Executive Summary

- The goal of this paper and the accompanying online tool is to provide a simple way to allow managers to calculate a unique staffing number based on their own volumes and operating characteristics. The information contained here represents diagnostic radiology, CT, MR, ultrasound, nuclear medicine, mammography, and PET.
- Possible factors that would impact staffing outside the raw numbers were taken into consideration and explained here (eg, productivity, customer service, equipment utilization, etc).
- The strongest methods to guide staffing are engineered standards and lean process analysis. These will lead to the discovery of the true opportunities within your work environment.
- Staffing models are like black boxes - you put some numbers in and it shoots out the results. The “black box” is described here along with guidance in using the numbers to support staffing decisions.
- The results of the estimator will undoubtedly be different than the actual results from your organization. Hopefully, you will fall within the estimated range, but if not (even if it does fall within the range) consider the opportunities for enhancement. Provided here are some better practice methods with suggestions for an overall approach at improvement, as well as specific techniques.
- Resulting data from the tool should be regarded as a “guideline” rather than an “absolute standard.” Thus, a deviation between any one operation's figures and a number appearing in the report is not necessarily good or bad; it’s merely an indication that additional scrutiny may be warranted.