



Optimizing lab operations through digitized processes with cobas® infinity lab solution

Case study of Burjeel Holdings GCC







Synopsis

Burjeel Holdings is a healthcare provider in the Gulf Cooperation Council (GCC), established in delivering specialized care for complex therapies.¹ Burjeel Holdings has 13 hospitals, taking care of over 4.3 million patient visits. coLAB Services operates and manages for the Burjeel Holdings laboratories more than 10 million tests a year. The high volume of patients and tests placed unique challenges for Burjeel Holdings, specifically, for their operational efficiency, testing capacity and quality. Before using **cobas**[®] **infinity laboratory solution** (**cobas**[®] **infinity lab**), Burjeel Holdings largely followed manual approaches and had lots of pain points. In the legacy process, the local staff needed to manually identify samples and enter data into the local Laboratory Information System (LIS) for transcription in addition to handling transcription errors. All the manual processes led to high FTE costs, were error prone, and resulted in longer turnaround time (TATs). Hospital leadership urgently wanted to identify a solution to transform their manual processes to digitization, starting with laboratory sample management. After thoroughly assessing laboratory applications across the industry, they chose **cobas**[®] **infinity lab**, because it offered advanced end-to-end sample management capabilities with a high degree of interoperability and data aggregation. **cobas**[®] **infinity lab** allowed information to flow seamlessly within the network, including the twelve clinical laboratories and four different health information systems.

cobas[®] **infinity lab** was implemented at Burjeel Hospital Abu Dhabi Lab in September 2021. Three months after implementation, evaluation teams assessed the performance of **cobas**[®] **infinity lab** with a combined qualitative and quantitative approach. After mapping out the workflows in the legacy approach (using the manual process) and the workflow after implementing **cobas**[®] **infinity lab**, they found that the new process was much more streamlined, and the number of key tasks were reduced by 69% (page 6).*

For the quantitative evaluation, the Burjeel evaluation team collected TATs for all tests extracted a month before and a month after implementing **cobas**[®] **infinity lab.** A comparison of the median TATs before and after implementation revealed that the median TATs across all 114 tests on average were reduced by 46%. For some tests (e.g. Testosterone calculated Panel), the reduction was as much as 93%. The reductions in TATs were statistically significant (page 8).

"When consolidating, making changes in the health information system (HIS) was a mammoth exercise and included multiple stakeholders. We wanted to create a common workflow across all our labs to drive efficiency and improvement without necessarily changing the HIS and cobas[®] infinity lab enabled us in doing so. With cobas[®] infinity lab we were able to consolidate more tests in a centralized location. The time saved in pre-analytical processes helped us compensate for the transportation time, ultimately reducing the overall TAT."

Mr. Mayur Sabhani | Group Director Burjeel Holdings





As a result of these significant benefits from **cobas**[®] **infinity lab**, Burjeel Holdings has begun a full lab operations digital transformation with the support of the Roche portfolio. The **cobas**[®] **infinity lab** manager now provides multi-site integration to consolidate care across their 3 hospitals by streamlining process efficiency, reducing expenses and increasing diagnostic services.

Background

Founded in 2007, Burjeel Holdings (erstwhile VPS Healthcare) evolved into a quaternary care provider, with a growing presence in Oman and Gulf Cooperation Council. The facility provides world-class healthcare services and facilities to patients, visitors and residents. Burjeel Holdings has over 1200 doctors, 13 hospitals, 1600 beds, 69 operation theaters and takes care of over 4.3 million patient visits per year. Their laboratories are managed by a subsidiary, coLAB Services, which conducts through its 250 plus laboratory staff (clinical and administrative) around 10 million tests a year.

