# **Project Report**

Team ID	PNT2022TMID33778
Project Name	Analytics for Hospital's Health-Care Data

### 1. INTRODUCTION

### 1.1 Project Overview

- Data analytics in clinical settings attempts to reduce patient wait t imes via
  - improved scheduling and staffing, giving patients more options.
- when scheduling appointments and receiving treatment, reduce r eadmission
  - rates by using population health data to predict which patients ar e at the greatest risk

### 1.2 Purpose

- This is the purpose of healthcare data analysis: using datadriven findings to
  - predict and solve a problem before it is too late, but also assess m ethods and
  - treatments faster, keep better track of inventory, involve patients more in their
  - own health, and empower them with the tools to d o so.

### 2. LITERATURE SURVEY

2.1 Existing problem

No remote access

- Healthcare is associated with inperson consultations. This problem obligates the patients to run to the nearest healthcare center for treatment.
- The COVID outbreak and lockdowns made it even worse.
- The contagion effect of the virus restrained people within the four walls of their homes.
- So, what do they do if they need to see a doctor and have an emerg ency?

The need for remote access or virtual consultations is the need of the

hour, which needs to be taken care of to stay one step ahead in the technology adoption race.

### Insufficiency and errors in data sharing

- In an age where medical science has made noteworthy advance ments,
  - inefficiencies and healthcare errors are still persistent because of the
  - healthcare industry's traditional technology for management.
- This is not just a hurdle in medical science; it causes regression because of the waste it generates.
- Not only do patients pay the price in the form of inconvenience and health,
  - but we also see a rise in administrative expenses and litigation owing to these inefficiencies and errors.
- An incomplete or inefficient exchange of this data can be dange rous in patients needing urgent or complicated treatment

### Absence of supply management system

- It leads to money wasted on lost and damaged inventory, improper delivery of equipment or medication, and the damage caused to patie nts,
  - all of which amount to massive financial losses for healthcare service s.
- Supply shortages, misplaced inventory, and less-thanstellar preventative measures regarding shrinkage, all play into the reality that hospitals are epicenters of wasteful operations without a proper supply managem ent system.
- Traditional supply chain management is often wasteful and inefficien t.

### Data security

- Another challenge mentioned by multiple respondents was data security.
  - Between 2009 and 2020, 70% of the U.S. population was affected by healthcare data breaches—a trend that isn't likely to go away.
- Cigarillo believes the healthcare industry needs government funding to strengthen its IT resources.
- But there are also a number of best practices healthcare organization s can
  - implement now that will help them more effectively secure valuable healthcare data, such as educating healthcare staff, restricting access to
  - data and applications, implementing data usage controls, and more.

### Lack of real time situation management

• True crises used to be few and far between, but the past year has presented a perpetual state of crisis—a scenario that has posed an incredible challenge for healthcare organizations.

- According to Terry Zysk, CEO of LiveProcess, public health emerge ncies like COVID-19 require situation management: using realtime data analysis to understand how an event is unfolding, and reacting to it accordingly.
- It's the only way that critical healthcare resources can be delivere d to the right people at the right time during emergencies and natural disa sters.
- A major problem with hospital management systems is they don't provide access to the kind of real-time metrics that could improve response times and outcomes—for example, how many beds are available at a facility at any given time or the location of critical supplies.

### 2.2 References

TITLE: Healthcare

AUTHOR: Dr.leena V Gangloi

TITLE: Information System Healthcare Sectors

AUTHOR: Wager

TITLE: Data Analytics in Healthcare

AUTHOR: J. Archenaa

TITLE: Historical Review Of Health Policy Making

AUTHOR: Ravi Duggal

#### 2.3 Problem Statement Definition

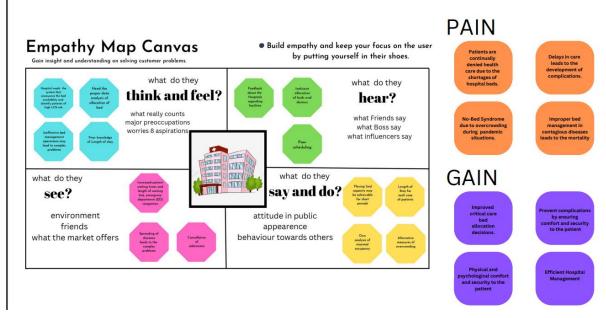
- Collection dataset. Upload the dataset into cognos.
- Open the properties->data module.
   If null value is present in character field use mode method.
- If the null value is present in continuous field use average or medium

.

