The Lab Must Go On

Clinical Laboratory Management in a World Turned Upside Down

Jonathan R. Genzen, MD, PhD

Chief Operations Officer, ARUP Laboratories; Associate Professor, University of Utah





The Lab Must Go On

Clinical Laboratory Management in a WorldTurned Upside Down

Brian R. Jackson, MD, MS, and Jonathan R. Genzen, MD, PhD

From the Department of Pathology, University of Utah, Saft Lake City, and ARUP Laboratories, Saft Lake City, UT.

Key Words: Coronavirus, COVID-19, Laboratory operations; Crisis management, Information technology, SARS-CoV-2

Am J Clin Flaths/2020000:1-

DOI: 10.108GIAJCPIAGAA18T

ABSTRACT

Objectives: The clinical laboratory community has faced imprecedented challenges in responding to the coronavirus disease 2019 (COVID-19) pandemic. Longheld assumptions about laboratory management have been reconsidered in light of these new circumstances.

Methods: Experience during the first 6 months of the COVID-19 pandemic at a clinical reference laboratory was reviewed in the context of neveral commonly held management principles to assess their relevance to clinical laboratory operations during a crisis.

Results: Management and operational ideas regarding different modes of communication, physical proximity and interaction, operating under a fixed budget, and maintaining a breadth of laboratory service offerings have been challenged during the COVID-19 pandemic. The importance of patting people first, maintaining collaboration, and providing effective leadorship and communication throughout an organization have been highlighted.

Conclusions: The collaborative activities of highly interdependent teams and individuals have helped the clinical laboratory community respond to society's needs in the COVID-19 crisis. Not all laboratory management principles apply equally well in the course of an international respiratory pandemic. When navigating crises, leaders need to distinguish situational management principles from those that are universal.

Key Points

- The clinical laboratory community has faced unprecedented challenges in responding to the conserveus disease 2019 (COVID-19) pandomic.
- Not all insragement principles designed for sustained operations are equally applicable in a crisis setting.
- A focus on people, collaboration, and communication is essential in an clinical laboratory's response to COVID-18.

The urgent demand for coronavirus disease 2019 (COVID-19) diagnostic testing in the spring of 2020 generated resource and staffing requirements beyond the scale of what clinical laboratories have previously had to face. At the same time, hospital and laboratory budgets were threatened by sharp reductions in income-generating clinical services and associated laboratory testing. This combination of events was disorienting and stressful for the laboratory industry, which has had to make large decisions quickly and based on limited and frequently changing information.

The COVID-19 era has been described by many as a "new normal" in which old management heuristics no longer apply. This perception, however, is not completely accurate, because not all management heuristics are created alike. Some are situational and depend on a particular business context, while others are more universal. Distinguishing between these two sets can free up managers to engage in flexible thinking, not just during crises but also during more gradual shifts in the business landscape. Identifying universal principles

*AJCP*2021 Jan 4;155(1):4-11. https://pubmed.ncbi.nlm.nih.gov/33118009/

OPEN ACCESS

Brian Jackson



Jonathan Genzen



July 2020 Perspective



1 location

100+

medical directors & consultants

~98%

testing performed in-house

National clinical reference laboratory located in Salt Lake City, Utah

Clinical laboratory for University of Utah Health (hospital and outpatient clinics)



50 states

>3,000 diagnostic tests

>70,000 specimens processed daily

>4,000 employees

Specimen transportation via local and regional couriers, commercial airlines, and FedEx

