

Improving the quality of care and operational efficiency of Indian hospitals through mobile personal health records- a detailed study of Vytal mobile app

- 1. Prashant H Pawar, PhD Scholar Management, Singhania University
- 2. Ms.Gunjan Jain (Master of Management-SJMSOM-IIT Bombay, Bachelor of Engineering)

Abstract

Healthcare spending in India is witnessing a rapid growth of 12%, estimated to reach \$195.7 billion by the year 2018. Indian families are becoming aware and not shying away from spending on quality care for their loved ones. Some of the contributing factors of these trends have been rising incomes, lifestyle diseases and increasing access to insurance. To meet the consumer demands, healthcare providers are also gearing up to standardize the quality of service delivery, control cost and enhance patient engagement. Strong mobile technology infrastructure and notable technology initiatives have helped in fuelling this trend.

This paper studies one such important initiative that holds great promise in improving the quality of care and reducing costs i.e. digitization of health records through mobile apps that easily connect families with the healthcare ecosystem.

The findings in this paper are based on our study of VytalHealthtech applications, various surveys conducted with clinical and administrative heads of leading Indian Hospitals and interview with medical specialists. This paper discusses the applicability and benefits of such technologies, and highlights the right features that address the requirements of Indian healthcare providers, patient communities and Indian urban families. The findings can be of tremendous use to progressive Indian healthcare providers and policy makers.

Introduction

It was observed that healthcare providers are building adoption of such technologies into their strategy for an integrated and coordinated care experience to their IPD and OPD patients. The

factors governing the successful adoption of these technologies include; strong leadership, full involvement of medical experts in design and implementation, effective training and adherence to budget. Vytal app helps hospitals and doctors engage better with their patients even beyond the tenure of treatment, facilitates patient safety and quality improvement through: effectivecommunication; alerts, checklists. embedded clinical guidelines and easy access to health history and diagnostic reports avoiding medical errors and redundancy. Digitization of valuable data, otherwise trapped in paper records, helps gain greater insights about patient's health, spend and medical practice in general. Faster, more accurate communication and streamlined processes lead to brand loyalty, increased patient satisfaction, fewer errors, fewer duplicate tests hence reduced costs and better utilization of hospital resources and faster responses to patient inquires.

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Objectives

The objective of this paper is to verify and validate the key constructs and benefits of using electronic medical records such asimprovedefficiency and quality of healthcare, reducedmedical errors, cost-saving, financial transparency and improved patient safety, engagement and satisfaction.

Methodology

Type of Research

The type of research that was used in this study is qualitative research and quantitative research. Qualitative researchers aim to gather an in-depth understanding of "why" and "how" of decision making. Besides this, the researcher also

with

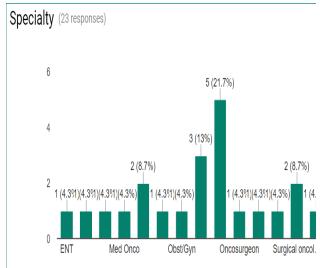
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examined the phenomenon through observations in numerical representations and through statistical analysis. Semi-structured interviews the respondents were conducted.

Sampling Method

The research sampling method that was used in this study is random sampling to obtain a more scientific result that could be used to represent the entirety of the population. A list of key health care facilities (consultant clinics and hospitals) in Mumbai was acquired. Respondents

The respondents in this research were hospital administrative, clinical and medical specialists. There were 23 respondents across 15 hospitals in Mumbai and Mumbai suburbs.



Ouestionnaire

The questionnaire starts with basic information gathering about doctor's practice background. Further, the questionnaire requires information about use and effect of computer technologies in the hospitals, and gathers their inputs on whether the benefits (such as, improved care, increased workflow efficiency, minimal medical errors, improved patient engagement and satisfaction, transparency etc.) would be achievable with use of electronic medical record and patient records solution.

Sample size

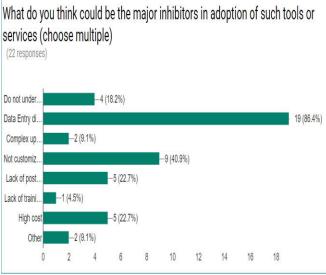
Altogether 23 doctors including the assisting staff to doctors and allied departments were taken under scope of study. Purposive sampling technique was used to collect the information.

Findings

Research suggested few major perceived inhibitors in adoption of such tools or technologies, before the studied technology solutions were provided to them, which are listed below.