Display the data in respective charts.
 Create conclusion using summary

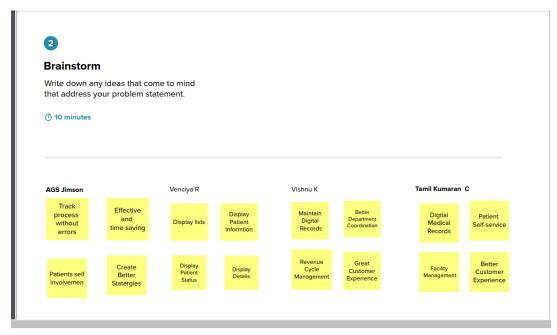
### 3. IDEATION & PROPOSED SOLUTION

- 3.1 Empathy Map Canvas
  - An empathy map is a tool which aids in understanding another pe rson's perspective.
  - Empathy maps have up until now not been used in a medical educ ation setting.
  - Objective: To assess the attitudes towards, applicability and useful ness of empathy maps as part of medical student's communication skills t raining.



### 3.2 Ideation & Brainstorming

To try to solve a problem or come up with new ideas by having a discussion that includes all members of a group: to discuss a problem or issue and suggest solutions and ideas.



### 3.3 Proposed Solution

#### Problem solution

S.No.	Parameter	Description		
1.	Problem Statement (Problem to be solved)	To accurately predict the Length of Stay for each patient on case-by-case basis so that the Hospital's can use this information for optimal resource allocation and better functioning. The length of stay is divided into 11 different classes ranging from 0-10 days to more than 100 days.		
2.	Idea / Solution description	The goal is to predict the length of stay using predictive analytic tools such as neural network and decision trees that makes predictions using historical data combined with statistical modelling. We are collecting and interpreting data from multiple sources like cost reports, electronic health record (EHR), etc. and then building models and analysing data to uncover the trends and patterns using data visualization techniques.		
3.	Novelty / Uniqueness	Healthcare data tends to reside in multiple places. Aggregating this data into a single, central system, makes our solution unique moreover the use of specific algorithms help us achieve more accuracy.		

4.	Social Impact / Customer Satisfaction	Data Analytics offers predictive solutions that are able to anticipate visits and admission rates. These solutions reduce labour costs and improve customer service, as well as reducing wait times and providing better quality care. The symptoms of diseases can be detected at a very early stage using data mining techniques, so that number of days for recovery can be predicted easily. It helps to boost productivity in diagnosis and treatment.
5.	Business Model (Revenue Model)	The length of stay (LOS) of a patient and the available resources go hand in hand. By
		understanding the average LOS, we would definitely be able to plan better and provide immediate help with both resources and medical support. Our model helps with understanding the pattern behind the disease, the LOS and the resource utilised. Also, as the more number of predictions we make the better the accuracy gets. This way hospitals are able to accommodate well without spending too much or too little money on resources.
6.	Scalability of the Solution	Hospital's data grows day by day and with more data we would be able to provide more accuracy. Data Mirring and prediction techniques are used here for tracking the availability of resources for handling emergencies. This is why scalability is seen as an advantage over here.

## 3.4 Problem Solution fit

• The Problem-

Solution Fit simply means that you have found a problem with yo ur

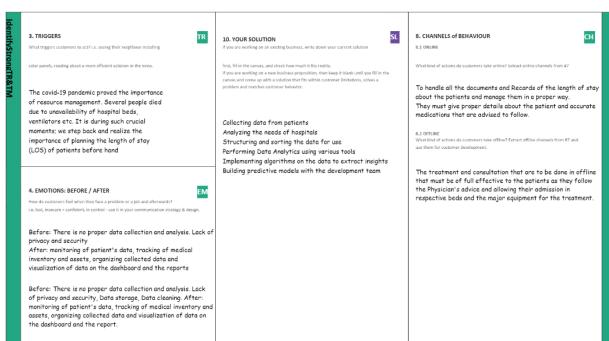
customer and that the solution you have realized for it actually sol ves the customer's problem

- In an age where medical science has made noteworthy advanceme nts,
  - inefficiencies and healthcare errors are still persistent because of the healthcare industry's traditional technology for management.
- One specific area of concern is the exchange of patient data in case
  of patient
  transfer from one department or hospital to another. Patient reco
  rd sharing, when done the traditional way, is time
  - consuming and inefficient and exposes patient information to a breach.

