



RLI Power Hour

October 18, 2022

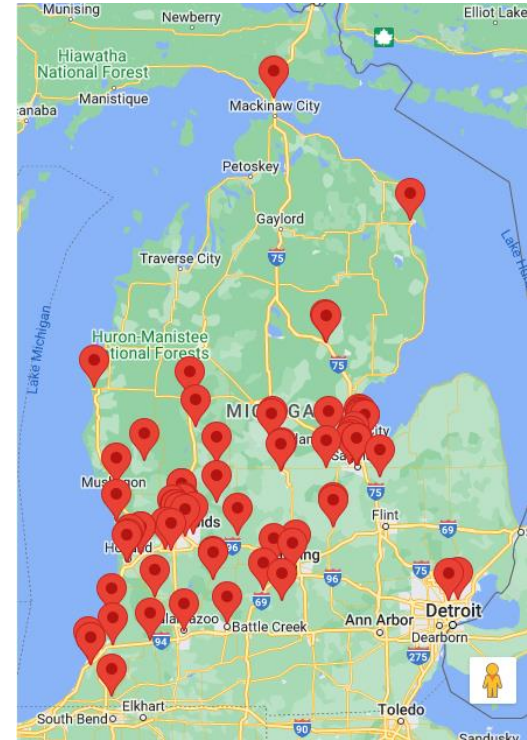


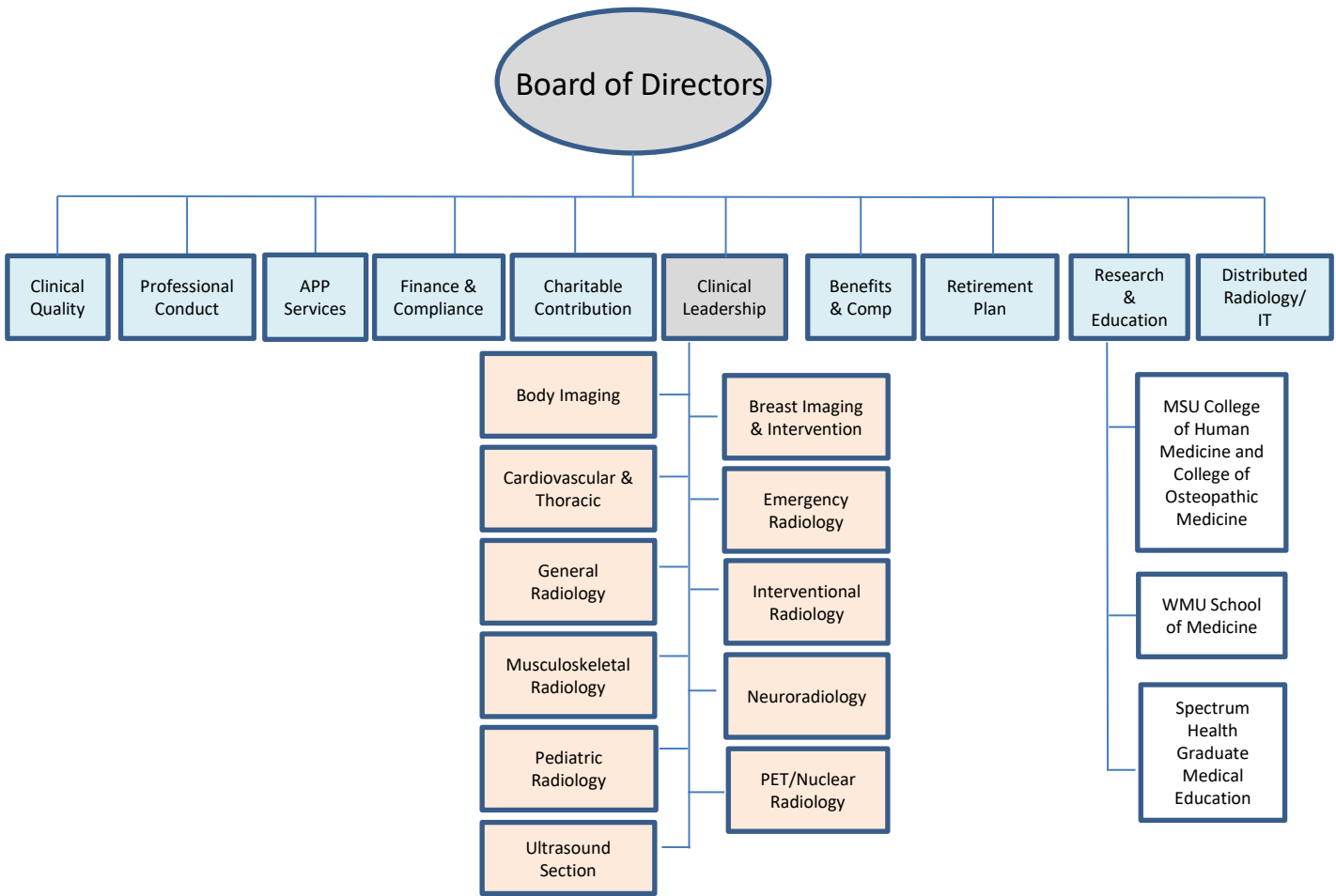
Radiology Leadership Institute Stories of Leadership Initiatives & Impact

