#### **Hampton University Proton Therapy Institute**

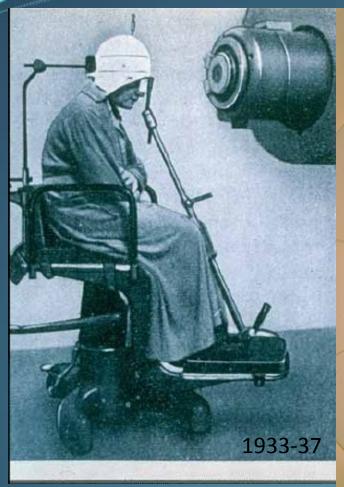
Functional and Safety Aspects of an Efficient Proton Therapy Facility Design

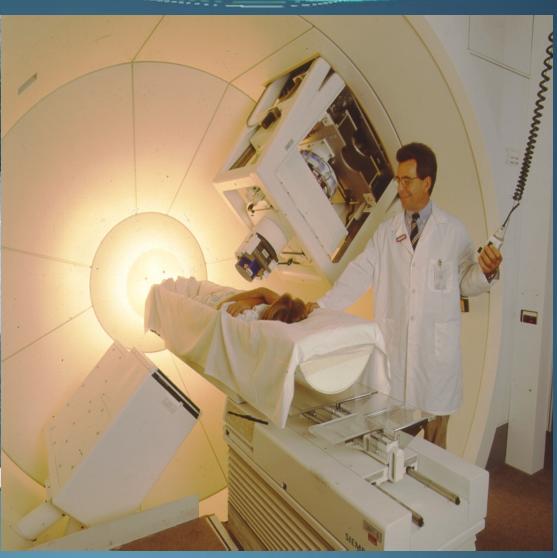
Vahagn Nazaryan, Ph.D.