    To deliver a holistic and satisfactory patient experience, different

ly.

parties involved in healthcare – doctors, scheme providers, insurance providers, doctors, and patients – should be able to exchange information among themselves secure



## 4. REQUIREMENT ANALYSIS

# 4.1 Functional requirement

FR No.	Functional Requirement (Epic)	Sub Requirement (Story / Sub-Task)
FR-1	User Registration	The User has his/her own ID to get registered in the portal
FR-2	User Confirmation	Confirmation via Email Confirmation via OTP
FR-3	Dashboard	The collected data are found in visualized format and the prior data are analyzed.

FR	No. Non-Functional Requirement	Description
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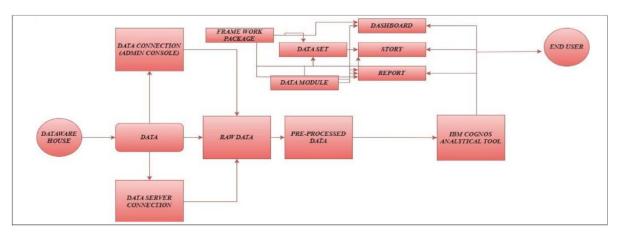
FR-4	Dataset	The patients record and staffs record are collected an consolidated as dataset			
FR-5	Report Generator	The periodic reports of patients and the LoS are reported			
FR-6	Exploration	The data exploration on available dataset			

### 4.2 Non-Functional requirement

NFR-1	Usability	No prior experience required to use the dashboard. People with basic understanding can use the system.
NFR-2	Security	Only registered user can use this application.
NFR-3	Reliability	The Analytics system ensures the reliability
NFR-4	Performance	Gets updated regularly to improve the performance of the application.

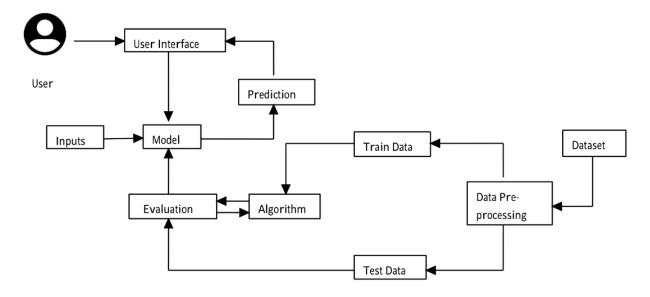
### 5. PROJECT DESIGN

- 5.1 Data Flow Diagrams
- A data flow diagram shows the way information flows through a process or system. It includes data inputs and outputs, data stores, and t he various sub
  - processes the data moves through. DFDs are built using standardized sy mbols and notation to describe various entities and their relationships.



### 5.2 Solution & Technical Architecture

- Solution Architects are most similar to project managers, ensuring that all
  - parties, including stakeholders, are on the same page and moving in the right direction at all stages.
- Technical architects manage all activities leading to the successful implementation of a new application.



## 5.3 User Stories

User Type	Functional Requirement (Epic)	User Story Number	User Story / Task	Acceptance criteria	Priority	Release
Patient	Hospitalization	USN-1	Patients are required to hospitalize if they have any medical issues	Direct Hospitalization	High	Sprint-1
	Treatment Report	USN-2	Patients should collect them treatment report and get further doctor consult	They can receive the report from hospital	High	Sprint-1
Hospital Management	Resource Allocation	USN-3	Hospital Management should allocate the Necessary resource for treating the Patients	Should be ready for any circumstance	High	Sprint-2
	Predicting Length of Stay	USN-4	The Doctors should be aware of condition of Patients to predict the LoS	Exploring the data about the patient health condition and predicting LoS	High	Sprint-1
	Resource Availability	USN-5	The Hospital Staff should be aware of available resources in hospital	Visualizing the about the resource availability	High	Sprint-1

# 6. PROJECT PLANNING & SCHEDULING

# 6.1 Sprint Planning & Estimation

Sprint	Functional	User	User Story / Task	Story	Priority	Team Members
	Requirement	Story	-	Points		
	(Epic)	Number				