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Grand Rapids, MI 49525

About ARS

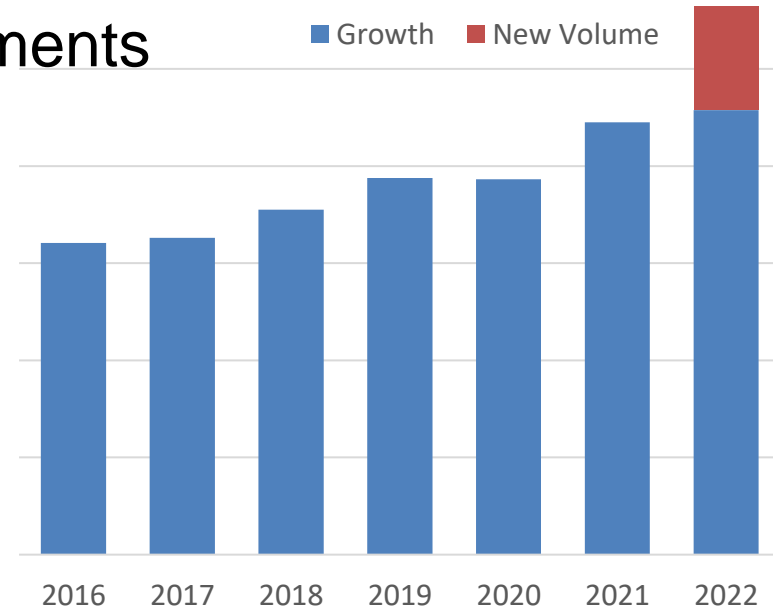
- Established in 1998
- Current providers
 - 220 physicians
 - 28 APPs
- 14 health systems
- 100% owner: STARS and drARS
- ARS Foundation 501(c)(3)
- Spartan Radiology





Opportunity

- Current state
 - 2 disparate reading environments
 - >2 million examinations
 - 200 radiologists
 - 12 months



Project successes

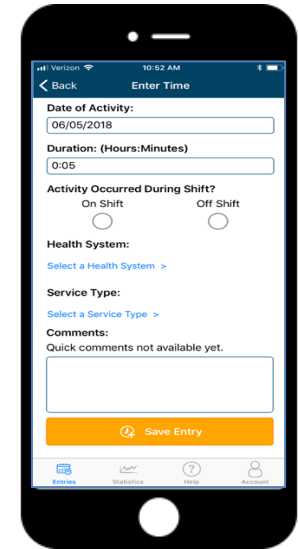
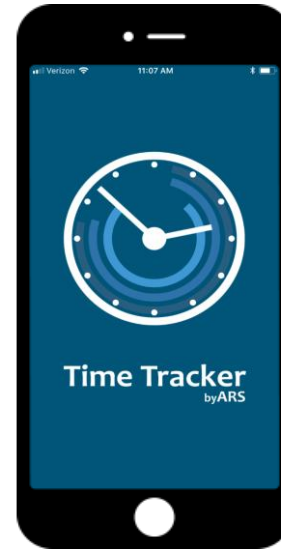
- Create the right organizational structure to navigate change
- Address the challenges physicians face when working in teams and how to align members with diverse perspectives and backgrounds around performance goals
- Recognize the critical relationship between radiology and clinical operations
- Use basic financial statements and financial analysis to assess financial health and develop improvement strategies