24/7 operations



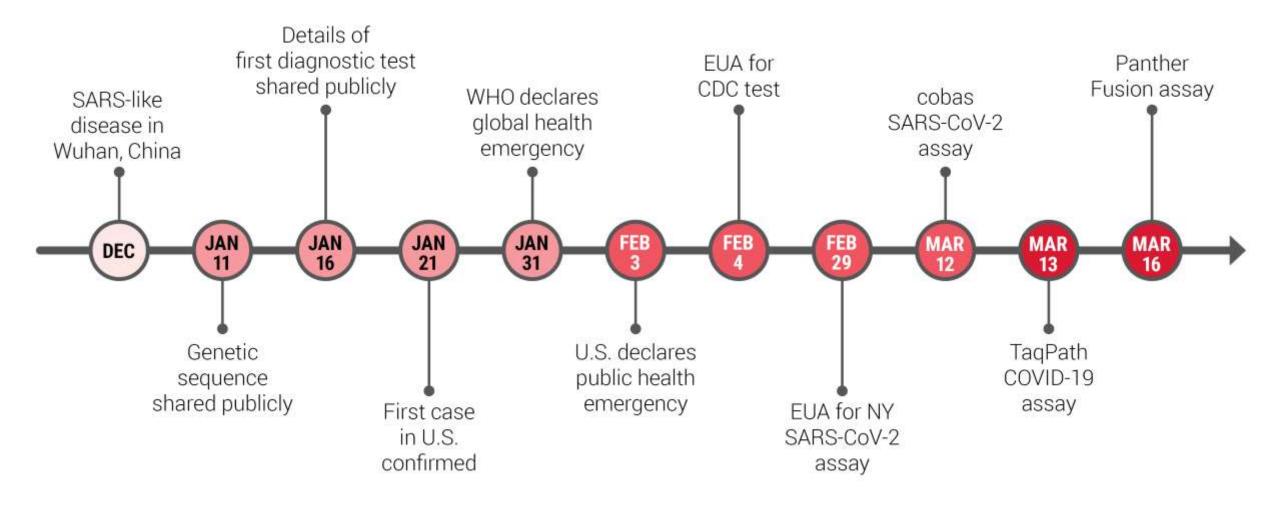


Winter 2019—Spring 2020





Diagnostics Timeline

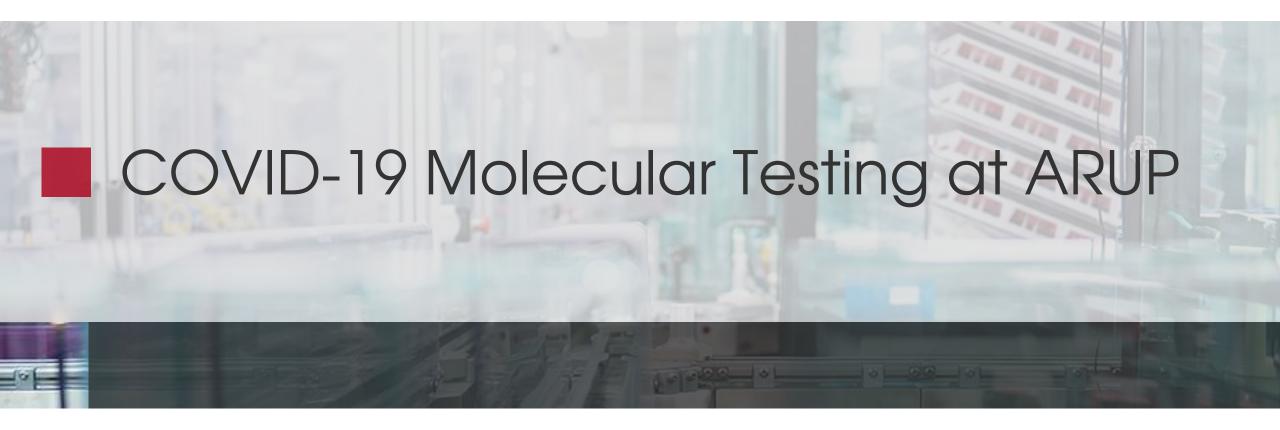




Early Pandemic Factors

- Two months from sequence to commercial tests
- Unfamiliarity with Emergency Use Authorization (EUA) process
- Regulatory uncertainty
- Prior experience with Zika
- Demand versus supply
- Competition for automated molecular platforms

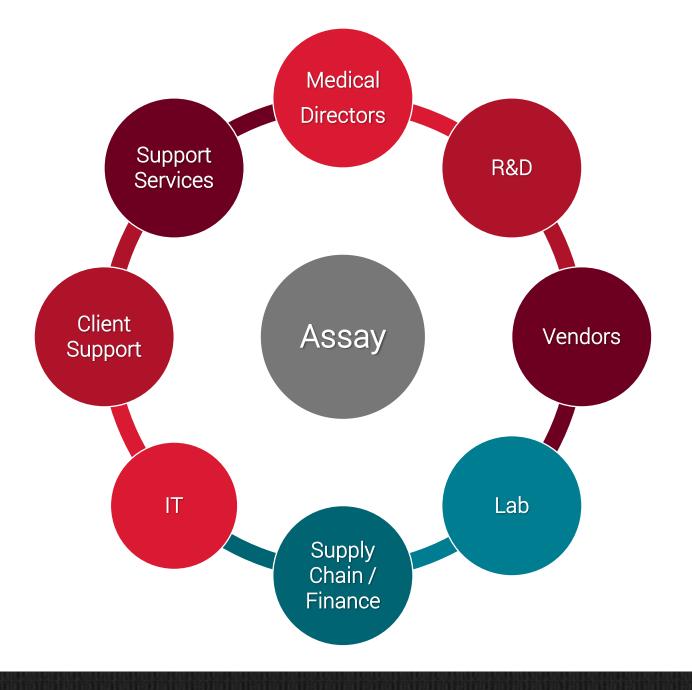






DEVELOPMENT AND SUPPORT

Assay Collaboration





Automated Molecular Platforms in Infectious Disease

Initial Approach

PANTHER FUSION

EXTRACTION AND AMPLIFICATION

RT-PCR (reverse-transcriptase polymerase chain reaction)

PANTHER

EXTRACTION AND AMPLIFICATION

TMA
(transcription-mediated amplification)

ROCHE 6800

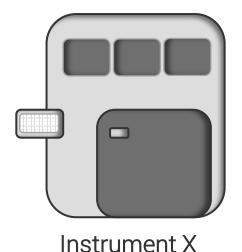
EXTRACTION AND AMPLIFICATION

RT-PCR (reverse-transcriptase polymerase chain reaction)



