# Characterizing complex sociotechnical systems: a comparison between emergency departments in Brazil and the USA

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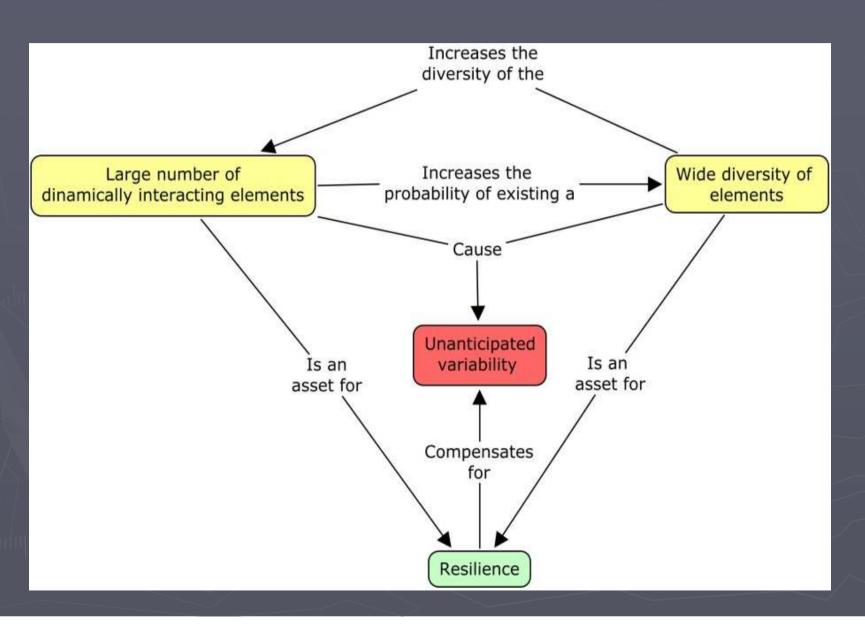


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## Background

- Complexity has a number of attributes with different intensities
  - Description may support system design
- Lack of methods
  - Not committed to an explicit description of complexity attributes (e.g. FRAM)

## What is complexity?



# Objective of this paper

Test a <u>framework for characterizing</u> complexity attributes



- University hospital
  - Public healthcare network
- General practice, general surgery, gynecology and pediatrics
- ➤ 55,000 patients a year; 250 employees; 41 beds; 20 seats



University hospital

- = to Brazil + trauma
  - Higher incidence of life-threatening cases
- ► Residence in emergency medicine
- ▶ 86,000 patients a year, 270 employees, 82 beds

### **Data Collection**

- Observations of work at the front-line
  - 110 hours in Brazil, 65 hours in the USA
- Analysis of documents
  - SOPs, training programs,...
- ► Interviews with employees
  - 20 in each ED
  - Critical decision method

## **Data Collection**

- Questionnaire to evaluate the intensity
  - 22 statements across the four categories of complexity attributes
  - 120 USA, 79 Brazil; questerview

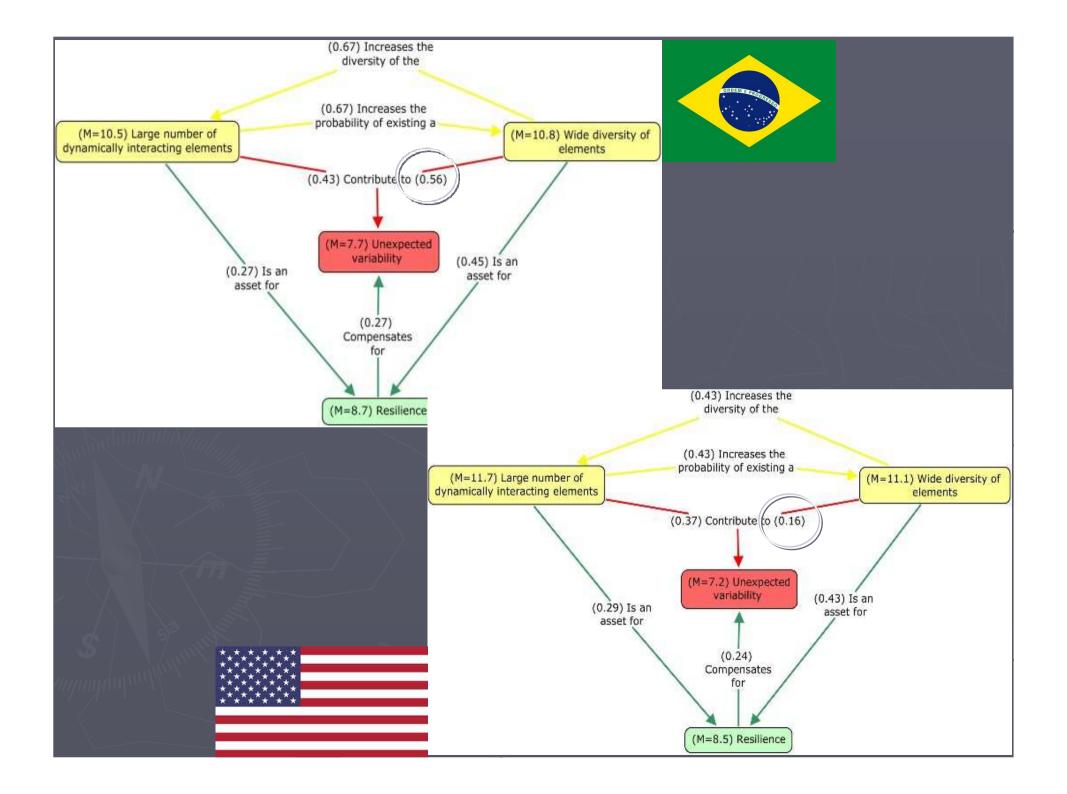
There is substantial slack in my work environment (e.g., equipment and team redundancy; plenty of time to make a decision; alternatives of medication)

Totally disagree Totally agree

## **Data Analysis**

► Content analysis; descriptive statistics

 Description of the four categories of attributes, concept maps, types of complexity



#### **Main Results**

In the U.S. ED, the diversity of employees' skills matches better the diversity of patients' conditions

- Helps to deal with unexpected variability
- Residence + wider diversity of RS in the USA
- E.g. workarounds involving the use of equipment and materials

# **Types of Complexity**

Complexity Type	Liability	Asset
Unmanageable	Some uncertainties arising from the external environment – e.g. diversity of patients, overcrowding,	Some uncertainties arising from the external environment – e.g. new technologies, new possibilities of funding,
Manageable	e.g. inefficient internal processes, waste	e.g. diversity of skills of employees



## Not manageable / Liability

Number and diversity of conditions of patients

Overcrowding





# Manageable / Liability

- Prescriptions delivered to the pharmacy <u>once a</u>
  <u>day</u>, for the following 24 hours of treatment
  - Reduces interactions physician pharmacy
  - Increases time pressure and number of interactions pharmacist medications
  - Smaller batches could increase resilience capacity



# Manageable / Liability

Looking for medications and patients



#### Conclusions

- "Attribute view" of complexity
  - Quantification and description of complexity
  - Objective and relative account of complexity
- Impact of some complexity attributes is ambiguous
  - Types of diversity

### Conclusions

- ► Manageable/unmanageable is negotiable
- Which control measures are realistic?
- Unmanageable: resilience for compensating variability
- Manageable: resilience for *preventing* and *limiting* variability
- Complexity characteristics were similar
- Do they evolve similarly? Why? How?

# Thank you for your attention!