



E-HEALTH

WHAT WILL IT TAKE TO KEEP THE CURVE FLAT?

There is a growing use of healthcare apps, wearable sensors and electronic healthcare records, with the HSE's National Ambulance Service adapting technology to improve the services it offers, according to Tom Beegan. He notes that allied health professionals have stepped up to expand their scope of practice and to provide a safe, high-quality service.

As Ireland moved through its planned phases of reopening for business during the summer, right across the economy management teams and their boards of directors reopened not for 'business as usual' but for business that meets customer

needs in the new way.

To do this they triangulated the risks associated with the three pillars of a highly functioning organisation – safety, quality and productivity. Successful management of risk is now a non-negotiable key performance indicator (KPI) and must become an integral part of the management style. Everybody who works in the organisation needs to understand the 'why' and the 'how' of managing risks specific to their workplace.

During lockdown there was time for reflection on our past, present and to try to visualise what the future may hold. However, while we cannot predict the future, we can try to influence it so that we are healthier, safer and productive.

In workplaces across the world as they tried to survive by being safe, these workplaces have been transformed out of necessity to respond to this pandemic and we have learned how interdependent and vulnerable we all are. We have

also learned the importance of having trusted scientifically-based evidence upon which to make decisions and for such decisions to be communicated clearly and in a timely fashion to the population.

This approach and with a massive effort to do what we need to do, has seen transformative and innovative solutions emerge on a daily basis. What was previously believed to be undoable is now operational. Behaviours have changed, what's not acceptable behaviour is being called out and not ignored.

FUTURE TECHNOLOGIES

The application of technology facilitated closing the gaps created in how our business and social interactions occurred during this lockdown. We can now experience real-time virtual consultations, remote monitoring, remote meetings, the rise in the cashless society, increase in online shopping, social media and working from home, to name but some.

Artificial Intelligence (AI) and other future technologies allow for systems to convert real-time data into knowledge for consideration and application for key decision-making. Many workplaces now have time-delayed cameras, CCTV, Radio Frequency Identification Devices (RFIDs), risk management software and 3-D printing – just some of the technologies that will forever change the world of work.

Based on what we know today, technology on its own cannot solve all complex problems faced by society. However, based on our pre-and post Covid-19 experiences, we do know that technology can expand capacity to respond, bridge the geographical access gaps to expert advices, and speed up decision-making without always using face-to-face contact.

The majority of those responsible for workplaces are fully focused on leveraging the wisdom and skills of their employees, which will be integrated with the power of technology to future-proof their business from further shocks, competition and change.

HEALTHCARE APPS

Healthcare has been and will continue to be at the centre of these changes. We have seen new ways being found and funded to meet current and projected needs. A type of digitalisation in primary care took place through a combination of available technology and a restatement of

procedures to remove non-value adding activities.

There is a growing use of healthcare apps, wearable sensors and electronic healthcare records. The HSE's National Ambulance Service is the international leader in the adoption of technology to improve the services it offers. We have seen allied health professionals stepping up to expand their scope of practice and providing a safe, high-quality service.

Our recent experience is that when people are empowered and allowed access to information and treatments, that heretofore required disruption to routines, travel, crowded waiting rooms and unnecessary delays, they embrace such change.

Of course, this was facilitated by our heroic healthcare workers demonstrating a spirit of caring and service, in circumstances that placed their own health at risk, while caring and treating patients severely ill from Covid-19.

There is a price to be paid, other than financial, for 'flattening the curve', with healthcare workers now mentally and physically drained. Clinicians advised us of the healthcare needs of people which went unmet, creating a new surge which may bring the system into further crisis.

Our healthcare system is under seemingly continuous review and issued with countless reports which never get fully funded or implemented. Is this wishful thinking or could it be different this time, post lockdown?

Limited though it has been the adoption of technology together with greater empowerment of the patient, has worked. The report on mental health will recommend the greater use of technology in the assessment and treatment of psychiatric illness. The concept of 'self-managed care' and 'self-directed care' is in operation in many jurisdictions.

INTEGRATED PATIENT CARE

Ireland can learn from these experiences, and in so doing may ensure the care is 'integrated' to best meet the needs of the patients. Apart from the return of control to the patient it also opens up the possibility of treating the person at the lowest level of complexity and having timely access to assessment, treatments proposed and care given which is monitored in-situ, at a time and a cost which is pre-determined.

People can be empowered to monitor and manage their own health and in doing so make a major impact by removing a significant level of activity away from the



ABOUT THE AUTHOR

With a 40-year successful track record of achievement within the private sector, government and non-profit organisations, Tom Beegan has unique European and Canadian senior management expertise in transforming the potential of organisations, teams and individuals to achieve high performance.

He facilitates executives and their teams surmount their most important risk management challenges by focusing on getting to understand why people behave as they do and then coaching them to become high-performance teams.

A qualified psychiatric nurse, he graduated with an Advanced Management Diploma and MBA from UCD. He has also attained a professional designation of Chartered Directorship in Corporate Governance and Accountability from McMaster University, is trained as an arbitrator with the UK Institute of Arbitrators and has studied Strategic Thinking with the Schulich School of Business in Toronto.

He was Deputy CEO of the Health and Safety Authority for five years (1996-2001) before his appointment as CEO, a position he held for a further five years. In 2006 he moved to Canada to take up a position as Chief Prevention and Strategy Officer for Ontario's Workplace Safety and Insurance Board (WSIB) in Toronto, until January 2012 when he returned to Ireland.

Tom is Managing Director at Tom Beegan and Associates, which specialises in behavioral-based approaches to managing risks. He also serves as a director on various boards.

emergency departments of our acute hospitals.

The Government has the opportunity to nurture and build on the flexibility, commitment, caring and innovation delivered by our healthcare workforce. It will be a challenge to continue to build trust and instil confidence in a process which will reimagine how our Irish healthcare system can deliver world class outcomes.

This approach should embrace the private sector and service users in a true partner, driven by people's needs rather than vested interests and current organisational structures. Prioritised investment in integrated self-managed care which will help reduce inappropriate activity in the acute hospital should be pursued.

The technology is available, the needs are evident and staff have shown they will respond positively. Before Covid-19 there was a risk-averse appetite in policy towards the implementation of a formal telemedicine approach with a few islands of innovative 'pilot projects' being the extent of engagement.

This has now changed with the risk-benefit analysis and the public's perception in seeing telemedicine more broadly implemented, with an increased awareness and acceptance resulting in better level of service.

However, worrying signs are already emerging of a fragmented approach that will not be in the best interests of service users or patients. While innovation and rapid implementation of

solutions are required, so too is a national framework and a set of principles to guide their design and implementation.

The new Minister for Health Stephen Donnelly would be well-advised to carefully evaluate technology-facilitated mechanisms of both improving the delivery of healthcare and returning an adequate return on investment for the Irish taxpayer.