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- 1. None of the physicians are using the digitized records in their capacity of practice
- 2. About 18.2% did not understand to use the technology
- About 86% considered data entry difficult and time consuming
- 4. About 22.7% perceived the use of such tools and technology to be high cost, however they are willing to consider them in a subscription model
- About 4.5% do not have any training in such tools and technology
- 6. Concerns about not customized as per their specialty constitutes 40.9%



7. In terms of willingness to pay for technology, about 31.8% were found to be willing to pay less than Rs.5000 in annual fees; about 18.2% were found to be willing to pay in the range Rs.5000-8000 in annual fees; about 27.3% were found to be willing to pay in the range Rs.8000-10,000; about 18.2% were found to be willing to pay in the range Rs.10, 000-15000.

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Medical records based systems are the first step If there are paid solution available to address your top 3 priorities, what is the towards transformed health care. The benefits maximum annual fees in ₹ that you may be willing to pay span across the entire medical ecosystem (22 responses) including better health care by improving all aspects of patient care, safety, centeredness, communication, timeliness and < 5000/- per year</p> efficiency. Following benefits were identified 5000-8000 per year during the research conducted as well as on 8000-10,000 per year actual usage basis of few of the leading medical 10,000-15,000 per year record players such as Vytalare: time is redeployed: 18.2%

Research Suggestions

During this research, it was well understood that healthcare providers do acknowledge the role of mobile technology to attain:

- Higher engagement and build lasting relationships with patients
- Improved Patient Satisfaction and Experience
- Improved value to patients and
- Better data quality for improved insights

IDENTIFICATION OF NEEDS Choose your needs (23 responses) Calendar Ma. Patients Man. 21 (91 Patients com.. -20 (87%) e-Prescription Blogs/Social... -13 (56.5%) EHR/EMR to .. -20 (87%) -13 (56.5%) Practice reve.. Data Analyti... -18 (78.3%) Networking.. Other —2 (8.7% 20

of respondents need patient engagement and medical record capture & management capabilities

Increased efficiencies in workflow as staff

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- Less Time Spent "Chasing Charts": When staff members have quick, easy access to patient records, they save time that would otherwise be spent locating paper charts.
- Better Information Availability: With EHRs, patient records are available simultaneously to all appropriate staff at all times, meaning your staff can more efficiently locate and process patient information.
- Medical **Improved Practice** Management: With easy appointment scheduling you can more efficiently run your organization and improve medical practice management.
- Less Time Deciphering Spent Handwriting: With staff EHRs. members will spend less time interpreting handwritten notes.
- Enhanced Information Sharing: Electronic sharing of data and lab reports with hospitals saving staff time that would otherwise be spent manually entering information into patient records

Improve ability to care for patients:

- Improve care coordination
- Improve communication with patients
- Enhanced overall patient care
- Positive patient-physician relationships and fostered the sharing of medical information
- Make better decisions. With more comprehensive health information at your fingertips, you can make better testing, diagnostic, and treatment

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- decisions. You can utilize drug-drug and drug-allergy interaction checks,
- Remind your patients when they need preventive care and screening

Avoid medication errors:

- Generate and transmit prescriptions electronically, which means pharmacists and patients can reliably read handwriting and avoid potential errors

Engaging with patients:

- Communicate with patients: With EHRs, you can manage appointment schedules electronically and exchange email with patients. Quick and easy communication with your patients will enable your organization to identify symptoms earlier, proactively reach out to patients, and improve health care quality.
- Engage patients in their health and health care by providing patients with clinical summaries and educational resources
- Better share information with your patients: With EHRs, you can give patients detailed and accurate information about their health and health care. After an appointment or hospital stay, your organization can provide clinical summaries, reminders for follow-up care, or links to educational resources.
- Collect and manage the information you need to engage patients: EHRs will enable your organization to collect and manage important data about your patients. Using patient lists, your organization can identify and proactively engage at-risk patients

Improve patient satisfaction:

- Reduce waiting time for office appointments and improve appointment scheduling
- Decrease unnecessary tests and immunizations, which can be costly and unsafe for patients

- Improve communication with patients and reduce turn-around time responding to billing and clinical inquiries

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- Encourage your patients to take ownership of and manage their health and health care using clinical summaries and educational resources
- Provide patients with quick, easy access to their health information and give them the peace of mind their information will be secure and available to the right people in the right place at the right time

Improving Public and Population Health Outcomes:

- Through immunization records, disease reporting, and electronic laboratory reporting, providers can transmit public and population health data to public health officials.
- Better your organization's ability to prevent disease. With electronic health information about the entire population of patients you serve, you can look more meaningfully at the needs of patients and offer better health care.

Financial transparency:

When patients pay online, staff members do not need to handle cash and there is complete transparency.