The legacy procedure for running this large volume of testing before **cobas**[®] **infinity lab** entailed staff manually completing a number of pre and post-analytical tasks, which were physically and mentally demanding, required high manpower cost and were error-prone. After sample collection, staff packed all the tubes individually together with the clinical order, then a courier transported the samples to the laboratory. Upon arrival at the laboratory, a technician checked each specimen one-by-one and documented them in a log sheet. Afterwards, a technician entered the information into the Electronic Medical Record (EMR) to register the sample and print a label for each specimen. After completing the sample arrival process, the samples were then processed using various instruments and methods. Once ready, the results were then be reviewed and validated by the laboratory professionals in the Laboratory Information System (LIS). The last step was to generate a report including all the test results, which were then sent back to the physicians.²

After sample collection, staff packed all the tubes individually together with the clinical order, then a courier transported the samples to the laboratory. Upon arrival at the laboratory, a technician checked each specimen one-by-one and documented them in a log sheet. Afterwards, a technician entered the information into the Electronic Medical Record (EMR) to register the sample and print a label for each specimen. After completing the sample arrival process, the samples were then processed using various instruments and methods. Once ready, the results were then be reviewed and validated by the laboratory professionals in the Laboratory Information System (LIS). The last step was to generate a report including all the test results, which were then sent back to the physicians.²

"The digital transformation of laboratory process helped us unlock efficiencies in our network and better use our resources. Ultimately, it enabled us to in expand our service line. Another benefit for our clinical colleagues, is that we now deliver the test results digitally, facilitative easier consultations."

John Sunil | CEO Burjeel Holdings





Because the laboratory process was manual, complex and time consuming, Burjeel Holdings wanted to improve process efficiency to deliver more specialized care for its patients. When the team conducted a thorough assessment of the operations to understand the change implications on each personnel, they guickly realized that an advanced laboratory process manager could be built on the existing EMR and LIS, in order to avoid a complete change of their IT solution.

	y Data Letty Tene 022119 04 32 23 102219 08 32 24	Work areast Server	Nork Area							1	
	y Exte Cety Tene N/2119 06 32 23 N/219 08 32 24	Specimies ID									
	02019 06 32 23 02019 08 32 24		Patient Name	Padent D	THE STATUS	Punding Sects	Last target and position	Ternaround Stree	Critical	Order 10	
2019 1 2019 1 2019 1 2019 1 2019 1	02019 0832.24	280730004	Gunderson, Paulette	P71031401		la su de la companya	L3_A087(5505-7-10)	00.47	144	236730004	_
6100 6100 6100 6100 6100 6100 6100		290730005	Cooper, Yandai	P90730005			L1_AD8/(6508-5-6)	00.46	Yes	290730005	
2019 23 2019 23	002019 003224	290730006	Cooke, Reagan	P90730005			L1_A00/[5509-2-8]	00.40	195	296730006	
C3 600	02019 0832.25	290730007	Vila, Kandra	P90730007			L1_A08/[5582+19+3]	00.37	785	296730007	
	02019 0632.29	290730008	Knex, Cedic	P90730008			L1_A08/[0007-4-2]	00.00	795	290720006	
C 4004	002019 003221	280730002	Concerson, Paulete	P71031401		FORER CALLS TRONTS HILL	L1_0001/[100000000-5-1]	00.15		290730002	
23 6000	102113 08.32.27	290730040	Page Elector	P90730013			15 408/15582 1 11	00.33		290730030	
E3 6000	002118 08.32.22	290730003	Gunderson Paulate	P71031404			1.5 #525.0 900000004.9.51	60.12		296730003	
73 etca	002010 00.22.18	280720001	Quederoon, Paulade	P71031401			L1 #601/11000000884-9-31	0031	-	290720001	
7.1 6700	02119 08.32.28	290720911	Hammond, Mattes	P90730011			L1.A08/15501-5-91	00.31		29(720211	
0019	02019 04.32.35	290730021	Monda Hard	P90730021		CA OL COZ ONEA GLU K LACT NA B	L1.8100/	00.06		296730021	
L1 enas	02019 08.32.35	290730022	Anderson, Made	P90730022	•000000	DOMER, CK-MILTROPTS, H.L.L.	L1_8100/	00.00		290730022	
E 6700	02119 00.32.36	290730023	Obtion , Demation	P90730023		CA CL, COZ, CREA, GLU, K, LACT, NA, B.	L1_8100/	00.64		290730023	
C 0000	02119 083229	290730012	Meja, Jimena	P90730012			L1_A08/(5505+4+2)	00.29		210001385	
E 6730	02019 00.32:29	290730013	Drake, Graham	P90730013			L1_A00/(5501-5-1)	00:29		296730013	
E3 6000	02019 06 32 30	290730014	Oavia , Zeiden	P90730014			L1,A08/(5505-6-5)	00.20		290730014	
0010	02019 083231	290730015	Ramos , Desmond	P90730015	00000		L1_AD8/(6507-6-2)	00.26		290730015	
E1 6750	62119 083231	290730015	Gordon , Anabella	P90730015		DOMER, CK-MIL TROPTS, H. LL	L1_d8-27[7971-4]	00.24	_	290730096	
C 000	02018 063232	290730017	Buttey, Wancel	P90730017	CODDCD	DOMER, CKARLTROPTS, H.L.L.	L1_08+2/[7896+1]	00.18		290730017	
C eros	02019 06 32 33	290730018	Made, Aracely	P90730018	•00000	DA CL. DOZ. OREA GLU, K. LACT NA. B	L1_08-17[7987-4]	00.10	_	290730018	
C 000	002010 003233	291/2011	Plat, Selena	PRODUTE	•	DOMER, DAME, THUP1S, PLLCE	L1_08427[7799-3]	WW		200100019	
							Datus without including a	leiged lesis Filler			
< >>> sept 1	1 of 1 Records:22						Dtatus in selected location	ns		P Film (1	içiket Mer
ation	utica catacica - Cat	and the second second				_ Show habes				Anagement	
	v	Contraction (Call				@hom				Sendraruha ta haut 🛛 🔻	D Plat
-	and the second se					Owith lasts there 0+Core Lab					