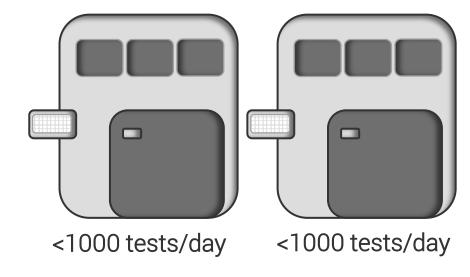
Capacity – All Automated Instrumentation

Specifications



"1,000" tests/day

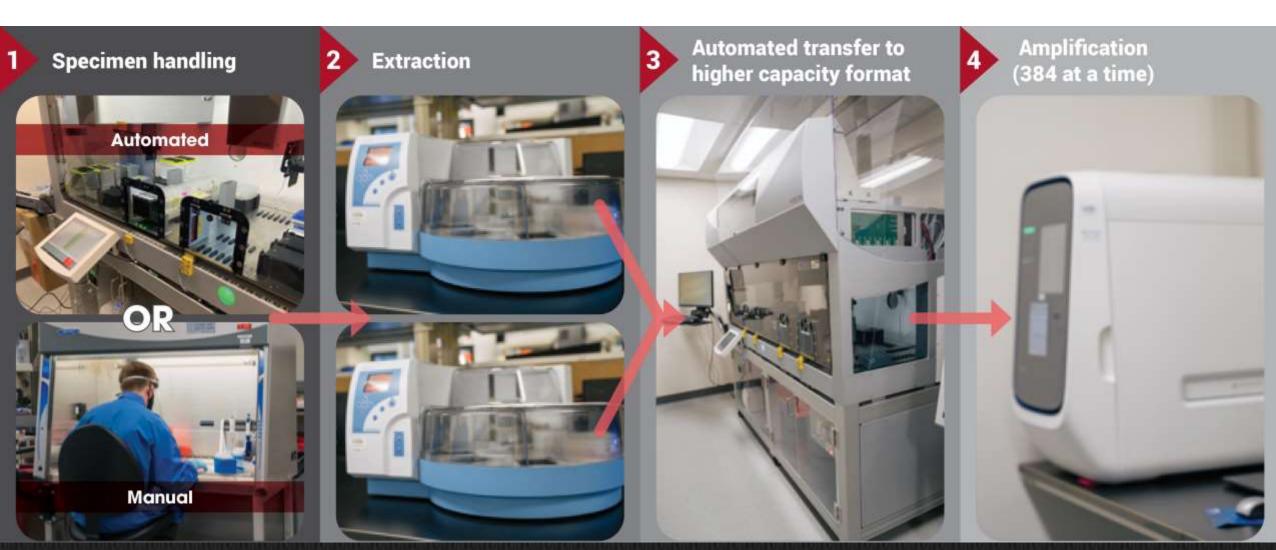
Clinical Lab



- Running instruments hard (service)
- Preventive maintenance and updates
- Specimen loading (batch versus random access)
- Other critical tests competing for capacity
- 24/7 staffing



COVID Rapid Response Laboratory



Planning for Pandemic Lab Space

MODEL 1

Lab space with significant excess capacity

- Long-term budgetary commitment and cost
- Memory fades, markets turns

"Nature abhors a vacuum"

MODEL 2

Maintain or acquire <u>external</u> space capacity Difficult in high-complexity CLIA setting for infectious disease testing if continually unused

MODEL 3

Office space built out for <u>future</u> laboratory use

"Office in-lab concept"

Initial investment

Fill with teams that can work from home during a pandemic

- IT
- HR
- Client Services







Some rules are made to be (situationally) broken.

Some rules are there for a reason.



Minimize Meetings and Emails

Meetings
can be the
bane of
organizational
life.

Critical during a pandemic!

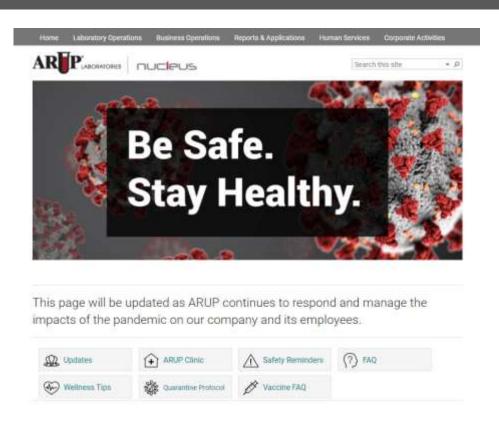
- COVID planning meetings
- Management update meeting
- Frequent department meetings and discussions
- Virtual formats
- Safety communications
- Leadership communications

- Operations
- Safety
- Clinic
- HR
- R&D
- Marketing
- Transportation
- Supply Chain
- Finance
- ||



Communication Matters— With All Stakeholders

ARUP Intranet



Management Update Meeting (MUM)

"Mini-MUM"

- Announcements
- Operations
- Safety
- Clinic and Wellness Center
- Finance
- HR
- Quality



Communicating Purpose

Interim Guidance for Healthcare Facilities: Preparing for Community Transmission of COVID-19 in the United States

Key Goals for the U.S. healthcare system in response to the COVID-19 outbreak are to:

- Reduce morbidity and mortality √
 Minimize disease transmission √
- 3. Protect healthcare personnel √
- 4. Preserve healthcare system functioning
 √