To keep up with the tech-savvy population, many hospitals have created or are in the process of creating mobile apps. But according to the report from tech consulting firm Accenture while 54% of health consumers want to interact more with healthcare providers through apps on their smartphones, only 2% of patients are currently using their hospital mobile app. This important finding indicates that of the solution is missing functions that consumers demand most, and then the technology adoption is bound to fail, diminishing the returns on technology investments. Health consumers' stickiness to the mobile app increases the probability of collection of relevant and analyzable data. The research, which assessed mobile app use among the 100 largest U.S. hospitals, found that twothirds (66 percent) of the 100 largest U.S.

hospitals have mobile apps for consumers and roughly two-fifths (38 percent) of that subset have developed proprietary apps for their patients. However, only 11 percent of health systems offer patients proprietary apps that operate with at least one of the three functions that consumers demand most: access to medical records; the ability to book, change and cancel appointments; and the ability to request prescription refills electronically.

In India few leading hospitals either have developed a proprietary app or are in the process of designing one; however majority of functions are limited to informing the patients about hospital facilities or doctors schedule. Integration with hospital information system still remains a challenge due to the lack of standards in various home grown hospital systems.

"Simply having a mobile app is not enough," said Brian Kalis, managing director in Accenture's Health practice. "Hospital apps are failing to engage patients by not aligning their functionality and user experience with what consumers expect and need. Consumers want ubiquitous access to products and services as part of their customer experience, and those who become disillusioned with a provider's mobile services — or a lack thereof — could look elsewhere for services."

After studying the value based offerings of mobile app like Vytal, that can be customized for a hospital as an effective patient engagement tool, following benefits have been identified that can help increased adoption and stickiness to the solutions

Practicing physicians and hospitals may consider some of the suggestions outlined below:

*Ready to use and complete with hospital/doctor branding

A solution like Vytal designed for the entire life for each family member and serving their purpose even beyond the treatment duration is more likely to get more stickiness. Hence the hospital can have a patient connect beyond the specific duration of treatment. *Help health consumers get information about hospital facilities beyond their current medical need

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A patient seeking treatment for one medical condition foreg Cataract, may also be in need for cardiology or orthopedic speciality for himself or any other family member. By using any other app for appointment or search he can get a static information like OPD schedule or doctor listing etc. Using Vytal he can get a real time information on a regular basis about hospital facilities, new tests or treatment facilities made available or some time bound schemes like health checks for eg discounts for heart related investigations on the occasion of world heart day. Any such marketing initiatives can directly reach the patients who are hospital registered patients using Vytal and also nonhospital-Vytal-users who are using the general app.

*Two way communication channel

Using the solution as communication channel will increase the adoption and stickiness. For example, Vytal app offers

- Notifications : for IPD and OPD patients about
 - o <u>appointment</u> schedule & charges
 - o <u>marketing</u> initiatives as per patient segment
- Patient specific communication :

*Admission details – bed number , class of admission etc

*Intimation of admission – when a patient wants a specific class for admission and if no beds in that particular class are available the patient is either admitted in other class or is kept on waiting list. This is one of the areas for patient dissatisfaction. The patient can be made aware of hospital bed occupancy and her status on waiting list through the message.

*Treatment related updates – Admitted patients seek various types of information through the ward sisters which is not readily available or many times the sisters are not able to communicate with the patients or their relatives effectively which leads to patient dissatisfaction. Updates like status of investigation report or medication or doctor visit schedule can be communicated through this. The patient also can respond through the same function which can be answered by a specific person assigned for that task.

*Discharge & Billing – Another area for patient complaint most of the times due to delay in billing or bill going above the estimated amount (a common scenario in a corporate setup or in a complicated case).

The patient can be updated about her bill on a daily basis through Vytal app. Currently hospitals have a policy of updating the patients about their dues verbally. In some cases if the bill overshoots the estimated amount the patients complain at the time of final billing. By using vytal they can be made aware about their bills and any overshoots. The hospitals can have a record of all the patient communications and it can be produced as a evidence – to the patient or even to the COURT if amedicolegal case is filed by the patient in future.

The patients also can be updated about status of discharge process eg: discharge ready or discharge pending billing or clearance from insurance etc.

*Follow up reminders : for OPD and IPD patients

1) Access to medical records
Since majority of doctors and hospitals in
India still use paper for capturing clinical
data and writing prescriptions & findings,
solution should have the ability to capture
data from paper based system. In Vytal, all
OPD and IPD patients can access scanned
images of their records at any time which
can be shown to the doctors. The records

could be from the hospital consultant or outside the hospital. Patients can also avail digitization through transcription portal - a paid service.

