

How to become an AI-ready hospital?

Kickstarting your data-driven and medical AI projects

November 29th, 2024



Sira Sriswasdi, PhD

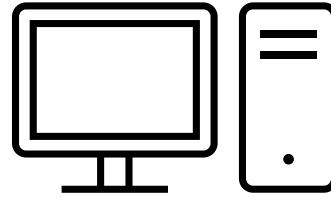
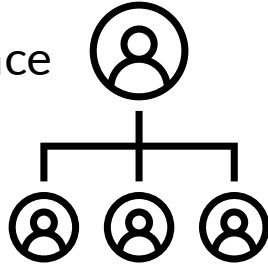
- Research Affairs, Faculty of Medicine, Chulalongkorn University
- Computational Molecular Biology Group (CMB)
- Center for Artificial Intelligence in Medicine (CU-AIM)



What are the key bottlenecks?

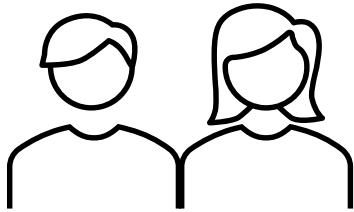
Key bottlenecks in digital data infrastructure

Governance

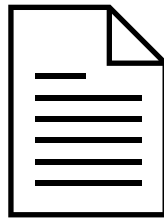


Data tools

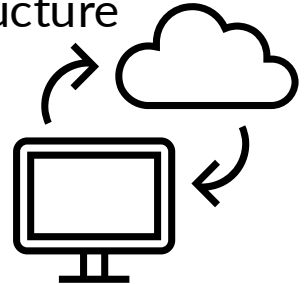
Awareness & Buy-in



Data standard



Infrastructure



Data entry is constantly evolving

The screenshot displays the 'Patient Setup' window for a patient named Julia McNamara. The interface includes a sidebar with navigation options like Practice, Patients, Providers, Insurance, Billing, Schedule, and Reports. The main form contains various input fields for patient information:

- Patient Code:** MCN
- Insurance Account:** Default
- Insurance Account Type:** Regular - Default
- First Name:** Julia
- Last Name:** McNamara
- Address:** 1021 Woodfox Row
- City:** Carlsbad
- State:** CA
- Zip Code:** 92009
- Home Phone:** (760) 642-7637
- Work Phone:** (619) 479-3832
- Extension:** 401
- Mobile Phone:** -
- E-Mail Address:** julia@email.com
- Birth Date:** 09/07/1964 (40 years - 2 months)
- Sex:** Female
- Social Security:** 656-67-5765
- Marital Status:** Divorced
- Driver's License #:** 05340334
- State:** CA
- Birth Weight:** 0
- Units:** -

At the bottom, there are checkboxes for 'Inactive' and 'Bill Patient Automatically?'. A table shows financial data:

Balance	30 Days	60 Days	90 Days +	Date First Seen	Date Last Seen
\$57.00	\$0.00	\$0.00	\$0.00		

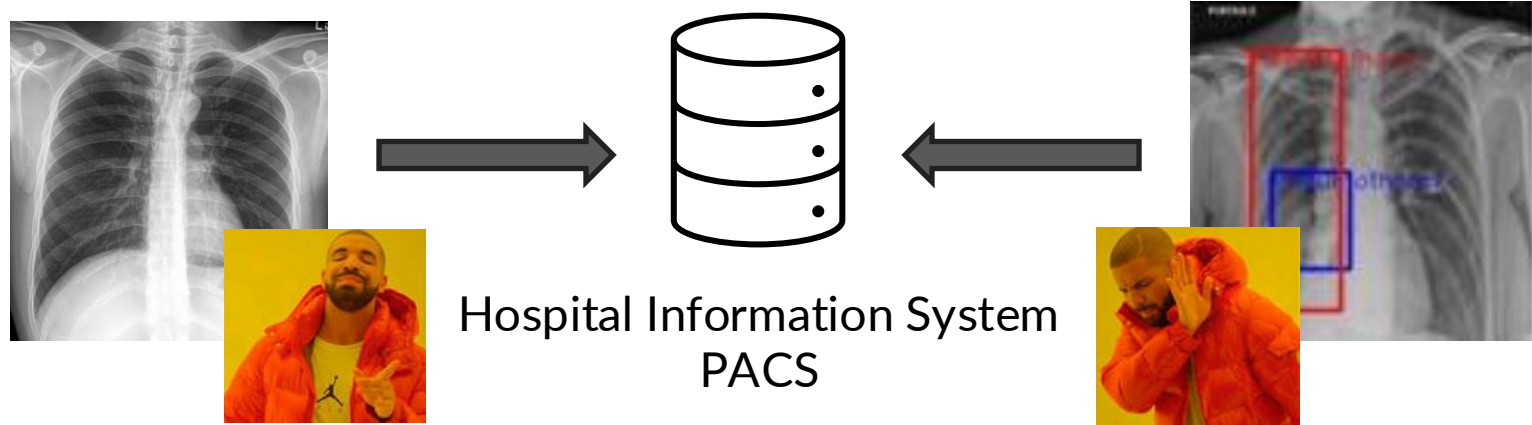
- New elements
 - Tests and data fields
 - Terms and codes
- Standard and compatibility across versions
- Free text and PDF are not machine-readable

