

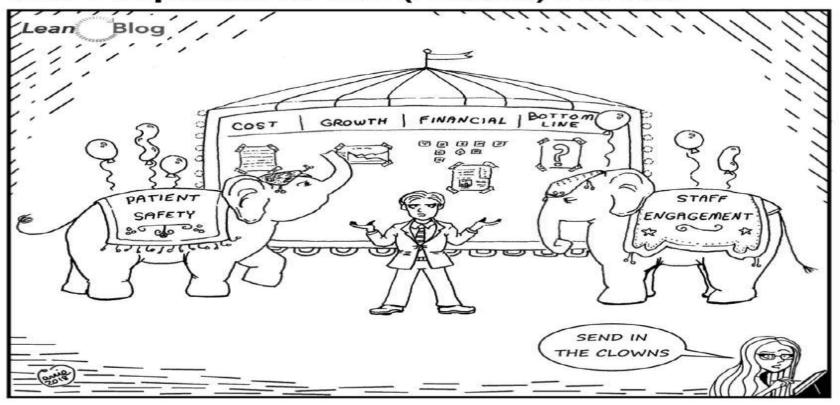
#### History of Tech in Healthcare

- Manometer was invented in 1661- Used for Blood pressure measurement in 1901- 240 Years
- Modern Thermometer was invented in 1714 by D G Fahrenheit using Mercury-Used for measuring body temperature- in Healthcare 1866 -152 Years
- Ultrasound invented in 1860- used in healthcare -1960- 100 years

"Healthcare is always the last to adopt technology"

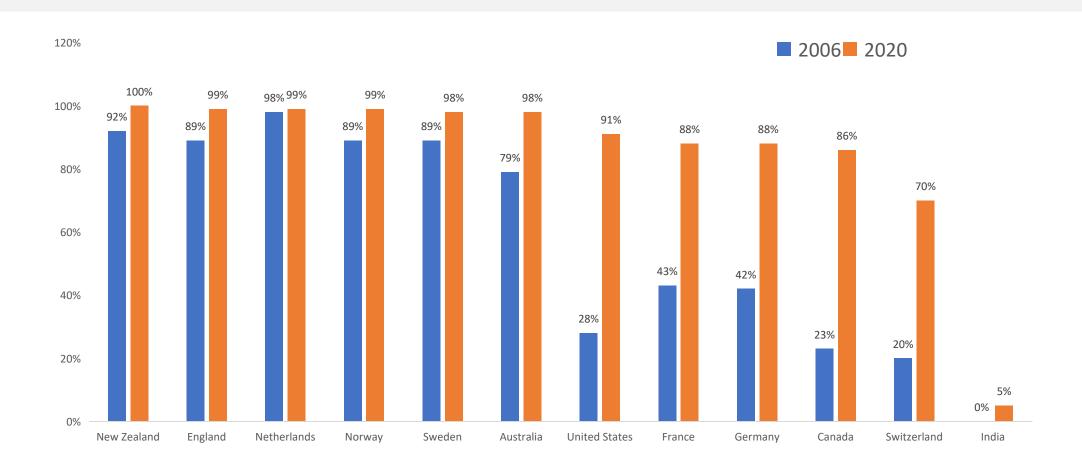
#### Misplaced board Room

#### The Elephant in the (Board) Room



"Who invited them to the huddle?"

# Usage of EMR in daily practice except Billing



### Some insights....

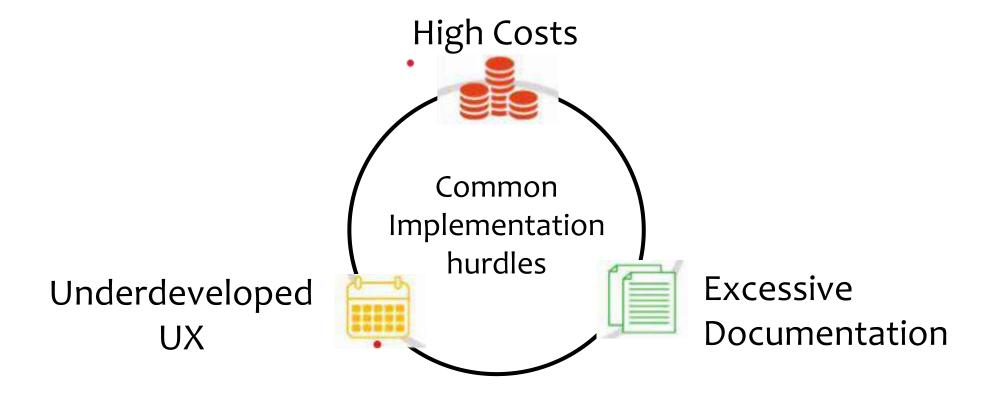
Even though the adoption rates are higher in the western world, there are still challenges