Director, Technology and Clinic Operations

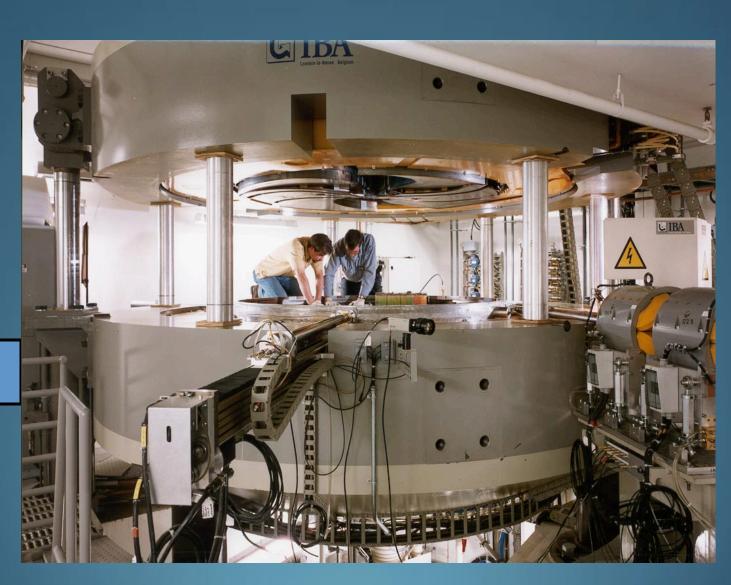
April 18, 2016

## We have come a long way...





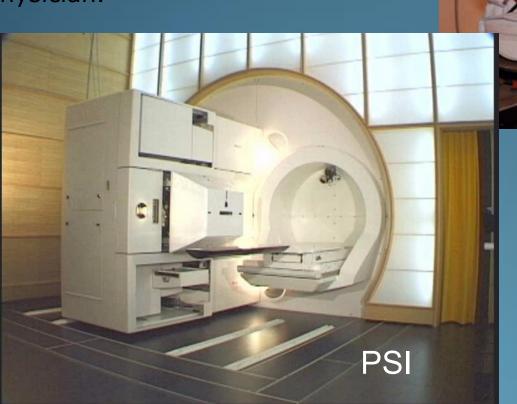
## **Accelerator vault**

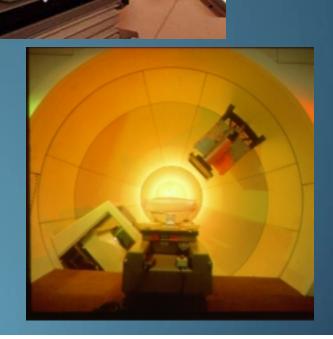


235 MeV Cyclotron

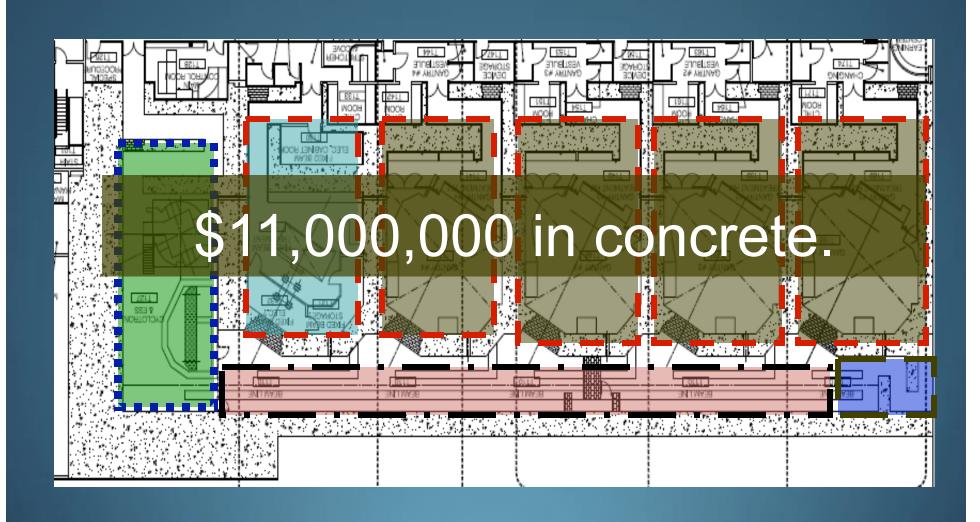
#### **Gantry Treatment Rooms**

•Treatment rooms use gantries to deliver the proton beam. The 90-ton, three-story gantries can be rotated 360 degrees to deliver the beam at the precise angle prescribed by the physician.





# What will the Hampton center look like? Inside.....





- HUPTI is a genuine national resource: a \$225M state-of-the-art cancer treatment facility and the nation's largest stand-alone proton beam treatment facility.
  - Five treatment rooms
  - Dedicated Research line
  - PET/CT imaging suite
  - Most advanced proton therapy technology available

**O** 2005

2006 **Q** 

2009 C

2011

The planning progress is well under way with vendor selection and this architectural rendering.

State-of-the-art equipment is brought to the facility for instillation.

All five treatment rooms are operational; the facility reaches completion.

Inspired by an HU alumnus, Dr. William R. Harvey puts project planning into motion.