Unclear responsibility and objective

- It is everybody's job, but it is nobody's duty
- No oversight, no incentive
 - Lack of QC
- No recognition of the importance of data



Hospital information system is not designed for R&D



- Data on the hospital systems are visible to too many others
 - Including requests by patients
- No room to re-organize data or add unofficial annotations
- Lack of data retrieval support

Unclear data governance and objectives

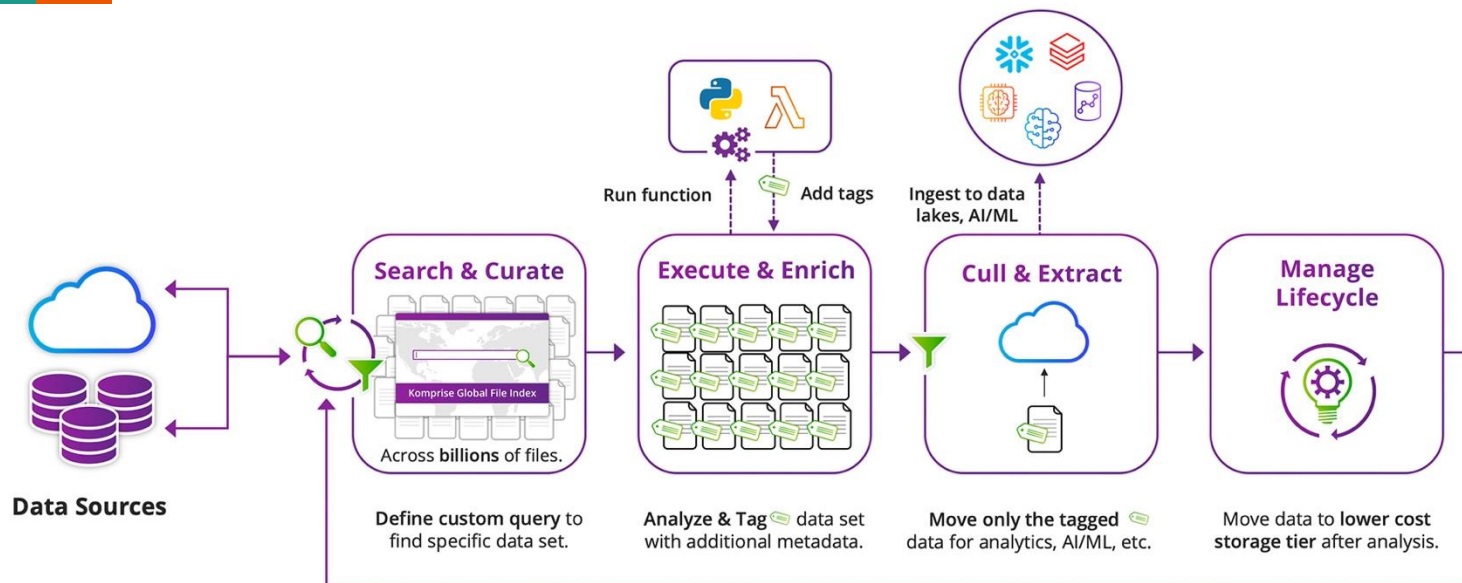
- What are your organization's objectives regarding data?
- What to do?
- Who are involved?