Sprint-1	Data Collection	USN-1	As a Admin, I can collect data and maintain it	10	Medium	AGS Jimson
Sprint-2	Data Preparation	USN-1	As a admin I need to prepare the data for further process	20	High	AGS Jimson
Sprint-3	Data exploration	USN-2	After preparing the data, the data need to be explored.	10	High	Venciya R
Sprint-4	Dashboard	USN-3	A Dashboard is created for the project	10	High	Venciya R
Sprint-5	Dashboard	USN-4	As a user, I can upload patient medical reports.	20	High	Vishnu K
Sprint-6	Report generation and virtualise	USN-5	As a user, I can virtualize the data which are analyzed	20	High	Tamil Kumaran C

# 6.2 Sprint Delivery Schedule

Sprint	Total Story Points	Duration	Sprint Start Date	Sprint End Date (Planned)	Story Points Completed (as on Planned End Date)	Sprint Release Date (Actual)
Sprint-1	20	3 Days	28 Oct 2022	31 Oct 2022	20	31 Oct 2022
Sprint-2	20	3 Days	31 Oct 2022	03 Nov 2022	20	02 Nov 2022
Sprint-3	20	3 Days	03 Nov 2022	6 Nov 2022	20	4 Nov 2022
Sprint-4	20	6 Days	8 Nov 2022	16 Nov 2022	20	16 Nov 2022

# 6.3 Reports from JIRA

### **Velocity:**

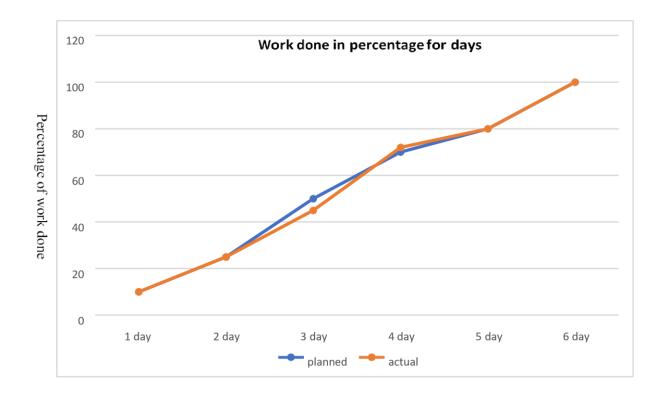
Imagine we have a 10-day sprint duration, and the velocity of the team is 20 (points per sprint). Let's calculate the team's average velocity (AV) per iteration unit (story points per day)

Sprint duration

AV= \_\_\_\_\_ =20/10 =2

Velocity

**Burndown Chart:** 



# 7. CODING & SOLUTIONING (Explain the features added in the project along with code)

### 7.1 Feature 1

- Creating a responsive dashboard.
- Inserting filter for each chart
- Creating report
- Created reports using multiple graphs and charts

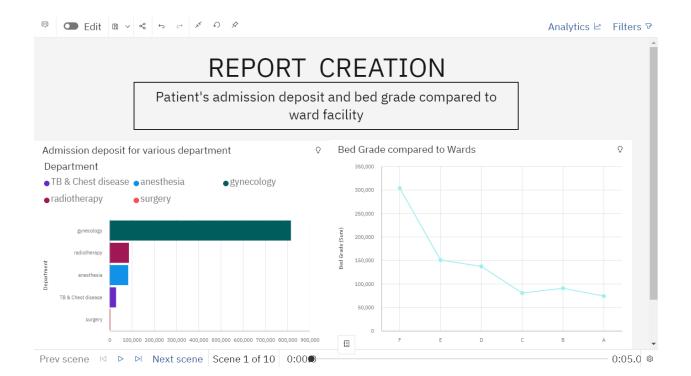
### 7.2 Feature 2

- Creating stories and performed.
- Perform animation render images from website.
- Included graphs and charts.
- Embedded the Cognos web application.