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Hospital can also avail transcription services – for all records or for some specific specialty or a specific purpose.

2) Connecting with larger health ecosystem

Connecting patient with hospital services not only helps patient get easy access to ecosystem, but also gives increased revenue opportunity to the hospital. Hospital pharmacy is patient's obvious choice at the time of their consultation, but any subsequent purchase of medicines generally happens outside the hospital amounting to loss of customer for hospital pharmacy. This can be tackled by connecting "ORDER REFILL" feature to the hospital pharmacy.

3) Insight into patient's behavior and clinical dataⁱⁱ

Structured data can better the reporting capabilities. Through surveillance data submission, immunization registries, and electronic laboratory reporting, providers can transmit public and population health data to public health officials. With more and better data available, public health organizations can better monitor, prevent, and manage disease. Tools like Vytal can help generate reports also about anonymized patients' preferences or behavior outside the hospital using analytical tools.

Physicians planning to implement health record based technology solutions may wish to consider data entry issues from the outset. Therefore a backend & outsourced transcription service, as established by Vytal, can be helpful in ensuing capturing of complete and correct data. Assistance from the technology vendor and from experienced colleagues may be of value. Issues to consider may include:



- Consistency of data entry (coding when appropriate, entering data in consistent areas, workflows related to data entry for scanned documents);
- Completeness of data entry (medications, avoiding non-electronic external sources if an electronic source is available); and
- Accuracy of data entry.

Practicing physicians may wish to consider some of the suggestions outlined earlier. Systematically informing and redirecting patients away from non-electronic external data providers such as non-electronic labs may be possible. Scheduling regular, ongoing training as well as training in ancillary IT skill such as keyboarding (if needed) may be of value. Several of these suggestions have costs in terms of money or time; physicians could periodically review costs and benefits of various interventions. In this study, a group of physicians used collective resources to manage preventive services and this was associated with the implementation of reminder letters to patients who were overdue. Physicians may consider associating with colleagues in order to leverage group resources forselected technology solutions implementation activities.

Conclusions

Physicians and hospitals generally felt that to keep up with the tech-savvy health consumers, enhance efficiency of their practice & operations and enhance utilization of their revenue generating services, a mobile app with functions that can engage a patient and its family can ensure higher adoption and stickiness. In a subscription based model and continuous technology support from vendor, Physicians and hospitals can minimize the difficulties with adapting the system to their practices and reinventing their workflows to take advantages of such innovative and beneficial solutions during implementation.

References

News Report: JANUARY 06, 2016, U.S.
Hospitals Engaging Only 2 Percent of
Patients via Mobile Apps, Putting as Much
as \$100 Million in Annual Revenue [Per
Hospital] at Risk, Accenture Finds.
https://newsroom.accenture-ger-hospital-at-risk-accenture-finds.htm

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ii How can electronic health records improve public and population health outcomes?

https://www.healthit.gov/providersprofessionals/faqs/how-can-electronichealth-records-improve-public-andpopulation-health-

Department of Industrial Policy and Promotion (DIPP), RNCOS Reports, Media Reports, Press Information Bureau (PIB), Union Budget 2016-17

- 1. Canada Health Infoway. Annual report 2007–2008. The evolution of health care: making a difference. Toronto, ON: Canada Health Infoway; 20
- 2. American recovery and reinvestment act of 2009, Pub L No. 111-5, 123 Stat 115-531.
- 3. The health of Canadians—the federal role. Final report. Volume 6: recommendations for reform. Ottawa, ON: Standing Senate Committee on Social Affairs, Science and Technology; 2002.
- 4. Romanow RJ. Building on values: the future of health care in Canada. Ottawa, ON: Commission of the Future of Health Care in Canada; 2002.

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ISSN: 1847-9790 | p-ISSN: 2395-0126



Volume: 03 Issue: 04 | April -2019

5. Brouwer H, Bindels P, Weert H: Data quality improvement in general practice. FamPract. 2006, 23 (5): 529-536. 10.1093/fampra/cml040.

6. Birtwhistle R, Keshavjee K, Martin K: Improving data quality in EMRs for chronic disease management. 2009, Lambert-Lanning A, In Family Medicine Forum. Calgary

7. Dean BB, Lam J, Natoli JL, Butler Q, Aguilar D, Nordyke RJ: Review: use of electronic medical records for health outcomes research: a literature review. Med Care Res Rev. 2009, 66 (6): 611-638. 10.1177/1077558709332440.

8. Baron RJ

Quality improvement with an electronic health record: achievable, but not automatic. Ann Intern Med 2007; 147(8):549-52.