**Get your digital data infrastructure
up and running**

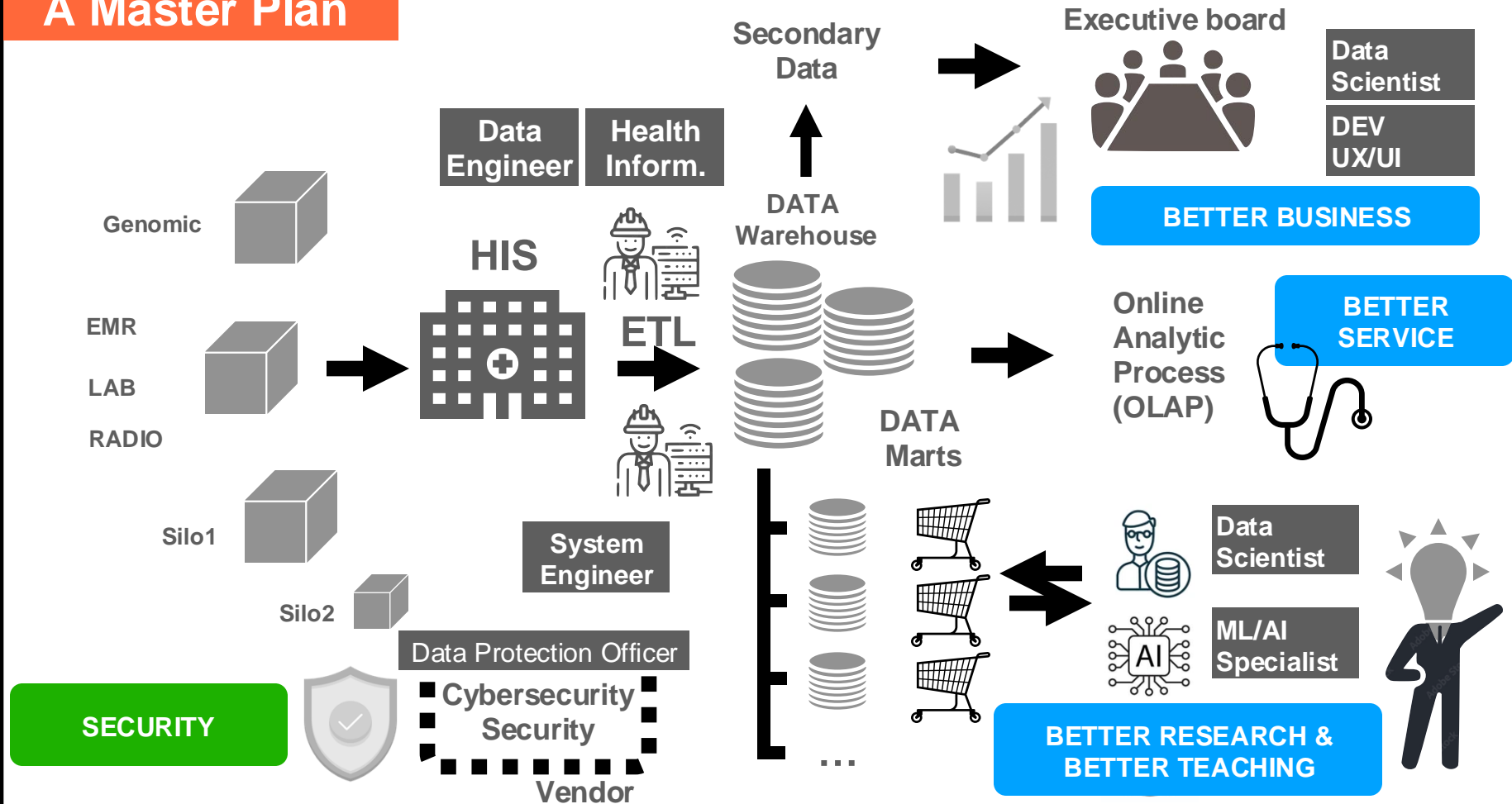
Key processes in digital data infrastructure



https://www.komprise.com/glossary_terms/smart-data-workflows/

- Entry & QC → Curate & Annotate → Utilize
- Data life cycle management

A Master Plan



Assemble your data team



- Small but complete
 - Data scientist
 - Data engineer
 - Software developer
 - Manager
- One problem at a time
- Computing resources

Get buy-in from your staff

EMPLOYEE BUY-IN

When a company has great employee buy-in, workers are engaged and connected with each other and with management. They have a strong sense of belonging to a team. An employee who buys in thinks like a stakeholder. They wholeheartedly embraces the company's values and beliefs.

marcuslemonis.com/business/employee-buy-in



- Co-design UX/UI with each team
- Differing priorities: Data curation for R&D, dashboard, etc.

