective Maintenance | Unplanned work order events where there is some type of equipment failure (either real or user stated)  |
| 5           | Service Request        | Automated requests - must be changed to appropriate request by technician to close work order   |
| 6           | Education              | Used to document any training received or given (hospital policies, infection control, equipment maintenance, In-Service)   |
| 7           | Hazard Alert/Recall    | Used to document work done when a hazard alert or a recall has been issued on an inventoried device or a non-inventoried system. Completing this work order indicates both the action and documentation required by the recall have been completed. |
| 8           | Incident Investigation | Used to record work investigating a patient incident. Outputs, control settings, and all critical information will be logged in the time task text. See Lead before beginning any repairs or modifications. No patient ID in WO.                    |
| 9           | Project                | Used to document work done for an assignment that involves planning, design, and implementation. Projects typically extend beyond 3 hours. A lead or supervisor must initiate all projects and a project template is required.                      |
| 10          | Rounds                 | Used to document time doing rounds on floors  |
| 11          | Administrative         | Used to document activities that are defined productive time, but do not fall under other request categories (paperwork, cleaning bench, non-project meetings, etc)   |
| 12          | Physicist Correction   | Physicist work order tracking for identified problems with equipment they perform regular checks on   |

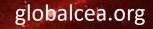




#### Associated Result Codes (with clear definitions)

| Request                | 🗾 Result             | RequestResultDefinition/Notes   |
|------------------------|----------------------|---|
| Administrative         | Cleaning             | Any time needed to clean your own workspace or shared/storage space   |
| Administrative         | Inventory            | Time tracked for performing inventory on parts, equipment, etc  |
| Administrative         | Meeting              | Attended meeting that was not project based or considered education (weekly department meetings, safety huddles, etc)   |
| Administrative         | Other                | Other administrative task besides those defined   |
| Administrative         | Paperwork            | Various tasks involving updating manual libraries, doing backlogs of work orders, etc   |
| Corrective Maintenance | Major Failure        | Failure could have affected patient safety and/or device would not work without repair  |
| Corrective Maintenance | Minor Failure        | Small Repair including Calibration - Cosmetic, Screen fix, Cord Replaced, did not affect safety or function of the device   |
| Corrective Maintenance | No Problem Found     | No additional action required outside of normal testing procedures  |
| Corrective Maintenance | Removed from Service | No longer needed on the floor or obsolete/will not be fixed   |
| Education              | Received Training    | Hospital Education or another staff member trained you on a topic/piece of equipment  |
| Education              | Trained Biomed       | Trained staff member in CE department on a topic/piece of equipment   |
| Education              | Trained Clinical     | Performed an in-service to clinical staff for new pieces of equipment, as requested by staff, or recommended due to high operator error                               |
| Hazard Alert/Recall    | Completed            | Service necessary to resolve Alert/Recall has been performed (replacing part, changing a setting, installing new part, etc) – place specific details in notes sectior |
| Incident Investigation | Major Failure        | Failure could have affected patient safety and/or device would not work without repair  |
| Incident Investigation | Minor Failure        | Small Repair including Calibration – Cosmetic, Screen fix, Cord Replaced, did not affect safety or function of the device   |
| Incident Investigation | No Problem Found     | No additional action required outside of normal testing procedures  |
| Incident Investigation | Removed from Service | No longer needed on the floor or obsolete/wiil not be fixed   |
| Incoming Inspection    | Major Failure        | Failure could have affected patient safety and/or device would not work without repair  |
| Incoming Inspection    | Minor Failure        | Small Repair including Calibration - Cosmetic, Screen fix, Cord Replaced, did not affect safety or function of the device   |
| Incoming Inspection    | No Problem Found     | No additional action required outside of normal testing procedures  |
| Physicist Correction   | Completed            | Physicist Correction information was entered  |
| Planned Maintenance    | Major Failure        | Failure could have affected patient safety and/or device would not work without repair  |
| Planned Maintenance    | Minor Failure        | Small Repair including Calibration – Cosmetic, Screen fix,Cord Replaced, did not affect safety or function of the device  |
| Planned Maintenance    | No Problem Found     | No additional action required outside of normal testing procedures  |
| Planned Maintenance    | Removed from Service | No longer needed on the floor or obsolete/wiil not be fixed   |
| Planned Maintenance    | Unable to Locate     | Device was not found after 3+ attempts to locate device during PM cycle with time captured for attempts (per department policy, may vary)                             |
| Project                | Completed            | Project tasks were completed, details in time task notes  |
| Rounds                 | Completed            | Rounds were completed, details in time task notes   |
| Safety Test            | Major Failure        | Failure could have affected patient safety and/or device would not work without repair  |
| Safety Test            | Minor Failure        | Small Repair including Calibration – Cosmetic, Screen fix,Cord Replaced, did not affect safety or function of the device  |
| Safety Test            | No Problem Found     | No additional action required outside of normal testing procedures  |
| Safety Test            | Removed from Service | No longer needed on the floor or obsolete/wiil not be fixed   |