- ➤ Physicians / clinical teams hate EMR & IT tools
- ➤ When asked by medical economics: 36% suggested documentation issues
- ➤ 35% reported a lack of user-Friendliness
- > The greatest improvements will be in Patient engagement, accessibility, regulation and standardization
- ➤ Big changes like AI, blockchain, CDSS and the presence of tech giants

## Why Clinical Staff hate IT tools?



#### Information Technology Solution Implementation hurdles

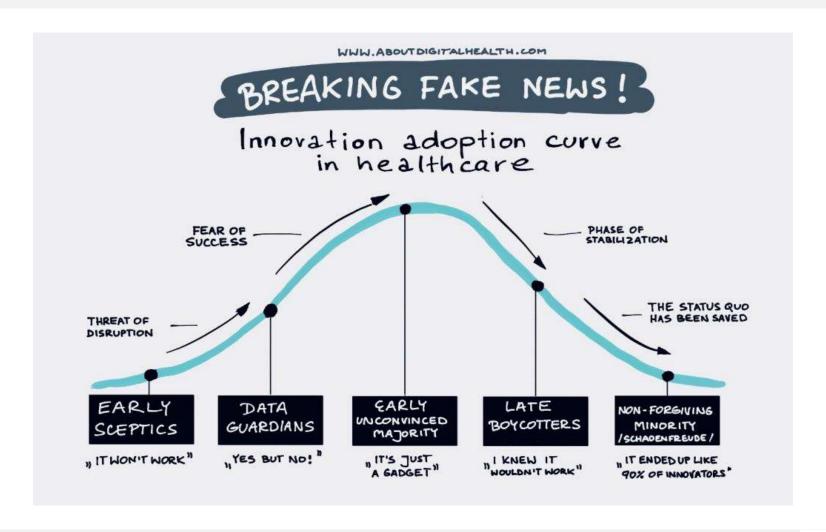




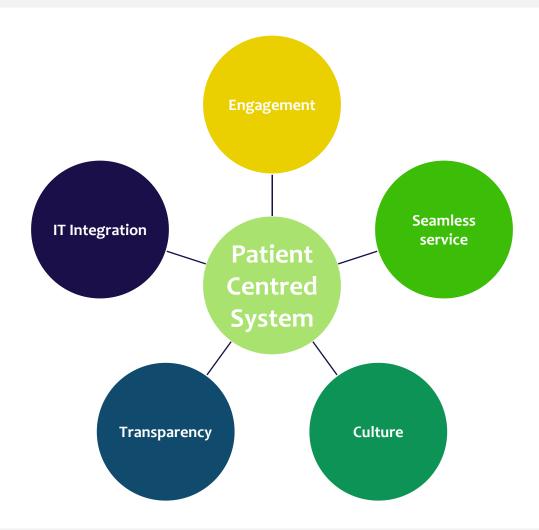
# "The patient in the next bed is highly infectious. Thank God for these curtains."

# **Jugaad** in Healthcare

#### Innovation Adoption in Healthcare



## **Patient Centred System**



#### Improved outcomes and lowering costs

- ✓ Through culture, Clinical analytics, evidence- based practices and adoption
- ✓ Clinical analytics plays a pivotal role in scalable, sustainable quality improvement
- ✓ Data is a vital component of patient safety and quality
- ✓ But data without the afore-mentioned supportive culture isn't as effective
- ✓ Leverage Clinical analytics to enable providers to focus on difficult cases while ensuring quality care is given in all cases



# **Improving Outcomes and Lowering Costs**

Through Culture, Clinical Analytics, Evidence-Based Practices, and Adoption

According to Dr. Woods, the one word that best describes a culture of safety is — *civility*.

Action is taken, feedback reliably provided, changes are visible for staff and patients

Concerns raised by front line caregivers are taken seriously.