Smart, data-driven operation benefits everyone

Admission by Department



Total Patients

61,948

Patients Admitted 31,786

Operational expense

\$15,856K

Avg Cost per Patient 5.1K

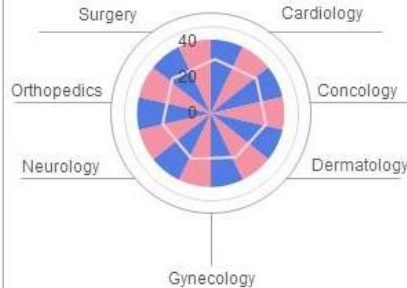
Doctors

Average patients per month

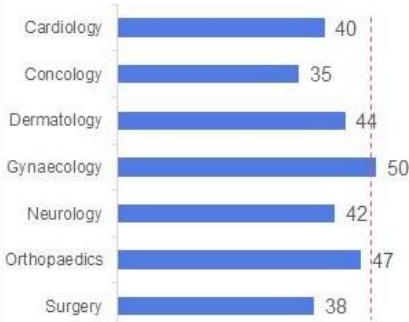
24.79

Available 290

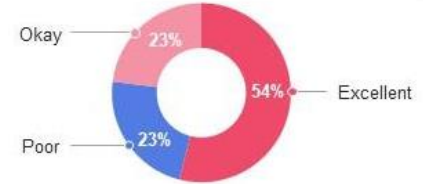
Staff Per Department



Average wait Times by Department



Patient Satisfaction



Doctor's Treatment Plan



Confidence In Treatment



Admission vs Cost Over Time



Better data and quality-of-life improvement

Practical



Ideal transformation



Address/Location Description: 814 Cemetery St. Saint Albans, NY 11412

Test Hydrant Facility ID WHYD 29

Flow Hydrant Facility ID WHYD 5

APPLICATION INFORMATION

Name John Doe

Address 257 Manhattan Drive Brainerd MN 56401 NY 34512345

Contact Person John Doe Phone (541) 754-3010

SYSTEM INFORMATION

Test Date 2020-04-14

Time of Test 02:09:06

Nearest Elevated Tank A water tower

Test Hydrant Elevation 400

Main Size 24

Pressure Zone 20

Tank Hydraulic Grade 24

Use 20ft below pressure zone (tank overflow) for design*

Pump Info 12

Theoretical Pressure 300

RESULTS

Static Pressure 260 psi

Number of Outlets Flowing 12

Residual Pressure 100 psi

Flow Hydrant Discharge Pressure 400 psi

Outlet Diameter 250 inches

Volume of Discharge 16 gpm

First Name: Jerry

Address: 932 North Ave.

Mobile Phone: 864 457-3684

Home Phone:

Social Insur. Nbr: 474-84-3467

Height (ft):

Date of Birth: 08/04/1989

Email Address:

Emergency Contact Information

Contact Name:

Phone Number:

Address:

Relationship:

Patient Photo(s)

double-click to view

General Notices / Alerts:

5/23/2015 8:04:29 PM: No new messages. System is operational.

Clear Filters

1 record(s) found.

Add New Patient

>> Register Patient Visit

Save

Close

Digital sandbox: A safe heaven for R&D

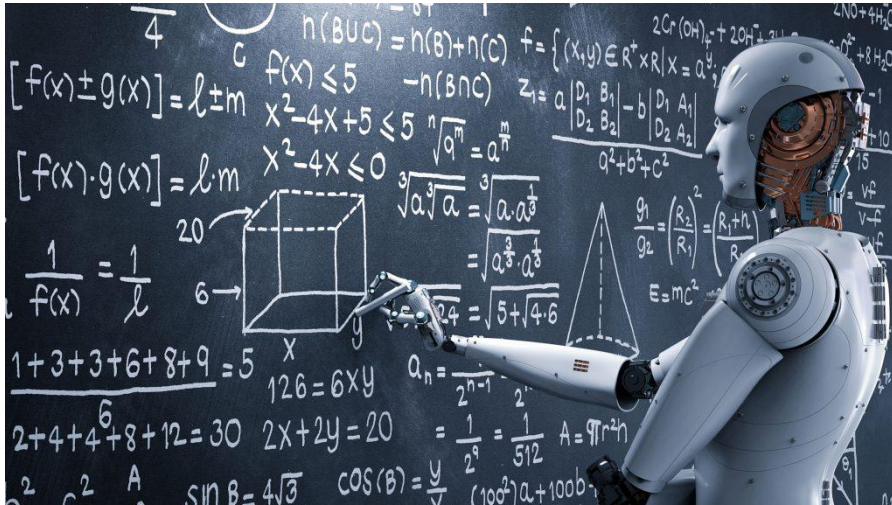


- Data silos create potential data leak and inconsistency
- Provide a centralized computing resource / virtual machine
 - Enforces data consistency and standard
 - Foster good data practice
 - Ensure proper governance