### Associated Fault Codes (with clear definitions)

| Request                | <mark>⊸I</mark> Fault    | ✓ RequestFaultDefinition/Notes   |
|------------------------|--------------------------|--|
| Corrective Maintenance | Could Not Replicate      | No additional action required outside of normal testing procedures, could not replicate original failure/complaint   |
| Corrective Maintenance | Incorrect Set-Up         | The equipment was setup incorrectly prior to use that caused an error in device use (ex. Anesthesia/vent circuits)   |
| Corrective Maintenance | Maintenance Preventable  | Any problems found that would normally be addressed during scheduled/preventative maintenance (ex. Changing batteries, battery contacts, filters, lubricating O-rings etc) |
| Corrective Maintenance | Network/Software Failure | Failure due to IT network, transmission issues, or any software related problems   |
| Corrective Maintenance | Operator Error           | Operator was uncertain of how device operates  |
| Corrective Maintenance | Physical Abuse           | Clear evidence of damage outside of normal use   |
| Corrective Maintenance | Removed from Service     | No longer needed on the floor or obsolete/wiil not be fixed  |
| Corrective Maintenance | Spontaneous Failure      | No amount of testing could have predicted the failure within the device  |
| Corrective Maintenance | Utility Failure          | Environmental factors such as electricity, water, temperature caused the device to work improperly   |
| Incident Investigation | Could Not Replicate      | No additional action required outside of normal testing procedures, could not replicate original failure complaint   |
| Incident Investigation | Incorrect Set-Up         | The equipment was setup incorrectly prior to use that caused an error in device use (ex. Anesthesia/vent circuits)   |
| Incident Investigation | Maintenance Preventable  | Any problems found that would normally be addressed during scheduled/preventative maintenance (ex. Changing batteries, battery contacts, filters, lubricating O-rings etc) |
| Incident Investigation | Network/Software Failure | Failure due to IT network, transmission issues, or any software related problems   |
| Incident Investigation | Operator Error           | Operator was uncertain of how device operates  |
| Incident Investigation | Physical Abuse           | Clear evidence of damage outside of normal use   |
| Incident Investigation | Removed from Service     | No longer needed on the floor or obsolete/wiil not be fixed  |
| Incident Investigation | Spontaneous Failure      | No amount of testing could have predicted the failure within the device  |
| Incident Investigation | Utility Failure          | Environmental factors such as electricity, water, temperature  |
| Incoming Inspection    | No Problem Found         | No additional action required outside of normal testing procedures, used for No Problem Found Result   |
| Incoming Inspection    | Spontaneous Failure      | No amount of testing could have predicted the failure within the device  |
| Planned Maintenance    | Maintenance Preventable  | Any problems found that would normally be addressed during scheduled/preventative maintenance (ex. Changing batteries, battery contacts, filters, lubricating O-rings etc) |
| Planned Maintenance    | No Problem Found         | No additional action required outside of normal testing procedures, used for No Problem Found Result   |
| Planned Maintenance    | Removed from Service     | No longer needed on the floor or obsolete/wiil not be fixed  |
| Planned Maintenance    | Spontaneous Failure      | No amount of testing could have predicted the failure within the device  |
| Safety Test            | Maintenance Preventable  | Any problems found that would normally be addressed during scheduled/preventative maintenance (ex. Changing batteries, battery contacts, filters, lubricating O-rings etc) |
| Safety Test            | No Problem Found         | No additional action required outside of normal testing procedures, used for No Problem Found Result   |
| Safety Test            | Removed from Service     | No longer needed on the floor or obsolete/wiil not be fixed  |
| Safety Test            | Spontaneous Failure      | No amount of testing could have predicted the failure within the device  |