Project timeline

- Feb –Jun 2021: STARS Decision Support designed and developed an interactive Capacity Planning tool
 - Shows the # of FTEs suggested per hour per section based on the incoming volume for each system based on the case matrix examination identifiers
- July –September 2021: DS, scheduling, leadership met 1:1 with section chiefs to review data and determine the reorganization needs
 - On-site responsibilities, secondary tasks and the need to balance workloads between all worklists were considered and incorporated
- October – December 2021: Primary, secondary and tertiary shift responsibilities finalized and new Shift Responsibility Documents created to build new reading worklists

Custom Applications – Time Tracking

- Logging non-interpretive and administrative activities
- Native iOS & Android app in addition to website
- Worklist integration
- Categorizes hospital activities: Medical director, clinical advisor time, etc.



Skillset & section membership

Physician Skillset Checklist

Please complete the following and report your level of competence to the best of your knowledge.

Level of competence (in the last 12 months):

1. Not comfortable performing
2. Competent - difficult cases may require assistance
3. Fully competent to perform

General Radiology	1	2	3	
	Check 1s	Check 2s	Check 3s	
GI Exams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
General Fluoroscopy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hysterosalpingogram	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Plain Films	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Body Imaging	1	2	3	
	Check 1s	Check 2s	Check 3s	
CT C/A/P	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CT Colonography	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CTA C/A/P	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CTA Extremity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Enterogram	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MRA Extremity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MSCP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MRI Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MRI Pelvis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MRI Prostate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MRI Rectal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Urogram	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cardiovascular and Thoracic Radiology	1	2	3	
	Check 1s	Check 2s	Check 3s	
Congenital Cardiac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CT Cardiac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CT TAVR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CTA Cardiac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
High Resolution Chest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MRA Cardiac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MRA C/A/P	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MRI Cardiac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MRI Chest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Neuroradiology	Page 18 of 85	1	2	3

ARS Clinical Sections

ARS approaches its overall workflow using multiple clinical sections, similar to division you might find in an academic radiology department. The clinical sections are in charge of day-to-day operations within their section. Every section elects a Section Chair followed by ARS Board ratification.

ARS utilizes section membership as a guide in determining scheduling however scheduling is not limited by section membership. Physicians may be scheduled at work outside of their section (but still within their skillset) to meet occasional scheduling needs.

ARD physicians are allowed to self-identify themselves as voting members of up to two sections and non-voting members in as many sections as they desire. Please refer to the [ARS Membership](#) document for more information on the general expectations of members within each clinical section. Please mark the sections below in which you would like to be a radiologist voting member.

Section	Voting Member (Max: 2 Sections)	Non-Voting (No Limit)
Body Imaging	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Body Imaging and Intervention	<input type="checkbox"/>	<input type="checkbox"/>
Cardiovascular and Thoracic Radiology	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Radiology	<input checked="" type="checkbox"/>	<input type="checkbox"/>
General Radiology	<input type="checkbox"/>	<input type="checkbox"/>
Interventional Radiology Procedures	<input type="checkbox"/>	<input type="checkbox"/>
Musculoskeletal Radiology	<input type="checkbox"/>	<input type="checkbox"/>
Neuroradiology	<input type="checkbox"/>	<input type="checkbox"/>
Pediatric Radiology	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Perioperative Medicine/Fluoroscopy	<input type="checkbox"/>	<input type="checkbox"/>
Ultrasound	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you have any questions/concerns about membership, please reach out to Debrah Wardenbar, Section Coordinator, at dwardenbar@ars.org or @1614-963-7272 ext. 1803.

Primary Section

Please tell us which Clinical Section should be your primary, for reporting purposes.

Submit one section. You must be a voting member of your primary section.

Section	Primary (Select One)
Body Imaging	<input type="checkbox"/>
Body Imaging and Intervention	<input type="checkbox"/>
Cardiovascular and Thoracic Radiology	<input type="checkbox"/>
Emergency Radiology	<input type="checkbox"/>
General Radiology	<input type="checkbox"/>
Interventional Radiology Procedures	<input type="checkbox"/>
Musculoskeletal Radiology	<input type="checkbox"/>
Neuroradiology	<input type="checkbox"/>
Pediatric Radiology	<input checked="" type="checkbox"/>
Perioperative Medicine/Fluoroscopy	<input type="checkbox"/>
Ultrasound	<input type="checkbox"/>