Prioritize the right tasks for AI

Misconceptions about (current) AI

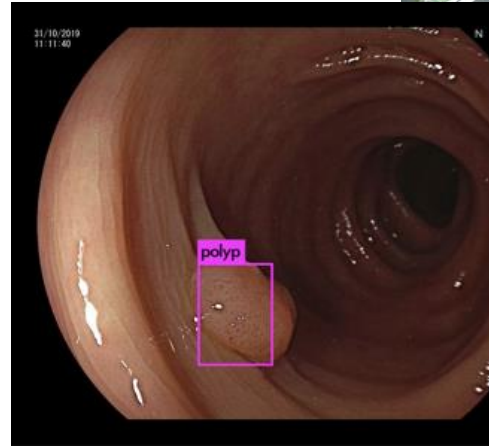


<https://bgr.com/tech/this-is-the-breakthrough-that-may-lead-to-superhuman-ai/>

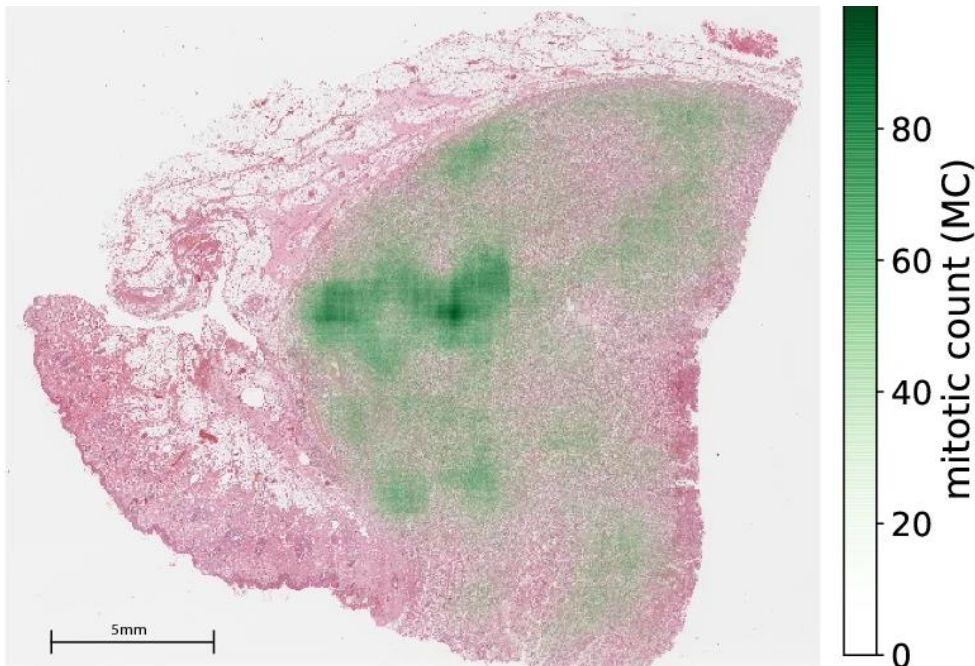
- AI can find a solution to anything
- AI reduces human workload by replacing human
- Just develop AI for XXX

Strong points of AI

- Real-time monitoring
 - Vital signs
- Automatic detection
 - Alert
- Focus
 - AI may be confused but rarely distracted



Balance benefit and effort



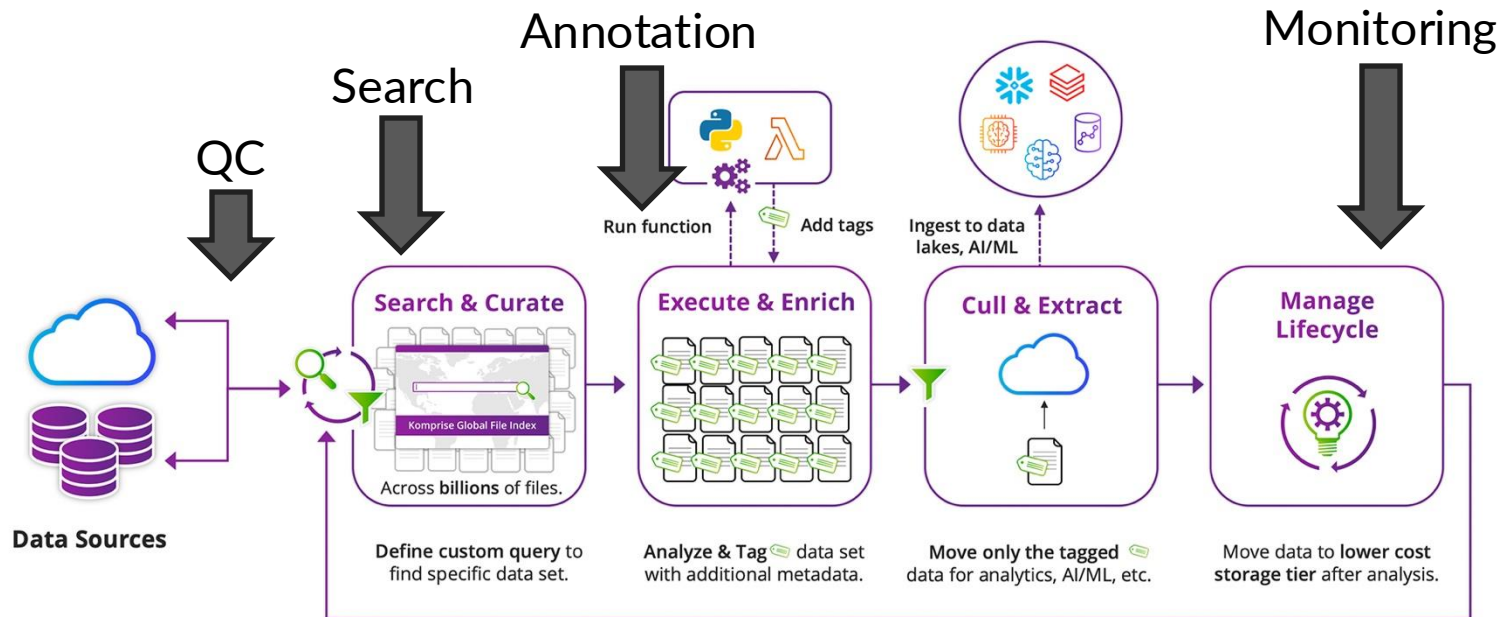
Aubreville, M. et al. Scientific Reports 2020