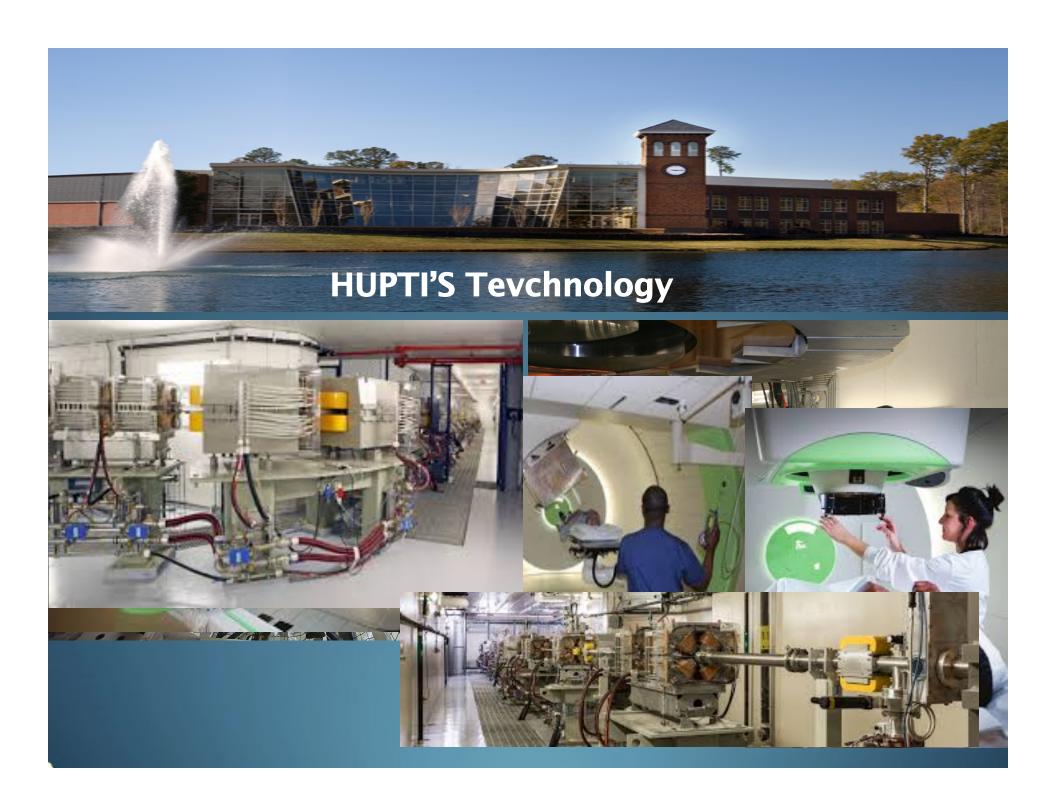
2007 Ground breaks on July 23 and official construction begins.

2010

HUPTI opens its doors to patients.

Today

With an eye toward the future, HUPTI remains focused on cancer care.



# **Operations**

# Increased Integration

Technology – Clinic - Business

#### Increase Usage

Make effective use technologies and information infrastructures

#### **Optimize Workflow**

Put best processes into use to optimize work & patient flow

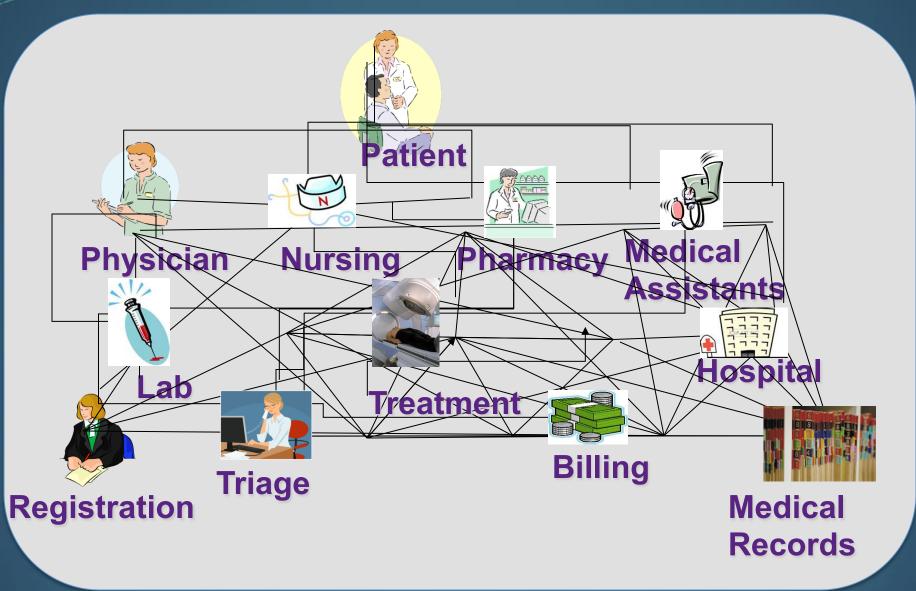
#### **Enhance Financial Performance**

Re-think and modify processes to be more productive and maximize system use

#### **Transformation/Implementation**

Assist in implementing the change through organizations

# Workflow may be complex



# **Process Engineering**

#### **Existing Departments**

- Systematically review and analyze of sites' current processes and Oncology Information System (OIS) usage, to
- Identify opportunities for process improvement, deep
  - usage of OIS → Oncology Management System
  - get as "paperless/chartless" or "paper light" as possible