### Manning Data

| Device Category                                     | Active Inventory | Rich's Hours per device | Rich's Total Device Hours |
|---|------------------|-------------------------|---------------------------|
| Aerator, Ethylene Oxide                             | 6                | 1.90                    | 11.40                     |
| Air Cleaner, Particulate, Germicidal, UV            | 3                | 1.00                    | 3.00                      |
| Air Cleaner, Particulate, High-Efficiency Filter    | 4                | 0.00                    | 0.00                      |
| Alarm, Occupancy, Bed                               | 928              | 0.75                    | 696.00                    |
| Amalgamator   | 5                | 1.00                    | 5.00                      |
| Analyzer, Lab, Hematology, Platelet Aggregation     | 4                | 0.30                    | 1.20                      |
| Analyzer, Lab, Hemo, Erythrocyte Sedimentation Rate | 96               | 0.30                    | 28.80                     |
| nalyzer, Lab, Immunoassay, Chemiluminescent         | 2                | 0.80                    | 1.60                      |
| nalyzer, Lab, Immunoassay, Photometric, Microplat   | 14               | 0.74                    | 10.36                     |
| Analyzer, Lab, Microbiology, Susceptibility, Auto   | 28               | 0.74                    | 20.72                     |
| Analyzer, Laboratory, Blood Gas/pH                  | 22               | 0.76                    | 16.72                     |
| nalyzer, Laboratory, Body Fluids, Glucose           | 3                | 0.51                    | 1.53                      |
| nalyzer, Laboratory, Breath, Carbon Dioxide         | 3                | 0.51                    | 1.53                      |
| nalyzer, Laboratory, Clinical Chemistry             | 61               | 0.28                    | 17.08                     |
| nalyzer, Laboratory, Hematology                     | 77               | 0.42                    | 32.34                     |
| nalyzer, Laboratory, Hematology, Coagulation        | 57               | 0.56                    | 31.92                     |
| nalyzer, Laboratory, Hematology, Hemoglobin         | 7                | 0.56                    | 3.92                      |
| nalyzer, Laboratory, Immunoassay                    | 40               | 1.30                    | 52.00                     |
| nalyzer, Laboratory, Urine                          | 109              | 1.03                    | 112.27                    |
| Analyzer, Phys, Middle Ear, Impedance Tympanometry  | 116              | 0.80                    | 92.80                     |
| Analyzer, Phys, Neuro Musc Funct, Body Motion       | 20               | 4.81                    | 96.20                     |
| Analyzer, Phys, Neuromuscular Funct, Posturographic | 3                | 2.65                    | 7.95                      |
| nalyzer, Phys, Peristaltic Motility, Esophageal     | 7                | 0.75                    | 5.25                      |
| Analyzer, Physiologic, Body Composition             | 4                | 1.00                    | 4.00                      |
| Analyzer, Physiologic, Joint Laxity                 | 1                | 1.00                    | 1.00                      |
| Analyzer, Physiologic, Metabolic Rate, O2 Based     | 1                | 2.77                    | 2.77                      |
| Analyzer, Physiologic, Pulmonary Function           | 27               | 4.78                    | 129.06                    |



### Annual Manning Analysis

| Modality                    | Metro<br>Net<br>Adds | Metro<br>hrs⁄year | Central<br>Net<br>Adds | Central<br>hrs⁄year | KM Net<br>Adds | KM<br>hrs⁄year | North<br>Net<br>Adds | North<br>hrs⁄year | South<br>Net<br>Adds | South<br>hrs⁄year | System<br>Total<br>hrs/year | FTE's |
|-----------------------------|----------------------|-------------------|------------------------|---------------------|----------------|----------------|----------------------|-------------------|----------------------|-------------------|-----------------------------|-------|
| General Biomedical Totals   | 903                  | 1447.30           | 736                    | 971.80              | -161           | -10.28         | 802                  | 990.32            | 474                  | 464.78            | 3863.92                     | 3.14  |
| Biomedical Specialty Totals | 54                   | 92.10             | 18                     | 104.93              | 8              | 50.95          | 15                   | 77.02             | 19                   | 66.17             | 391.17                      | 0.32  |
| Imaging Group I Totals      | 78                   | 241.80            | 35                     | 468.99              | 12             | 50.71          | 26                   | 371.44            | 37                   | 453.28            | 1586.22                     | 1.29  |
| Imaging Group II Totals     | 67                   | 302.58            | 49                     | 209.33              | 20             | 17.00          | 51                   | 95.43             | 44                   | 83.36             | 707.70                      | 0.58  |
| TOTALS                      | 1102                 | 2083.78           | 838                    | 1755.05             | -121           | 108.38         | 894                  | 1534.21           | 574                  | 1067.59           | 6549.01                     | 5.32  |