- A perfect AI may be impossible to achieve
- Imperfect AI can still
 - Reduce time spent, *by proposing hotspots*
 - Reduce turnaround time, *by prioritizing critical patients*
 - Improve diagnosis, *by serving as 2nd opinion*

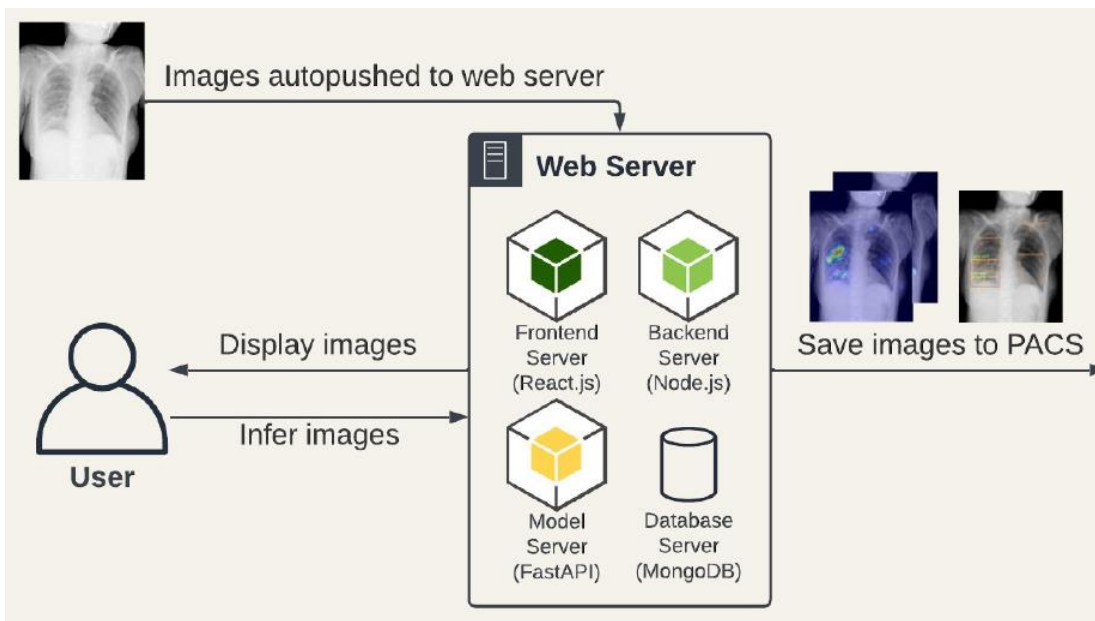


Integrate AI into the workflow