CLIENTS • REGION • UTAH • UNIVERSITY HEALTH • ARUP

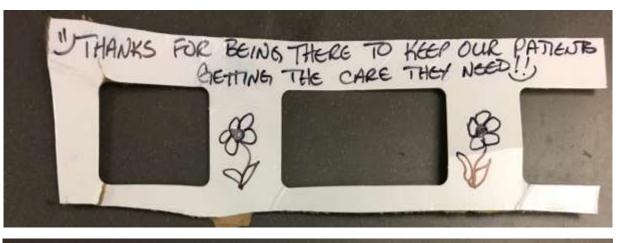


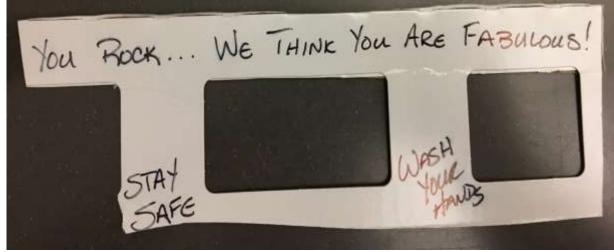
https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/guidance-hcf.html



Communicating Kindness







Communicating Safety

PPE Policies and Procedures

- Laboratory areas
- Non-laboratory areas
- Hallways
- Offices
- Cubicles
- Face shields
- Breaks and lunches

Overall Tone

- Be supportive
- Be kind
- Be safe
- Be consistent









Communicating Safety

Signage





Information Overload





Communicating Safety

Strange Can Be Effective





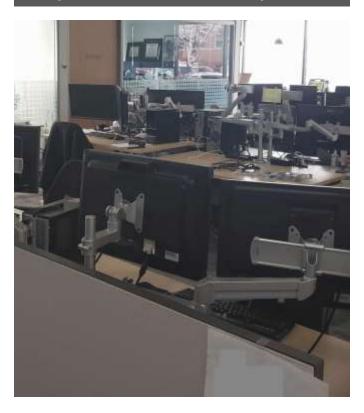


Manage Physical Spaces to Maximize Social Interactions

2019



Open Collaborative Spaces



Separated Cubicles







MAXIMUM OCCUPANCY

CHAIRS ONLY: 472 PERSONS

TABLES & CHAIRS: 220 PERSONS



Work From Home

Information Technology

Client Services

Business Development Medical Directorship

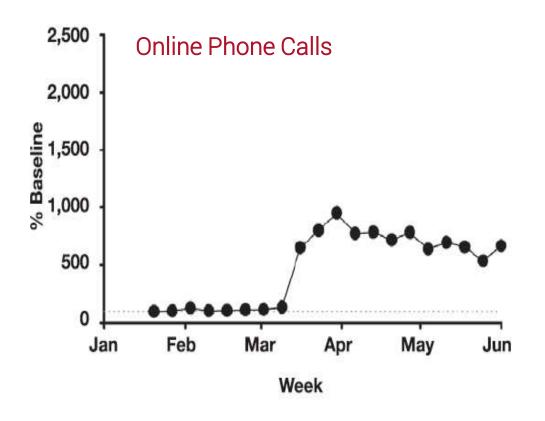
Quality

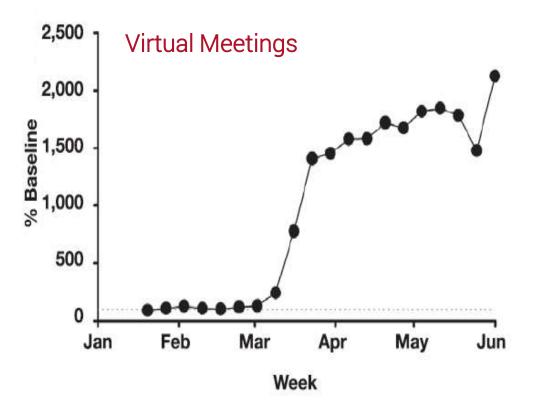












Am J Clin Pathol. 2021 Jan 4;155(1):4-11.



Laboratory Processes Must Accommodate the Full Clinical Spectrum of Inpatient, Outpatient, and Subspecialty Care