#### New Hospitals/Departments:

- Best practice process mapping
- Prepare for implementation of the designed processes

# Process Engineering - Value

- ☐ Clinician / staff adoption of technology
- ☐ Eliminate redundancy and improve patient flow, care quality, financial and operational effectiveness

Results
Gets you ready
for your business,

- Create of documented, understandable, visual and maintainable operating model
- ☐ Feeds into customized vs. generic training that is tailored to your needs based on the designed processes

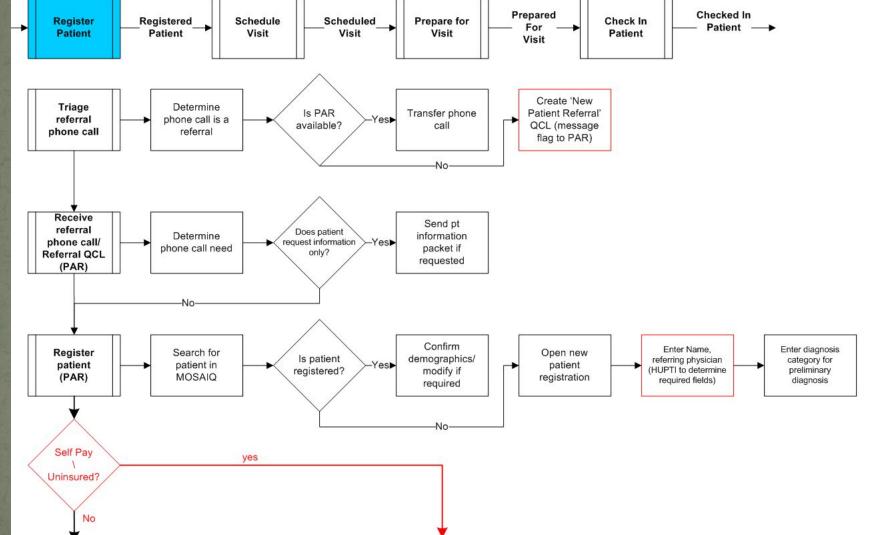
## **Common Departments**

- ☐ Finance/Billing
- ☐ Intake and Records
- Physics/Dosimetry
- ☐ Imaging
- □ Nursing
- ☐ Therapy Delivery