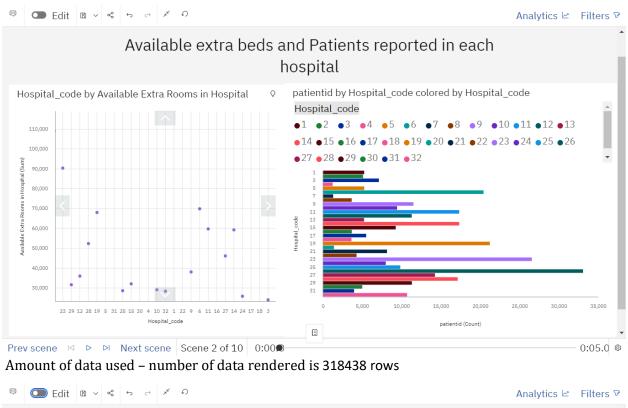
### 8. RESULTS

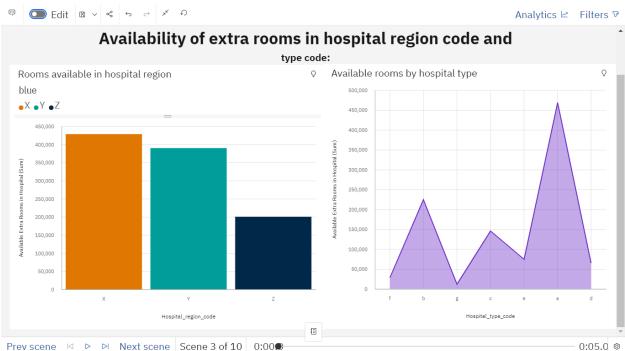
#### 8.1 Performance Metrics

Dashboard design – 12 graphs

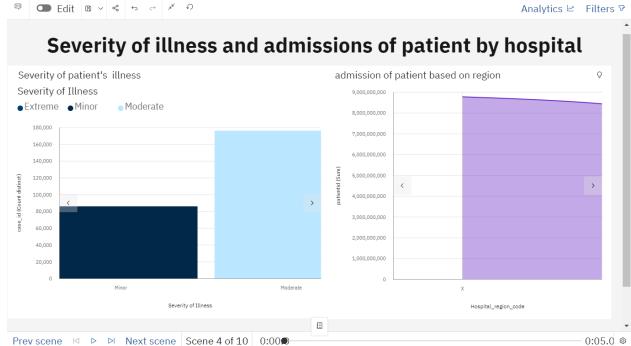


Data responsive- as the data change chart also change

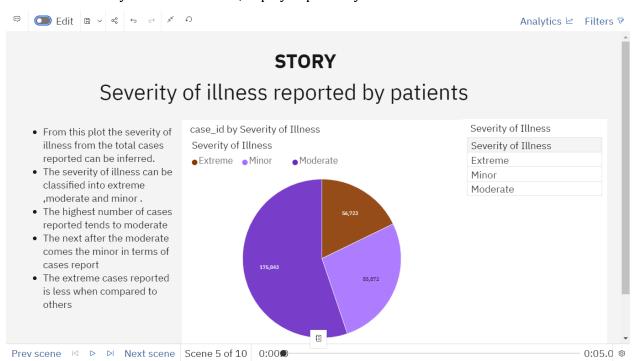




Utilizing of filters- we implemented filters which is good in performance



### Effective user story - 6 scenes added ,displayed perfectly



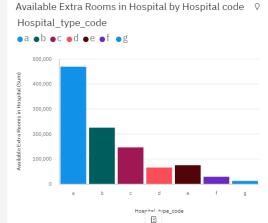


# Availability of extra rooms in hospital depending on hospital type code

• This plot can be used to get insight on the availability of beds in each hospital using hospital type code

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• From this we can see that A has the highest availability of extra beds followed by the others.



Hospital\_type\_code Hospital\_type\_code

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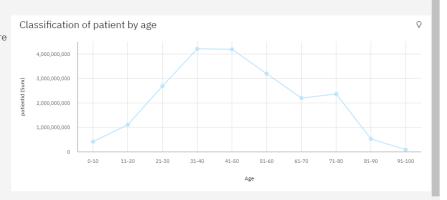
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# Cases reported in different age groups

- This graph gives us the clear picture of the number of cases reported in the different age
- In the age group 31-40 is where the majority of the cases reported followed by 41-50 and then other age groups.



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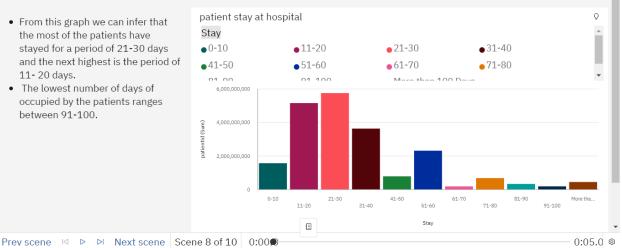


# Stay by Patients

• From this graph we can infer that the most of the patients have stayed for a period of 21-30 days and the next highest is the period of 11-20 days.