No one is ever hesitant to voice a concern about a patient

Skilled caregivers playing by the rules, feel safe to discuss and learn from errors

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#### **Evidence**

Computerised Physician Order: reduction in medication errors (only when integrated with CDS Clinical decision support
(CDS): Improvement in
Process adherence,
medication ordering
Vaccination, Lab ordering and
clinical outcomes

Electronic sign off /Hand off Tools: Improved handover process, fewer omissions of critical patient information Bar code medication administration: Reduction in medication errors and adverse drug reactions, reduction in mislabelled lab specimens

Smart pumps: Reduction in pump programming errors

Patient data management systems: Reduction in charting time, increasing the time spent in direct patient care and reducing the occurrence of errors

Automated medication dispensing: Reduction of medication errors in Critical care units

Patient portals: Improved patient medication adherence, disease awareness, selfmanagement of disease and patient satisfaction

Telemedicine- Virtual visits: As effective as face to face with regard to specific clinical outcomes

Quality management systems: Significant increase in adverse and near miss event reporting, significant reduction in data collection time

EMR: Improved guideline adherence Reduction in medication errors, Reduction in adverse drug reactions

#### **Changing Dynamics**

- Rapid innovations in technology are influencing the future of EMR
- Al and Virtual assistance like Alexa and Siri become more accessible and powerful and will appear in health IT fields in a big way

"Virtual assistance are also coming online to help those physician burdens, in particular the aspects of the physician workflow issues that computers can streamline,

For patients, the big development is expanding online or smartphone access to your health information and the ability to combine information from different providers and update automatically"

#### **Blockchain and EHR**

- Block chain uses cryptography to secure EHR data and makes it available only to those with access to it.
- Blockchain can:
  - Validate clinical trials and claims
  - Track medicine distribution
  - Authenticate prescriptions and prevent insurance frauds
  - Smart contracts can use to take action based on predetermined results
  - Reducing human involvement and hence errors
  - Ensures security, scalability and confidentiality



"I'm obsessed with protecting all my data, so I encrypted myself."

#### Real-Time Data and Analytics

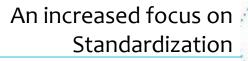
- Patient health and financial data- vendors help physicians with Clinical decision support
- Leveraging analytics algorithm predictions: Solve interoperability-related accessibility issues
- Data Warehouse development is also an opportunity to ensure cleaner patient data



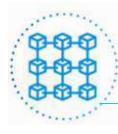
#### So, what is happening?



Covid-19 will push Clinical care teams to digitize







New tech like blockchain ensures data security

Clinical care teams will see more IoT and AI usage





5G Networks and their increased device loads

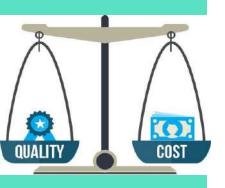
Wearable will boose patient health engagement



#### Role of Health IT

- IT is a crucial enabler in improving the quality and safety of health service delivery and in the move towards a patient centred system
- Technology does not exist in Isolation from its operators- the design and use of health IT are interdependent





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#### ENTERPRISE QUALITY

MANAGEMENT SYSTEM

Presence in 220+ healthcare organizations across 10+ countries



# Let the experts help you!

REALTIME ANALYTICS



INTER OPERABLE



MULTIDEVICE ACCESSIBILITY



EASY HIS INTEGRATION



#### Solutions offered:

- 1. Quality Management
- 2. Process Management
- 3. Patient Satisfaction Management

- 5. Complaint Management
- 6. Risk Management
- 7. Quality of Care Management
- 8. Document Management
- 9. KPI Data Management and much more...

# Statistics tell us all...

Transform critically impacted quality areas and processes with us







-50% Cost of Poor Quality (CoPQ)



+34% More clinical hours



+100% taff engagement



-60%Patient Complaints



+90% Audit Targets



+57% Satisfied Patients



+50% Proactive Risk Mitigation





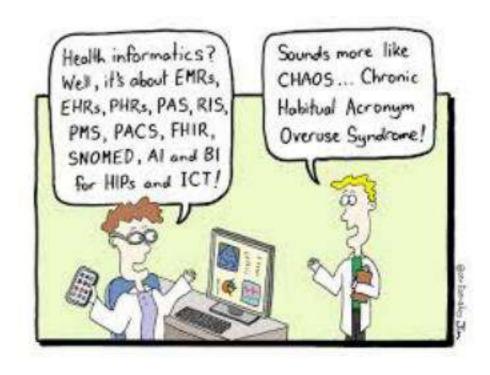




#### Conclusion

A constant, ongoing commitment to safety- from acquisition to implementation and maintenance - is needed to achieve a safer, more effective care.

# Thank you!



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