Decision Support System for Healthcare Capacity Planning Canan Gunes Corlu, PhD, John Maleyeff, PhD, Chenshu Yang, MS, Tianhuai Ma, MS, Yanting Shen, MS Candidate Administrative Sciences, Metropolitan College, Boston University

Introduction

Capacity management of hospital staff and other resources is an important challenge faced by a healthcare administrator. Because of the variation in service times and the inability to inventory services, capacity buffers are required to ensure reasonable waiting times for patients. Figure 1 shows a generic example that is applicable to any queuing system. As the server utilization increases, waiting time will increase in a pattern commonly known as a hockey stick.



Figure 1 Server Utilization versus Waiting Time "Hockey-Stick."

A capacity plan will effectively balance the needs of the planner (i.e., by maximizing server utilization) and the needs of the patient (by minimizing waiting times). In some fields, the optimal system configuration takes place at a threshold referred to as the knee of the curve.

This study concerns the development of a decision support system (DSS) using Python to determine optimal capacity buffers using a Monte Carlo simulation (MCS) and a knee optimization model that allows for flexibility in specifying uncertain arrival patterns and service times.

Assumptions

The queuing system is robust with the following structure

- Single queue served by multiple parallel servers
- Infinite customer population
- Arrivals are deterministic or random
- Infinite queue size
- First-come first-served discipline
- Gamma distributed service time variation

Figure 2 shows gamma distributions for various values of the coefficient variation (CV).



Figure 2 Gamma Distributions (Average Service Time is 120 Minutes).

Methods

Simulation Model:

- The performance statistics were generated based on the server utilization (p), which is the ratio of the customer arrival rate (λ) to the system's service rate.
- The inputs are the number of servers, CV, and the arrival pattern. The outputs are the customer's wait time in the system (Ws), wait time in the queue (Wq), the number of customers in the system (Ls) and the number of customers in the queue (Lq).

Optimization Model:

This study uses a Kleinrock's power function to identify the level of p using the equation:

$$Power(\rho) = \frac{\rho}{\lambda Ws}$$

The MCS finds the knee (optimal server utilization) by changing p from 40% to 95% (in increments of 5%) and simulating the system repeatedly over this range.

Observations

Congestion and Instability:

- When the system is congested the variation of wait times increases as a percentage of the average wait time, and wait times behaved erratically.
- The variation of the time spent in a congested system exhibited a great deal of instability due to the significant autocorrelation among patient wait times. Increasing servers or reducing service times are the
- approaches to relieve congestion.



Figure 3 Confidence Intervals (s=15, CV=0.5, 6/hour random arrivals)

Optimal Capacity Buffering:

A factorial experimental design was used to explore how the knee changed based on levels of key variables. Figure 4 shows the knee for 88 conditions.

		Queuing System Assumptions							
		Random Arrivals				Scheduled Arrivals			
	с٧	25%	50%	75%	100%	25%	50%	75%	100%
Servers	1	0.60	0.55	0.50	0.50	0.85	0.75	0.65	0.55
	2	0.65	0.65	0.60	0.60	0.90	0.80	0.70	0.65
	3	0.70	0.70	0.70	0.60	0.90	0.85	0.80	0.75
	4	0.70	0.75	0.70	0.65	0.90	0.85	0.80	0.75
	5	0.75	0.75	0.70	0.65	0.90	0.85	0.80	0.75
	10	0.80	0.80	0.80	0.75	0.95	0.90	0.85	0.85
	15	0.85	0.80	0.85	0.80	0.95	0.90	0.90	0.90
	25	0.85	0.85	0.85	0.85	0.95	0.95	0.90	0.90
	50	0.90	0.90	0.90	0.90	0.95	0.95	0.95	0.90
	75	0.90	0.90	0.90	0.95	0.95	0.95	0.95	0.95
	100	0.95	0.95	0.90	0.95	0.95	0.95	0.95	0.95

Figure 4 Optimal Knee Values