Figure 1: One example of a validation screen in

cobas[®] infinity laboratory solution. It is intuitive and easy to use.

Implementation of cobas[®] infinity lab solution

coLAB team at Burjeel holdings implemented cobas[®] infinity lab at Burjeel Medical City. cobas[®] infinity lab a laboratory process management solution that, integrated the existing IT infrastructure and connected different health information systems. It has been shown to be highly competent, enabling seamless integration between data producers and consumers, while at the same time being easy to use and understand (Figure 1). cobas[®] infinity lab streamlined information management as it provided laboratory personnel with relevant information at all times with an interface for alerts, required actions and system overview. Laboratory personnel could simply navigate the platform, with the support of task notifications. What has been unique with the cobas[®] infinity process manager is that it not only integrated sample processes from order to result, and from pre-analytics to archiving, it also has been completely browser based, allowing users to access and use the software from any desktop computer.

In addition to driving intelligent sample processing, **cobas**[®] infinity lab efficiently managed the samples with the advanced workflow engine integrating the process, from ordering to test result, with paperless reports. After sample processing, structured options for both manual and automatic archiving have been available for a defined period. It deliver orchestrated all the lab processes and enabled a personalized automation for enhanced operations in all different types of laboratories from low to high-volume output.

Automation of manual tasks and streamlined workflows

The implementation of **cobas**[®] infinity lab demonstrated increased laboratory efficiency within and across departments.³ With a simple scan, laboratory personnel sent data directly to electronic medical record systems. Leveraging the tight integration between cobas[®] infinity lab and cobas[®] infinity POC solution, diagnostic devices could easily be managed and connected to the, eliminating the need for manual documentation tasks such as order entry printing, logging, result management, quality control, etc.

Furthermore, lab personnel no longer had to ensure that samples were manually identified and entered into the system. With the significant reduction in clerical steps because of automation, lab personnel and could now work on more complex duties. Standalone automation delivered enhanced transcription error handling, safety and process quality with an intelligent and customizable sample distribution.

cobas°

The end-to-end process manager enabled full traceability of samples regardless of it being processed manually or automatically; lab personnel could now easily determine where the sample was, where it has been and where it was going. Maximizing the availability of the software solution leveraging the proactive maintenance capabilities in addition to the advanced remote troubleshooting features bolstered business continuity.

"Samples are now ready for immediate processing and sent to Central lab, as we only have to sort the samples at the phlebotomy location."



Roch



Figure 2: Example of patient samples sorted and packed in a specimen bag, prior to being sent to the laboratory.



Figure 3: Example of samples sorted into automation racks at the time of sample drawing, before being sent to the lab.