AI integration at every step

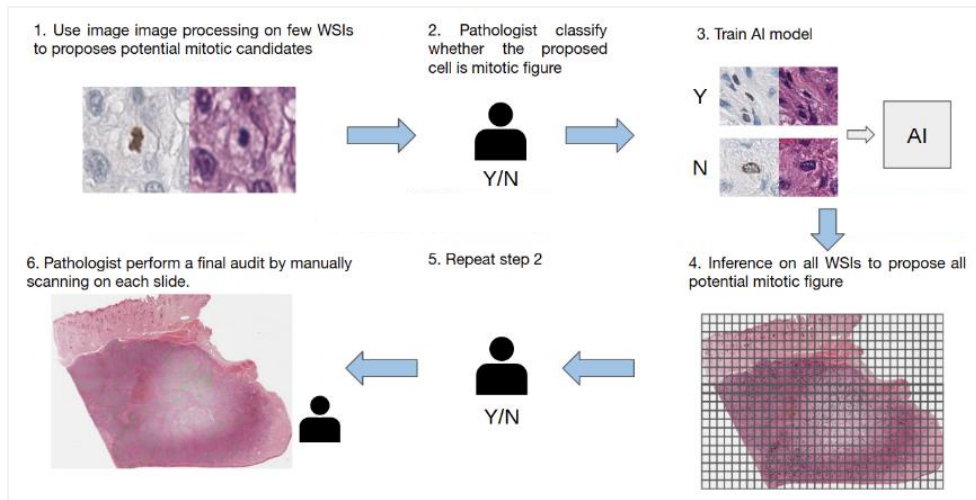
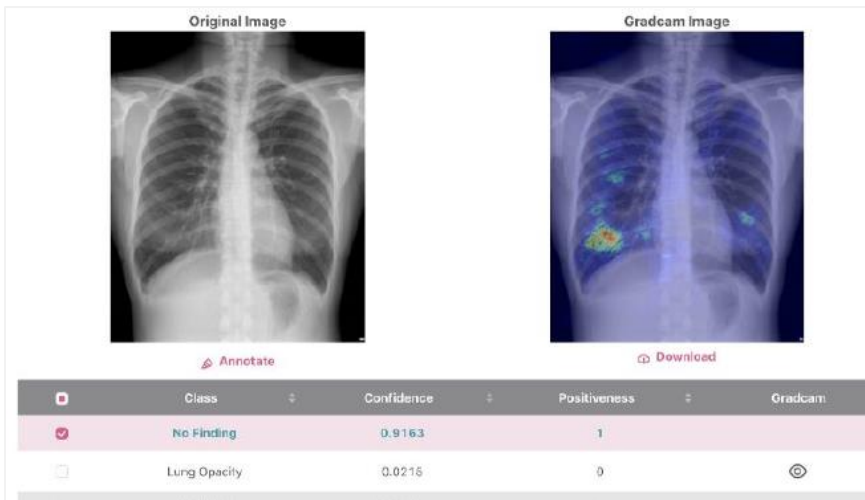


Don't just add an AI, revise the workflow



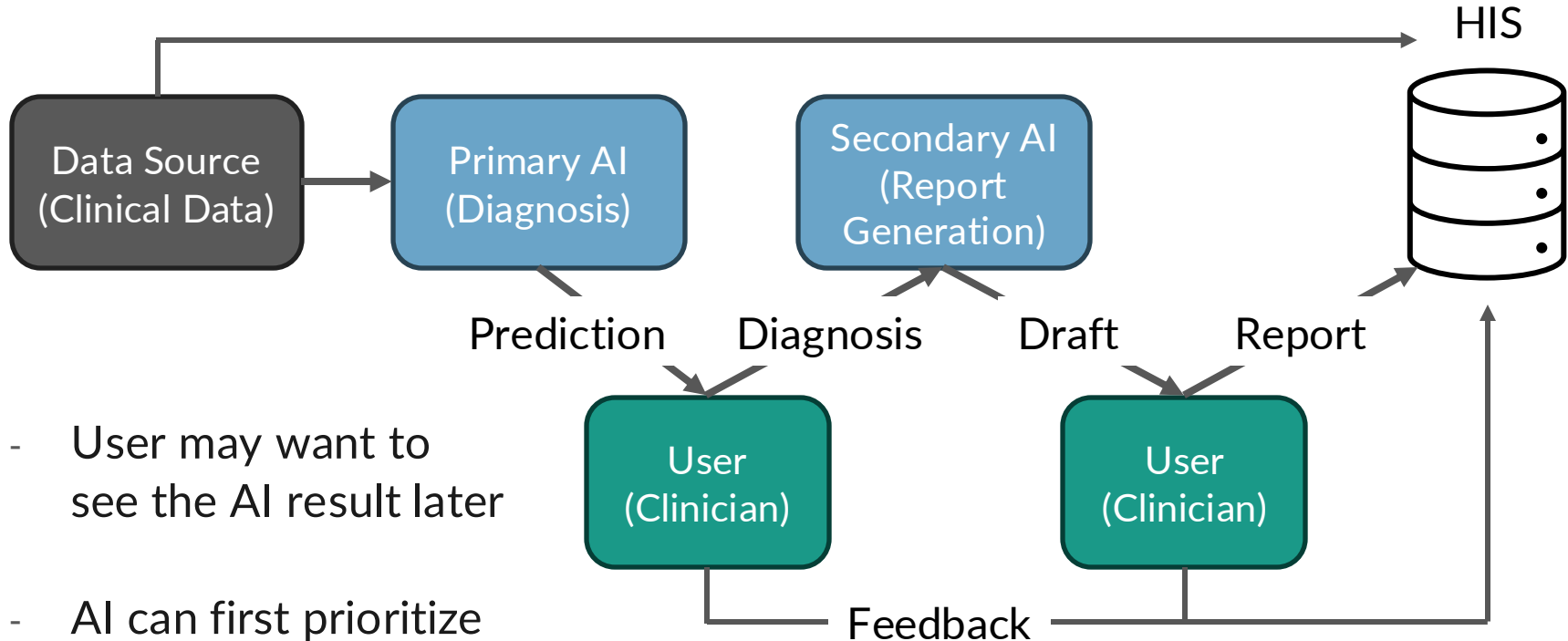
- “Doctor only look once”
- Interaction between AI and human user
- Opportunity to gain user feedback
 - Evaluate & improve