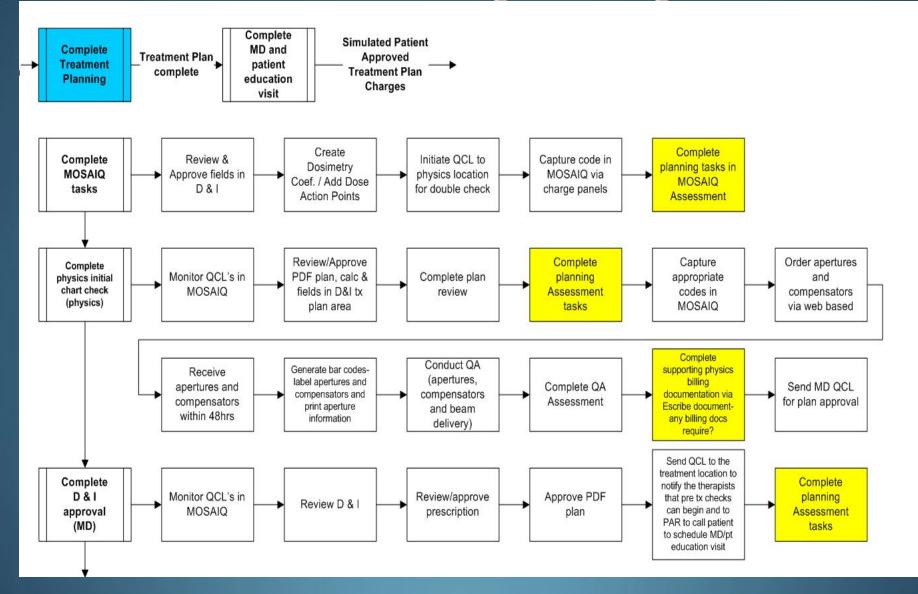
## **Critical Success Factors**



At HUPTI – Process Engineering Prepared Scheduled Prepare for Register Registered Schedule Check In For Patient Patient Visit Visit Visit Patient Visit

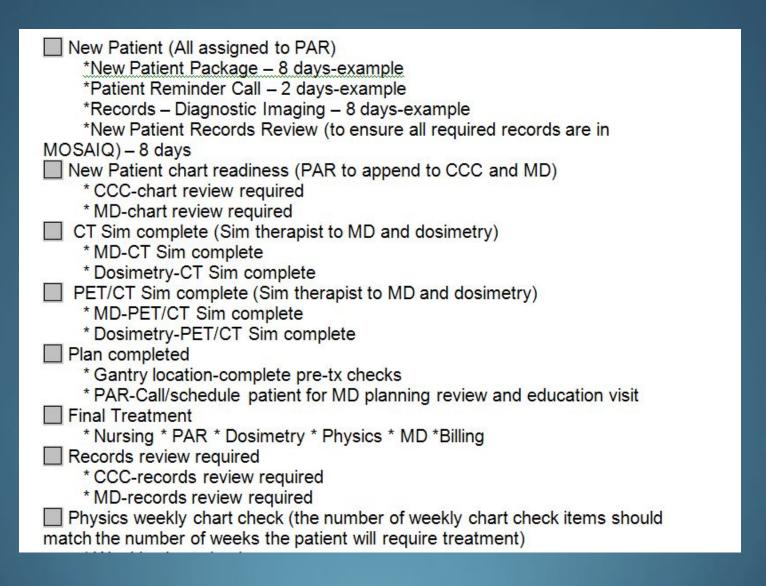


## At HUPTI – Process Engineering



# At HUPTI - Scheduling

## At HUPTI – Quality Checklist Templates



# At HUPTI – Single Item Quality Checklist

New patient referral (flag to PAR location-exclude patient's name) Ancillary referral (any staff to ancillary support: dietician, social worker, etc.) Referral or patient declined (CCC or PAR to MD) Missing reports (CCC or MD to PAR) Call patient for financial discussion (any staff to billing staff) Track tests results (PAR to PAR location) Clinical trials candidate (MD or CCC to clinical trials staff) Ancillary testing required (MD to clinical staff) Pre-auth required (PAR to PAR location) Normal structure contours complete (dosimetry to MD) Tumor volume contours complete (MD to dosimetry) Plan ready for review in Eclipse (dosimetry to physicist) Plan approval in Eclipse required (physicist to MD) Plan approval in Eclipse (MD to dosimetry) Plan double check required (dosimetry to physics) Plan approval in MOSAIQ required (physicist to MD) New scan completed (sim therapist to MD) Replanning contours required (MD to dosimetry to MD) New normal structure contours completed (dosimetry to MD) New normal structure contours completed (dosimetry to physicist) New plan (replan) ready for review in Eclipse (dosimetry to physicist) New plan approval in Eclipse required (physicist to MD)
New plan approval in Eclipse required (physicist to MD)  New plan approved in Eclipse (MD to dosimetrist)  Replan double check required (dosimetry to physicist)
New plan approval in MOSAIQ required (physicist to MD) Pre-tx checks required for new plan (MD to gantry location)

### There is no Standard...

- ☐ Typically, highly custom centers
- ☐ Optimized functionality is important for ensuring safety
- Streamline workflows
  - ☐ Efficiency is critical for viability
    - Maximize EFFICIENCY

Thank You!

Questions?