After implementation of **cobas**° **infinity lab**, the automation of pre-analytic tasks resulted in faster sample reception registration procedures, including arrival registration and sample review. Pre-implementation sample arrival registration time was on average 31.6 seconds (SD = 21.5), ranging from 4 seconds to 52 seconds based on observations of 5 consecutive samples.

After the implementation of cobas[®] infinity lab arrival registration time was reduced to 9.0 seconds on average (45 seconds total for 5 consecutive samples), resulting in a 72% reduction.

In addition, pre-implementation sample reviewing time in pre-implementation was on average 13.2 seconds (SD = 5.9). In post-implementation of **cobas**[®] **infinity lab**, all normal results were validated through **cobas**[®] **infinity lab**, at no time cost for the lab technicians. Only the abnormal results required lab technicians to validate, and it took on average 4 to 8 seconds to validate each abnormal result.





Legacy workflow at Burjeel Holdings

1

Staff manually completed a paper order of the test that was individually packed with each bag of blood collection samples.

2

Courier transported the samples from the collection site to the laboratory.

3

Once the samples arrived at the laboratory, a lab technician checked each specimen individually and documented information in three different places: log sheet, referral book, and the billing sheet.

4

A technician manually entered the content of each paper order into the Electronic Medical Record (EMR) to register the sample and print a label for each specimen.

5

After testing the sample, the results were manually validated for sample integrity, system errors, result range and delta check, etc.

6

A lab technician manually ordered reruns or additional testing based on the validation outcomes.

7

A report was generated and then emailed to the physicians.²







"We are now able to focus more on our clinical tasks, due to the time saved through the new auto validation process for test results."

Senior Technologists | Core Lab

Value creation with lean validation

Manual validation of test results became a story of the past with **cobas**[®] **infinity lab**. Sample quality checks were managed conducted early on with the support of **cobas**[®] **infinity lab** for tube type identification, liquid and volume detection, spin status and sample quality checks. With lean validation, lab personnel analyzed the test results through an advanced set of rules and criteria, enabling them to focus on those test results that really needed attention.

Technical results verification could be conducted for sample images, instrument flags, reference ranges, previous test results and more. In addition, **cobas**[®] **infinity lab** supported clinical result verification based on rules and criteria, to identify those abnormal test results that required extra attention and automatically released those that met the criteria.

These rules also allowed reruns and further testing to be automatically arranged. Manual work was further reduced by the capability to reformat test results and add comments. Altogether, **cobas**[°] **infinity lab** has been highly valued for its advanced automation with lean validation feature.³ "**cobas**[°] **infinity lab** is the one-stop-shop for pathologists," says Mayur, as it dramatically reduces manual work on all fronts.

Moreover, **cobas**[®] **infinity lab** has enabled a complete overview of their quality control processes and how their instruments performed across devices and location.

"A one-stop-shop for laboratories, cobas" infinity has earned a stellar reputation for it's cutting-edge capabilities of algorithm-based result verification while improving patient safety and several key performance indicators. It enabled laboratory staff to redirect focus on key activities through the substantial reduction of manual work."

Chief Clinical Pathologist





Reduced turnaround time

The Burjeel evaluation team collected sample turnaround time (TAT) data to evaluate the impact of **cobas**[®] **infinity lab.** Turnaround time (TAT), defined operationally as the difference between verification time and extraction time, was available for each test. 183,177 runs data were collected before the introduction of **cobas**[®] **infinity lab** and 575,231 after, and therefore, in total 758,408 runs were collected from a total of 114 unique test types.

The distributions of all TATs for all test types before and after the implementation of **cobas**[®] **infinity lab** are illustrated (Figure 4). Overall median turnaround time before **cobas**[®] **infinity lab** implementation was 7.0 hours (Median Absolute Deviation = 5.2 hours), and after implementation, it was 4.0 hours (Median Absolute Deviation = 2.9 hours).

For each test, the percentage reduction in median turnaround time was calculated for before and after the introduction of **cobas**[®] **infinity lab**, defined as 100 * (T^b - T^a) / T^b, where T^b, T^a are the median turnaround times before and after **cobas**[®] **infinity lab**, respectively. The distribution of the percentage reduction in median turnaround time, (Figure 5) demonstrates vast majority of tests benefited from a substantial reduction in median turnaround time. On average there was 46% of reduction in TATs. The difference between TATs before and after was significant.