Value multiplied by AI assistance

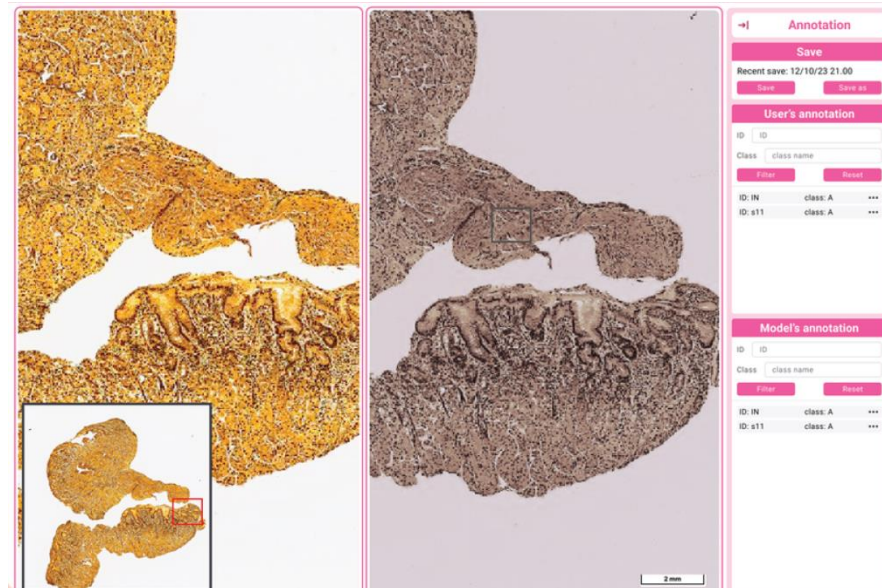
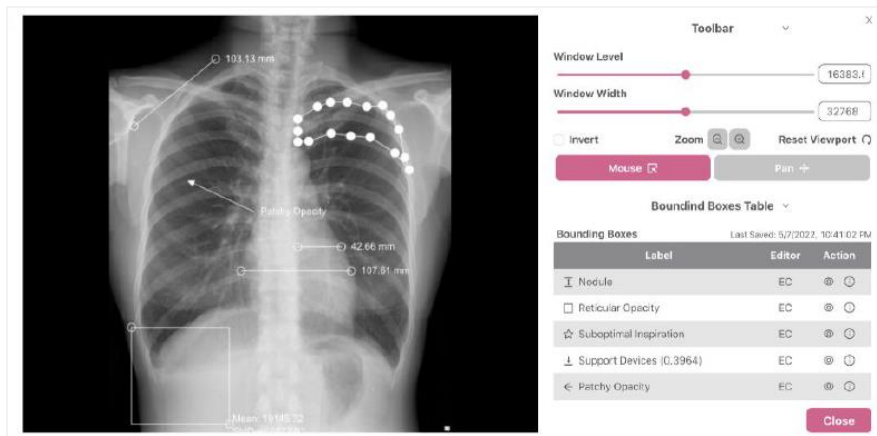


- Improve medical service performance & speed
- Get datasets from day-to-day work
 - Develop new AI or improve current AI

A simple design of user-side AI integration



Partner with software developer (or vendor)



- Good AI integration requires good software and UX/UI
 - Handle new details in the workflow
 - Minimize the burden for your staff



Take-home messages

- Assemble your data team
 - A ready-made solution rarely fits your organizational culture
- Get buy-in from your staff
 - They are the judges, juries, and executioners of AI
- Data and AI literacy training
 - Smart hospital needs contribution from employee
 - Awareness of the importance of data quality and usability
 - Maximize the benefits from software and AI
 - Ability to identify critical gaps in infrastructure and workflow