Submit Updates

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[View Full Document \(Print\)](#)

Operational reports

- **Daily**
 - Preliminary Daily Progress Reports
 - YoY Daily wRVU Compare
- **Weekly**
 - OPRO TAT Report
 - OPRO Scheduling Forecast
- **Quarterly**
 - Shift Productivity Program
 - Quarterly Progress Reports
 - Volume Monitoring Report
- **Semiannual**
 - Ideal Scheduling Percentages self reported by Radiologists to inform capacity planning and recruiting
- **Annual**
 - Recruiting Analysis
 - Review all Shift Volumes and Average Production

Capacity planning

Group By (Colors)

Date Range | ▲

- Date Range
- Patient Class
- Patient Group
- System
- Clinical Section
- Case Group

Parameters

▼ Patient Class

Select All Unselect All

- ER
- IP/OP STAT
- IP Routine
- OP Routine

▼ Patient Group <

▼ System <

▼ Clinical Section <

▼ Case Group <

▼ DOW <

Reset Parameters

First Shift Start

0 7 23

0 3 6 9 12 15 18 21 23

Second Shift Start

0 16 23

0 3 6 9 12 15 18 21 23

Third Shift Start

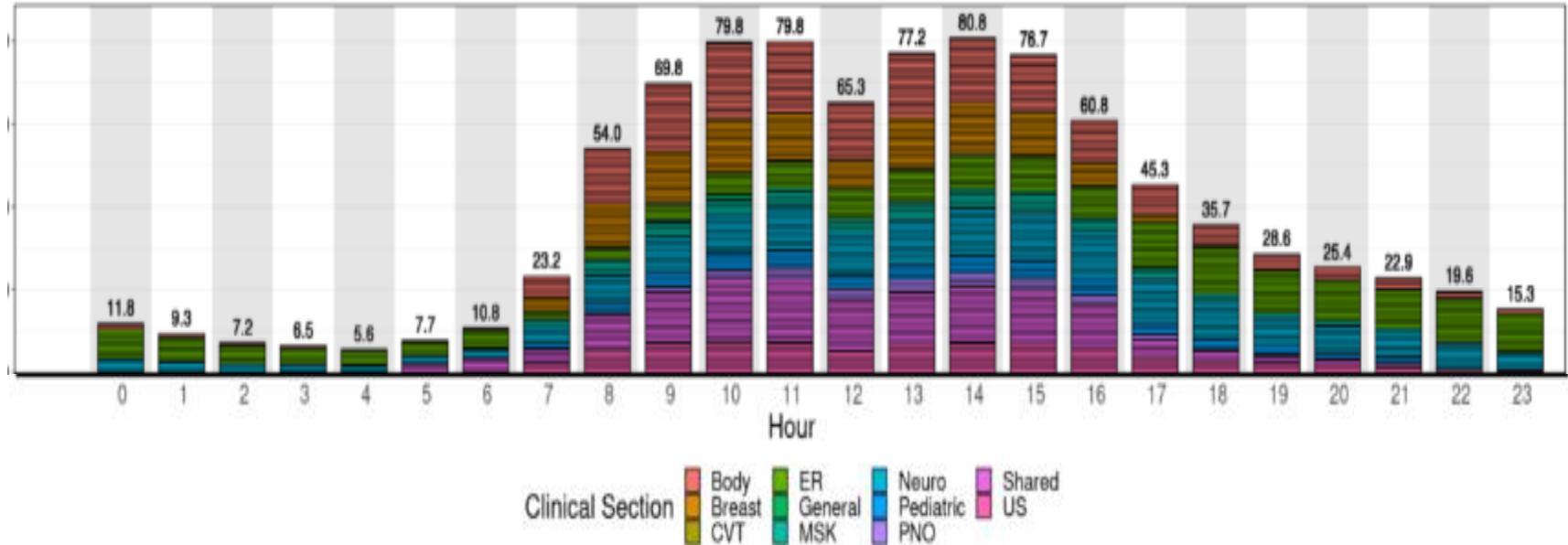
0 22 23

0 3 6 9 12 15 18 21 23

*First Shift Start must be less than Second Shift Start and Second Shift Start must be less than Third Shift Start.