| Modality            | Total<br>Hours<br>Added | Available<br>Device<br>Hours per<br>FTE | Total FTE's |
|---------------------|-------------------------|---|-------------|
| General Biomed      | 3863.92                 | 1230.25                                 | 3.14        |
| Biomed Specialty    | 391.17                  | 1230.25                                 | 0.32        |
| Imaging I           | 1586.22                 | 1230.25                                 | 1.29        |
| Imaging II          | 707.70                  | 1230.25                                 | 0.58        |
| FTEs All Modalities | 6549.01                 | 1230.25                                 | 5.32        |

### *Productivity* = 100.8%

#### Inventory Growth

| Aurora Total Inventory 8/22/2006 | 45,501 |
|----------------------------------|--------|
| Net Adds 08/23/2006 to 8/07/2007 | 3,287  |
| Aurora Total Inventory 8/7/2007  | 48,788 |
| Percentage Inventory Growth      | 7.22%  |





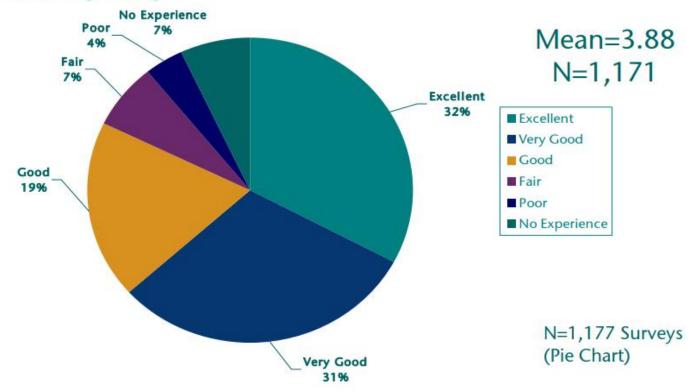
### Conclusions/Recommendations

- Standardize Codes and Define Them Clearly
- Train Staff
- Enforce Documentation Standards and Data Integrity
- Benchmark Internally First
  - Average PM/CM Hours by Device Type
- Implement CoSR (Cost of Service Ratio) Measures
- Implement Customer Satisfaction Measures
- Choose a Measurement Methodology and Stick With It
- Focus on Getting Better Year Over Year



#### Clinical Engineering Client Satisfaction Survey Quality of Communication

Q6. Please rate the quality of communication regarding equipment status from Clinical Engineering.

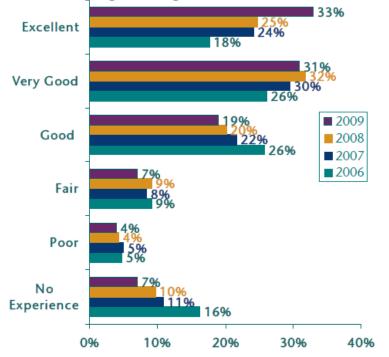




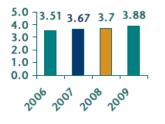


#### Clinical Engineering Client Satisfaction Survey Quality of Communication

Q6. Please rate the quality of communication regarding equipment status from Clinical Engineering.



|      | 2006  | 2007  | 2008  | 2009  |
|------|-------|-------|-------|-------|
| Mean | 3.51  | 3.67  | 3.70  | 3.88  |
| N    | 1,820 | 1,288 | 1,143 | 1,171 |



| Total Surveys  |
|----------------|
| N=2,174 (2006) |
| N=1,446 (2007) |
| N=1,266 (2008) |
| N=1,177 (2009) |