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• The lowest number of days of occupied by the patients ranges between 91-100.



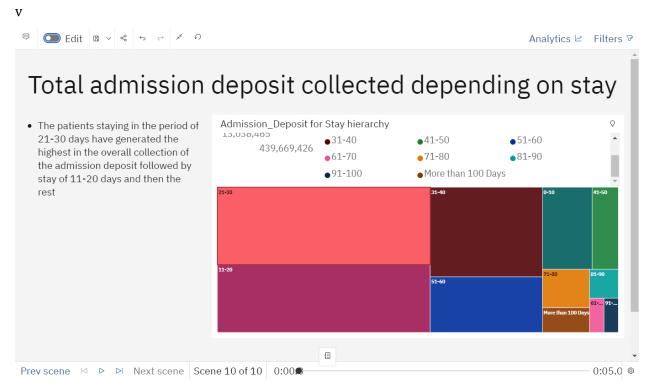
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# Patients report in the hospital by region code

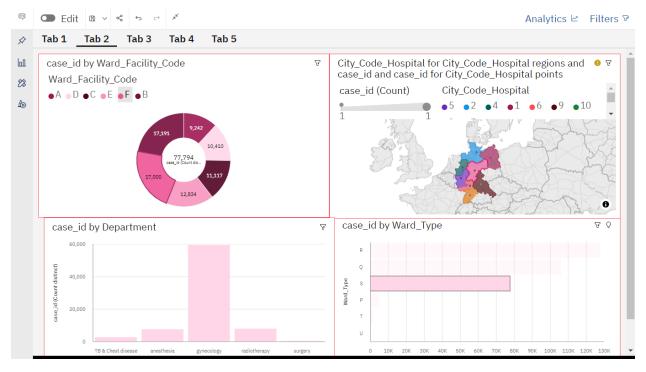
• From this graph we can infer that more number of patients have reported to the the hospitals present in region x followed by region y and then at last in region z.



Prev scene ⋈ ▷ № Next scene Scene 9 of 10 0:00® 0:05.0 🕸



#### Descriptive informative reports - graphs 6 is used



### 9. ADVANTAGES & DISADVANTAGES

**ADVANTAGES** 

- Improved research efforts
- Improved health outcomes
- Obtain operational insights
- Improved staffing Informed strategic planning
- Higher-Quality Care

#### DISADVANTAGES

- Privacy
- Replacing Doctors
- Cybersecurity risks
- Healthcare Regulatory Changes

### 10.CONCLUSION

- It also means describing how health plans, health care organizations and
  - clinicians should be accountable to patients and society conversely.
- How individuals can take appropriate responsibility for their own he alth.
- Data analytics is the science of analyzing raw datasets in order to der ive a conclusion regarding the information they hold.
- It enables us to discover patterns in the raw data and draw valuable i nformation from them.

#### 11.FUTURE SCOPE

- Improved Decision Making: Data Analytics eliminates guesswork and manual
  - tasks. Be it choosing the right content, planning marketing campaign s, or developing products.

Organizations can use the insights they gain from data analytics to m
ake

informed decisions. Thus, leading to better outcomes and customer s atisfaction

 Data analytics to achieve business goals of pharmaceutical companie s, payers,

insurance companies, physicians, hospitals, medical equipment companies,

sales reps, and other stakeholders in the healthcare business, need for this have only increased after the Affordable Act came into being.

### 12. APPENDIX

```
<center>
       style="color:rgb(231, 69, 69);">ANALYTICS
   <h2
                                    FOR
HOSPITALS' HEALTH CARE-DATA</h2>
   <h4><i><b>Team ID: PNT2022TMID33778 </b></i></h4>
  </center>
  Team Leader
    AGS Jimson
   Team member
    Tamil Kumaran C
   Team member
    Vishnu K
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Team member
     Venciya R
     <div>
    <iframe
src="https://us3.ca.analytics.ibm.com/bi/?perspective=story&pathRef=.
my_folders%2FNew%2Bstory&closeWindowOnLastView=true&
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  </div>
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  </html>
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# GitHub

https://github.com/IBM-EPBL/IBM-Project-30113-1660140243

# Project Demo Link

https://youtu.be/oGh9mrCMZAE