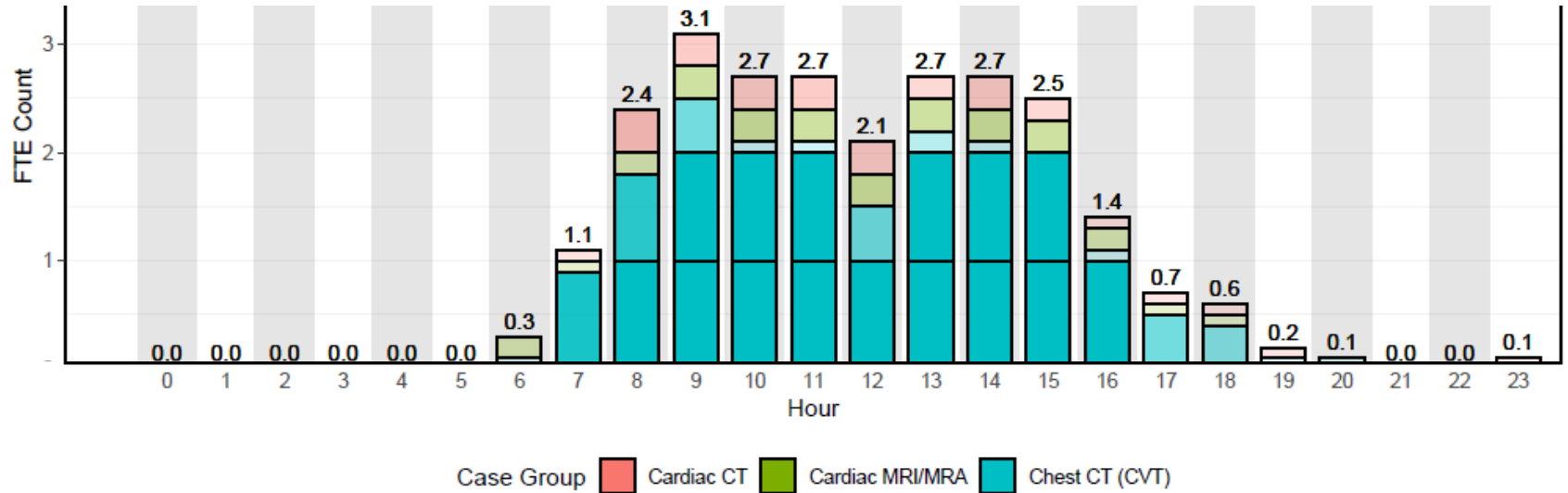
Capacity planning

Hourly FTE Estimates



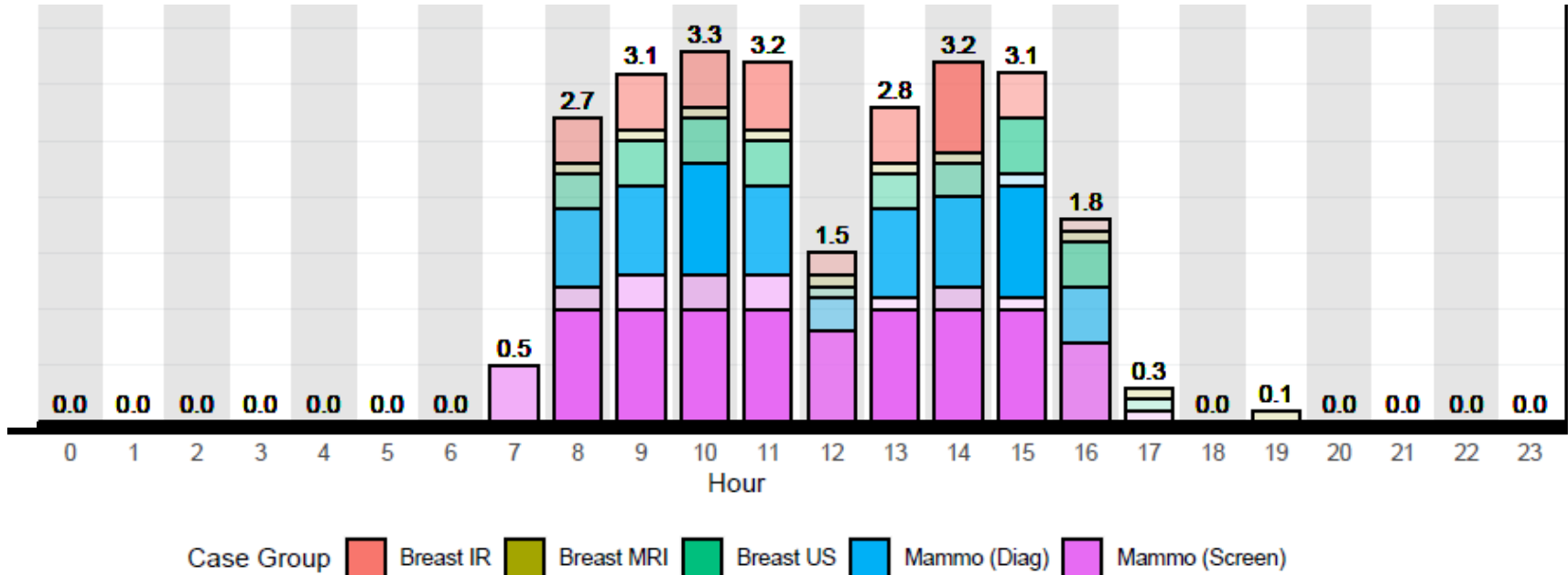
*Average Incoming Volume shown in black bar. Number of FTEs calculated from Average Incoming Volume divided by Average Staff Production per clinical section.