|                                  | Benchmark | Goal | Jan       | Feb       | Mar       | Year End<br>Totals/Avera<br>ges | Variance<br>from<br>target |
|----------------------------------|-----------|------|-----------|-----------|-----------|---------------------------------|----------------------------|
| AIR PROGRAM                      |           |      |           |           |           |                                 |                            |
| Transfers                        |           |      | \$15,330  | \$6,355   | \$33,432  | \$416,930                       | N/A                        |
| Sales                            |           |      | \$23,129  | \$17,170  | \$12,628  | \$250,263                       | N/A                        |
| Net Expense Ratio                |           |      | 3.11/1    | 1.70/1    | 2.66/1    | 3.73/1                          | 0.73                       |
| CLINICAL ENGINEERING             |           |      |           |           |           |                                 |                            |
| Cost Savings                     |           |      | \$76,049  | \$58,774  | \$112,157 | \$1,072,660                     | N/A                        |
| Cost Avoidance                   |           |      | \$165,000 | \$164,572 | \$158,305 | \$1,771,960                     | N/A                        |
| Cost of Service Ratio            |           |      | 1.32%     | 4.45%     | 3.96%     | 4.02%                           | N/A                        |
| Number of Devices per Technician |           |      |           |           |           |                                 |                            |
| General Biomed                   | 1,580     |      | 1,495     | 1,495     | 1,458     | 1418.50                         | -161.50                    |
| Specialty Biomed                 | 267       |      | 269       | 275       | 303       | 283.92                          | 16.92                      |
| Imaging I                        | 168       |      | 164       | 165       | 165       | 159.67                          | -8.33                      |
| Imaging II                       | 226       |      | 235       | 239       | 242       | 240.08                          | 14.08                      |
| Downtime Hours Major Modalities  |           |      |           |           |           |                                 |                            |
| Lin Acc                          | 46.6      |      | 39.1      | 17.8      | 3.8       | 22.56                           | -24.05                     |
| ст                               | 60.1      |      | 96.3      | 24.5      | 6.3       | 62.47                           | 2.33                       |
| CT/PET                           | 1.0       |      | 17.8      | 3.0       | 22.1      | 5.74                            | 4.79                       |
| MR                               | 26.3      |      | 31.0      | 14.0      | 8.2       | 17.61                           | -8.68                      |





|                                   | Benchmark | Goal | Jan     | Feb     | Mar     | Year End<br>Totals/Avera<br>ges | Variance<br>from<br>target |
|-----------------------------------|-----------|------|---------|---------|---------|---------------------------------|----------------------------|
| CLINICAL ENGINEERING              |           |      |         |         |         |                                 |                            |
| Repair Hours                      |           |      |         |         |         |                                 |                            |
| Corrective                        | 5952.6    |      | 5526.8  | 4984.3  | 4828.5  | 4388.92                         | -1563.64                   |
| Planned                           | 2866.8    |      | 3021.8  | 2873.1  | 3393.2  | 3001.85                         | 135.09                     |
| Total Requests for Service        |           |      |         |         |         |                                 |                            |
| Corrective                        | 1,932     |      | 1,996   | 1,762   | 2,206   | 1831.08                         | -100.67                    |
| Planned                           | 20        |      | 14      | 19      | 17      | 12.92                           | -7.00                      |
| Service Completed In-house        |           |      |         |         |         |                                 |                            |
| Corrective                        | 96.00%    |      | 97.20%  | 96.40%  | 95.50%  | 95.10%                          | -0.90%                     |
| Planned                           | 99.90%    |      | 100.00% | 100.00% | 100.00% | 99.96%                          | 0.06%                      |
| Service Called in After Hours     |           |      |         |         |         |                                 |                            |
| Corrective                        | 0.22%     |      | 0.20%   | 0.40%   | 0.14%   | 0.26%                           | 0.04%                      |
| Planned                           | 0.00%     |      | 0.00%   | 0.00%   | 0.00%   | 0.00%                           | 0.00%                      |
| Productivity                      | 101.80%   |      | 103.90% | 102.10% | 103.00% | 102.75%                         | 0.95%                      |
| Response Time (minutes)           |           |      |         |         |         |                                 |                            |
| In-house                          | 16        |      | 15      | 18      | 16      | 17.92                           | 1.92                       |
| Vendor                            | 52        |      | 47      | 52      | 36      | 50.92                           | -1.08                      |
| Customer Satisfaction (1-5 scale) | 4.09      |      | 4.09    |         |         | 4.15                            | 0.06                       |







# Thank you!