Solutions Shops

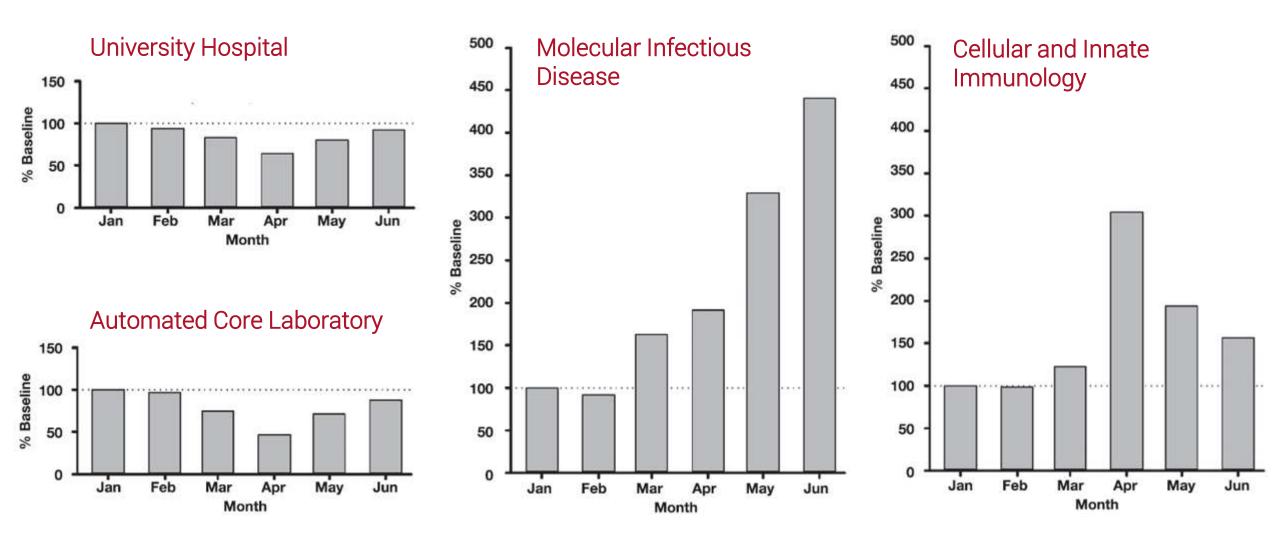
(Generalist)

Focused Factories

(Specialist)

- Diversion of resources to COVID-19
- Leveraging available instrumentation
- Cross-training of current employees





Am J Clin Pathol. 2021 Jan 4;155(1):4-11.

Manage Laboratory Budgets Based on Annual Projections of Income Versus Expense



Extremely large purchases, contracts, and commitments



Requests to commit prior to evaluations



Unknown volumes



Unknown future reagent availability



Wide array of pricing for similar supplies



Year-over-year rolling forecast models



Decisions based on patient care

IT Matters, Even If You Don't Think You're an IT Company



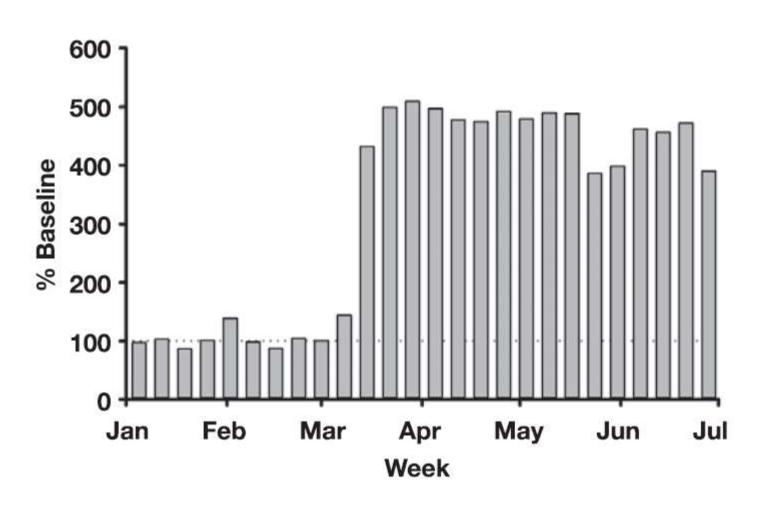






- VPNs/VDIs
- Telephony (Client Services)
- Hardware
- Software
- Online collaboration tools
- Test builds and interfaces
- PHI/HIPAA

WEEKLY AVERAGE VPN CONNECTIONS



Key Issues

- Licenses
- Security
- Support

Am J Clin Pathol. 2021 Jan 4;155(1):4-11.