By section and shift



*Average Incoming Volume shown in black bar. Number of FTEs calculated from Average Incoming Volume divided by Average Shift Production per clinical section.

By procedures



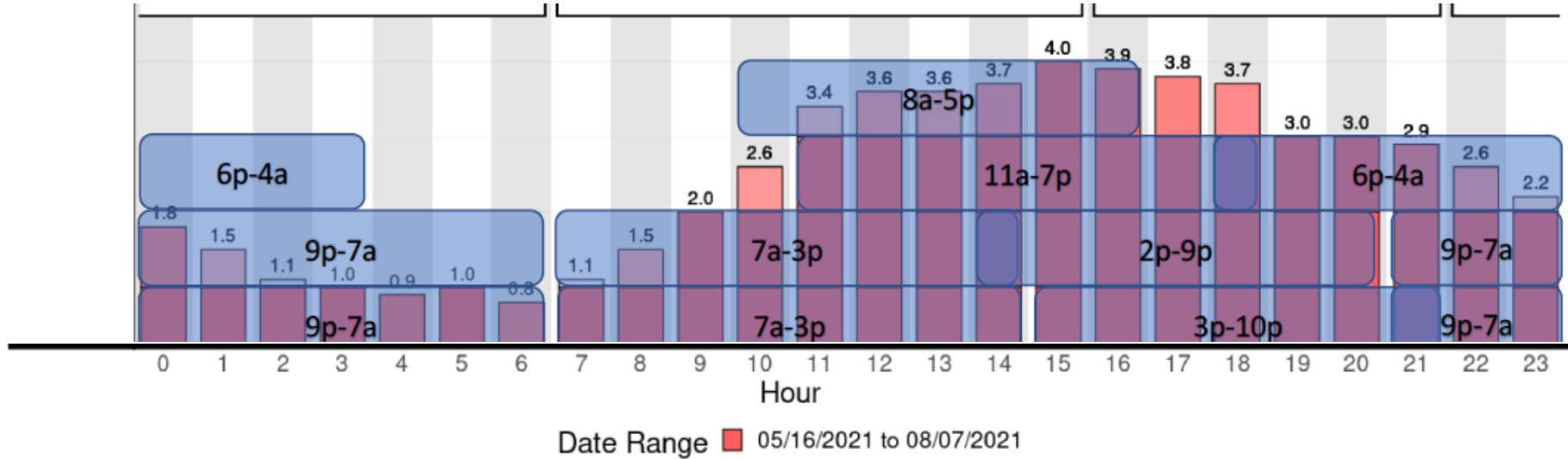
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Schedule optimized to volume



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Work life balance

- Optimize on-site staffing
- Radiologist preference survey
- 50% increase in shift distribution
- 100% increase in home workstation deployment
- Optimize on-site workstation needs and capacity

Shift Type	Average Weekday	Average Weekend
Remote	82	17
Optional	11	3
On-site	30	4

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Improved standardization

- Protocol standardization increased from **54.3% to 80.2%**
- Technologist history standardization increased **10X**
- Developed new processes to on-board new volume/growth and to predict staffing needs, scheduling and recruitment



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