Turn Around Time

Figure 4: The distributions of all TATs for all test types before and after the implementation.

Infinity After Before



Percentage of TAT Reduction (before vs after)

Figure 5: Demonstration of the distribution of the percentage reduction in median turnaround time.





Improved operational efficiency and potential impacts on financials

Burjeel Holdings observed financial improvements as a result of shortened turnaround time, greater throughput, increased testing volume, staff productivity, and improved patient satisfaction. For example, certain immunoassays that only ran once a day before were now running multiple times in a day. With connected automation, **cobas**[®] **infinity lab** connected different instruments to maximize the predictability of time to test results. Physicians who have been impressed by same-day turn-around of test results, increased uptake and utilization of laboratory services.

In parallel, the cost of running immunoassays was observed to have a reduced nearly 20%.³ The analysis was done through regular quarterly and semi-annual laboratory processes as well as performance assessments performed by Roche Healthcare Consultants at the site. The time spent by the lab personnel doing the tasks at the sample reception area, accessioning area, analysis and post-analysis area (including results validation and release) were all measured. Additionally, a set of samples was timed and the average time to complete the steps per sample for each full time employee was measured. The laboratory process and performance assessments also included complete workflow analysis and process maps to identify non-value adding tasks and wastage in movement and time.

			Extra barcodes		
MANUAL PROCESS Lots of tests prone to error		SAMPLE RECEPTION	Complex process led to increased TAT		
		CAME LE MEGEL MON	Barcode label didn't show required tests		
			Billing process was long and time-consuming for Burjeel Holdings samples		
			Sometimes samples came without stickers		
			IT integration was the major draw back		
	47		Sorting and testing distribution consumed a lot of time and effort		
			No auto-verify and reviewing was done manually		
		CEINICAE CHEMISTIT	Big batches overloaded the systems		
			No routine sample receival log books		
			No recapping with original caps, disposable caps were used		
		IMI NOVEMENTS	Maintenance and QC were done in the evening		







Facilitating digital transformation

The **cobas**[®] **infinity lab** implementation has been a flagship success; a "proof of concept for digitalization," as stated by the Director. Hospital personnel have been excited for more digitalization changes.

Building on this momentum, implementation plans for **cobas**[®] **infinity lab** quickly rolled out for all the patients needed to Burjeel Holdings hospitals. With **cobas**[®] **infinity lab**, Burjeel Holdings brought improved experience for patients. Before the implementation of **cobas**[®] **infinity lab**, patients had no visibility into their patient journey. Patients needed to wait for test results from their healthcare providers (HCPs). In contract, **cobas**[®] **infinity lab** enabled the delivery of test results to patients digitally. This enabled patients to better plan and schedule their consultation with HCPs, instead of waiting for days or even longer.

cobas[®] **infinity lab** has been designed to evolve with the needs of customers and the healthcare industry. Roche has been committed to build on its existing software portfolio, and invest in a new digital backbone that will aggregate data across lab disciplines and across locations. With new tools and services, Roche will continue to improve the quality and efficiency of laboratory diagnostics.

"The partnership with Roche, enabled the digital team at Burjeel Holdings to design and implement an integrated workflow, including reporting and regulatory compliance, all within a short time span. We now have bidirectional capability integration between cobas[®] infinity lab and our HIS systems that enable a seamless flow of information. It includes sophisticated reporting capabilities for delivering reports to patients on digital channels such as Mobile App, SMS, WhatsApp, all in line with the regulatory requirements of realtime event registration."

Pradeep Shilige | CIO Burjeel Holdings

References

¹https://burjeelholdings.com/about-us/ ²Based on the laboratory workflow analysis and mapping activity provided by Burjeel Holdings ³Based on interview with Burjeel Holdings

Signature Page for MC--11638 v1.0

Legal Approval	Emily Wilson (emily.wilson@roche- diagnostics.com) on behalf of Debra Robinson Legal 11-Apr-2023 13:44:10 GMT+0000
Regulatory Approval	Kazuo Semitsu Regulatory 11-Apr-2023 23:08:04 GMT+0000

Signature Page for MC--11638 v1.0