People Come First



























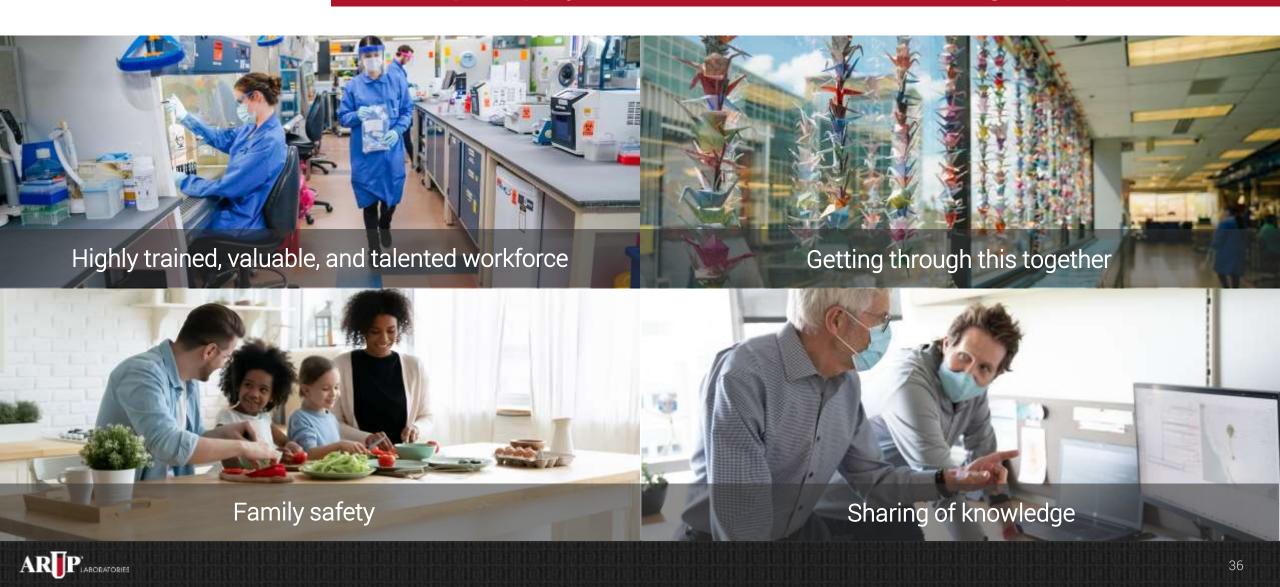


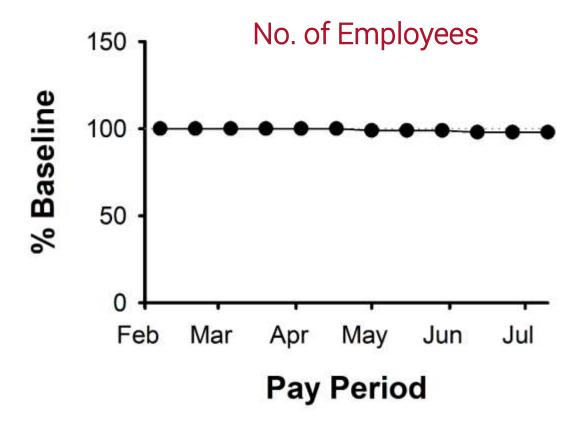


Goals

Maintain patient testing.

Keep employee base intact and safe during the pandemic.



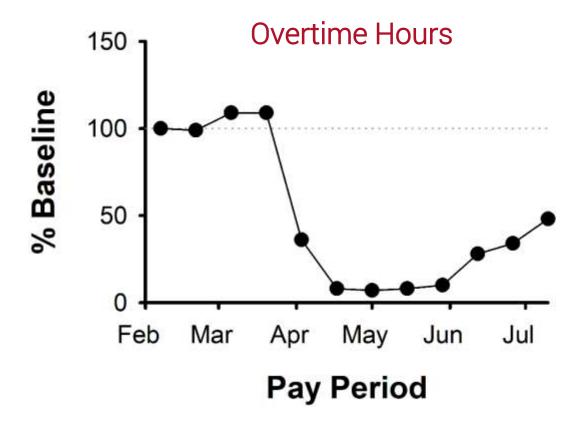


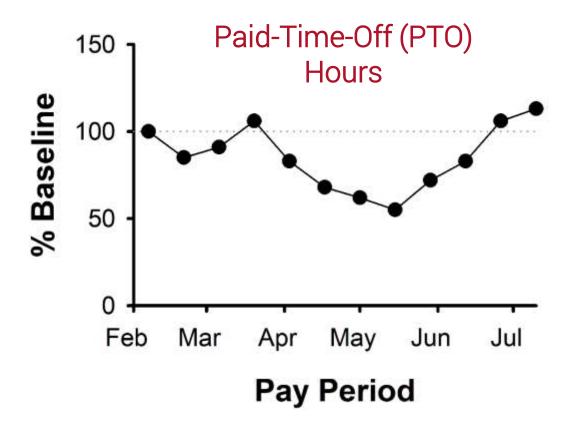


Hourly and salary reductions across all departments and leadership

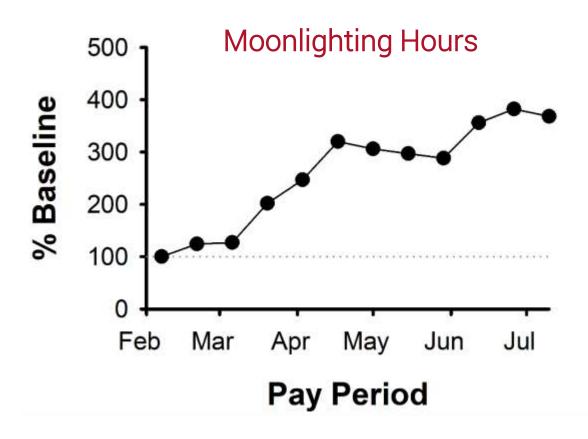
Am J Clin Pathol. 2021 Jan 4;155(1):4-11.

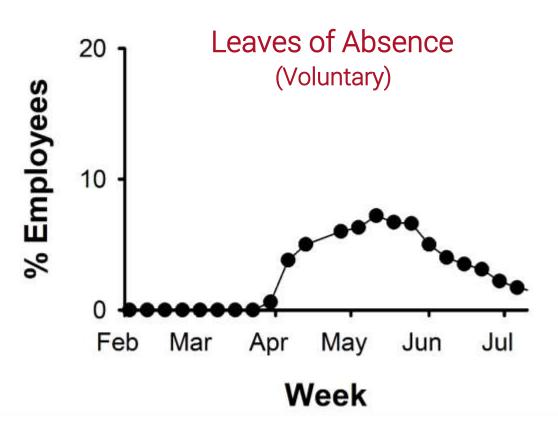






Am J Clin Pathol. 2021 Jan 4;155(1):4-11.





Am J Clin Pathol. 2021 Jan 4;155(1):4-11.



Emotional Health and the Pandemic



Adapted from Zunin & Myers as cited in DeWolfe, D. J., 2000. (2nd ed., HHS Publication No. ADM 90-538). Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. Center for Mental Health Services



Support for Employee Health

Family Health Clinic Wellness Center

Health
Wellness
COVID-19 testing
Contact tracing



Promoting a safe and healthy working environment

Healthcare for our employees and their families

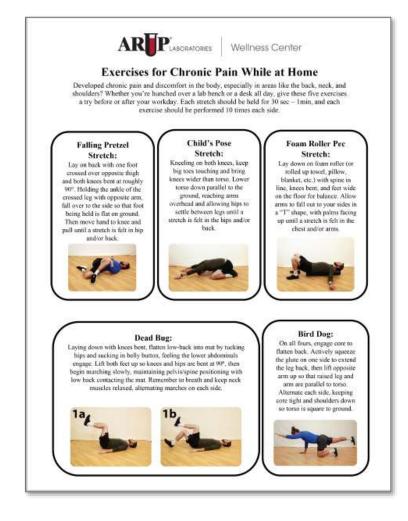




Support for Employee Health

Musculoskeletal Exercises





Pandemic added extra stress.

PDFs Videos

Additional exercises for

Wrist

Elbows

Forearms

Leadership Matters

Pandemic Considerations

- Difficult decisions to make
 - Cost
 - Scale
 - Impact
- Communication
- Leading by example
- Liaison to external community

Scope

- Executives
- Managers
- Supervisors
- Clinical pathologists
- Anatomic pathologists
- PhD clinical laboratory scientists
- Clinicians
- Safety team



Pandemic Risk Assessment

Laboratory Operations

Safety

HR

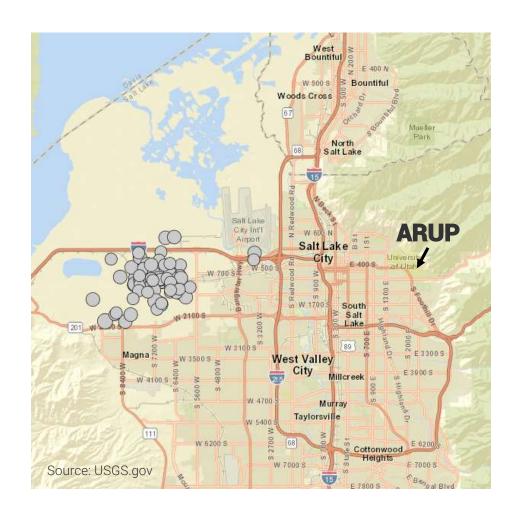
Business Development

Specimen
Handling and
Transportation

Regulatory Compliance



Handling More Than One Crisis at a Time



5.7 Magnitude Earthquake March 18, 2020

- No injuries
- No building damage
- ARUP maintained operations
- Temporary airport closure
- Rerouted transportation
- Aftershocks





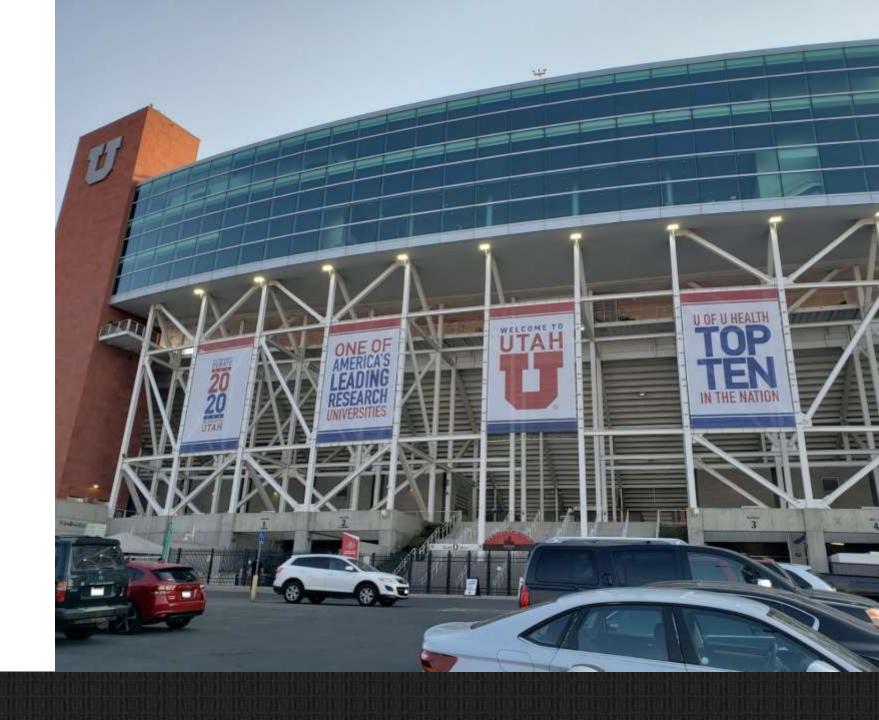


Vice Presidential Debate

COVID-19 SPECIMEN
COLLECTIONS AT RICE
ECCLES STADIUM AND
TOWER

Testing at ARUP

(Day of debate: POC)

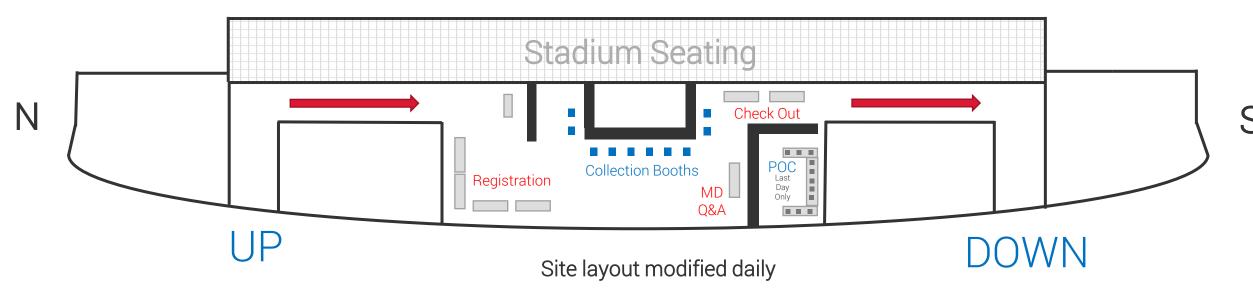


Rice Eccles Stadium & Tower

Collection: Univ. of Utah Health

Testing: ARUP Laboratories

E



- Couriers loop to ARUP
- "Preprocessed" via the occupational health app
- Delivered directly to the testing lab

W

- Control of the entire process
- Reference lab-quality RT-PCR result
- Safe and successful debate



Collaboration Matters

Within organization

With external colleagues

With vendors and suppliers

With government (local, state, federal)

Sharing experiences and knowledge Unknowns and finite resources

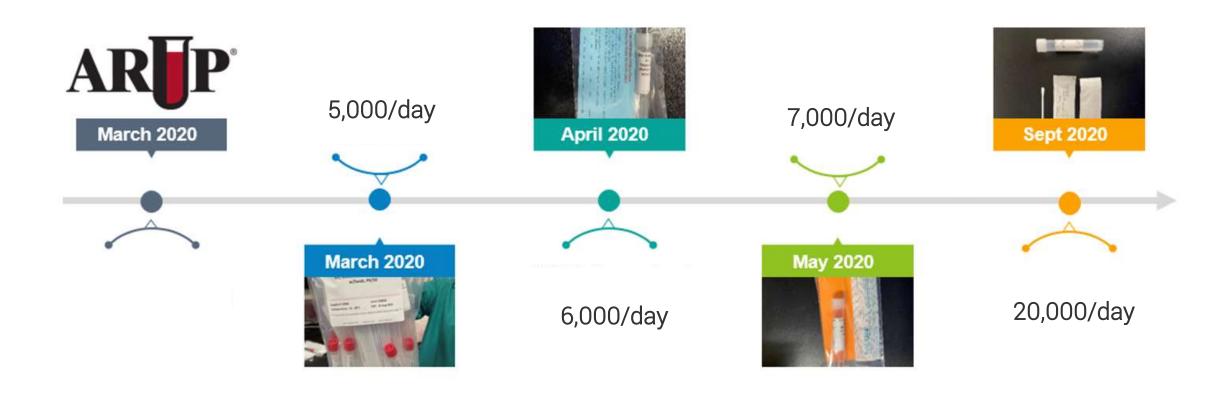


Collaboration Example

Client Response Molecular Client Relations COVID Infectious Couriers and Training Processing Communication Disease University IT Interface & Medical Marketing Reagent Lab Hospital Directorship OHS Dev U of U Health **UH** Outpatient Specimen Compliance Sales Point of Care Processing Team Collection IT Clinical Safety Personnel



Supplies for Collections









WE KNOW TESTING

Media

More clinical pathology voices are needed in public education and policy decisions

- Educate
- Advocate
- Be available



The Pandemic Challenges Core Philosophies

Culture of Quality

This is the way we **should** do things.

- CLIA, rigid, standardized, experience driven
- Extensive documentation and training

e.g., 10,000 tests, "99.9% correct"

Hypothetical Examples

Culture of Quantity

This is what needs to be done quickly.

- Urgency
- Innovation
- Competition

e.g., 100,000 tests, "89.9% correct"



Diverse Legitimate Perspectives

Clinical Pathology

Epidemiology

RT-PCR

Point of Care

Effective Utilization Widespread Testing

Availability

Cost



For Future Pandemics

- Develop pandemic response plans based on lessons learned.
- Promote and incentivize pre-EUA innovation.
- Clarify and promote pathway for pre-EUA test availability with safeguards.

- Fund research on rapid/automatable
 extraction techniques for common categories of viruses and bacteria.
- Support standardization efforts to promote swab, tube, media, and pipette tip compatibility across automation and platforms.







A nonprofit enterprise of the University of Utah and its Department of Pathology