BESTCARE
Next Generation HIS

Journey to Digital Hospital & Global Business: SNUBH Case

Jul, 2016

SK telecom

SNUH SEOUL NATIONAL UNIVERSITY BUNDANG HOSPITAL

ez Caretech
Your IT Partner for the Digital Hospital

Seoul National University Bundang Hospital

2010

- 515 Physicians & 780 Nurses
- 910 beds, 23 operating rooms
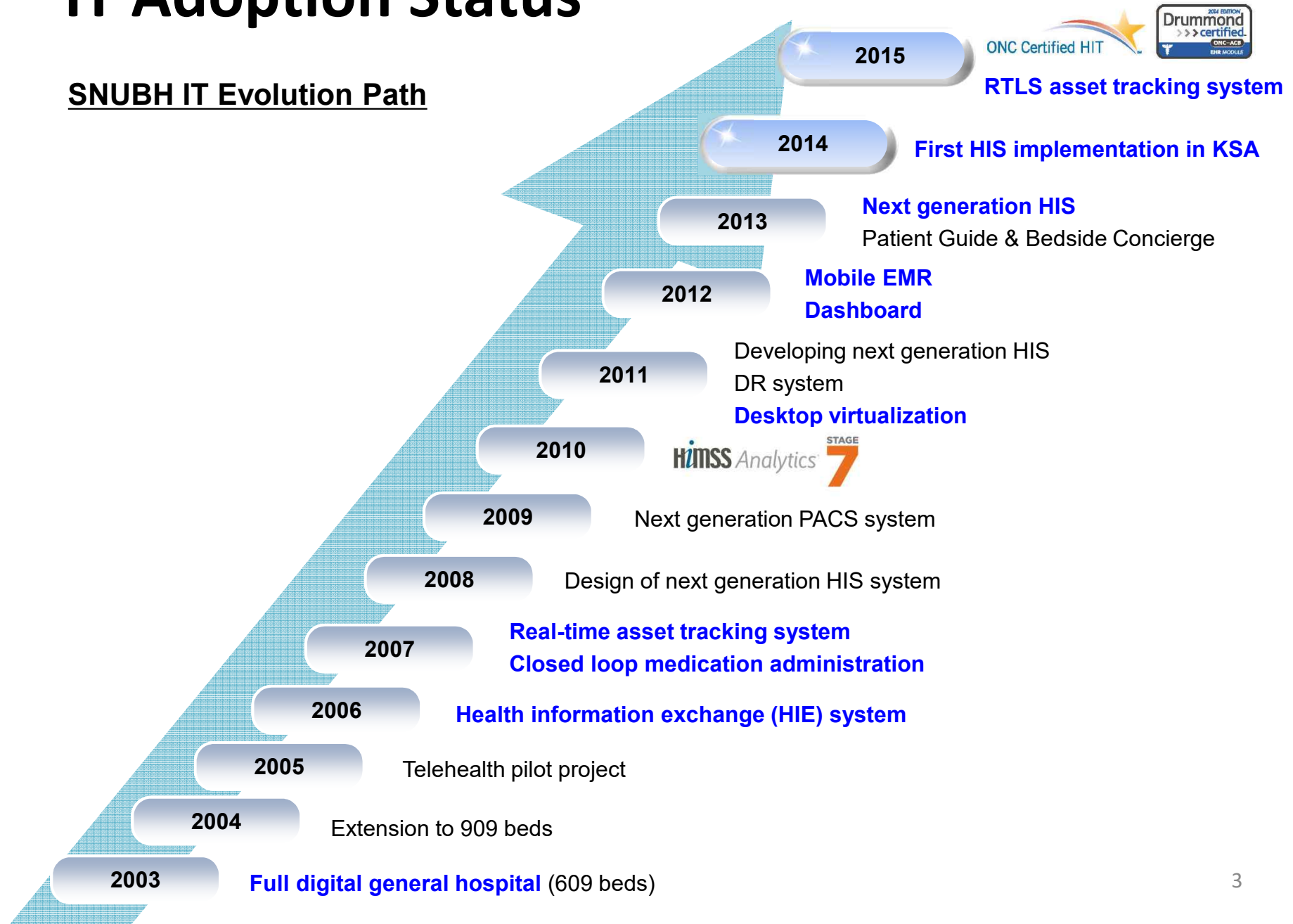- 4,000 outpatient visits / day
- Over 70,000 radiology exam / month

2016

- 740 physicians / 1,300 nurses
- 1,400 beds/ 38 operating rooms
- 6,500 outpatient visits / day
- Over 80,000 radiologic exam / month

IT Adoption Status

SNUBH IT Evolution Path

2015 — ONC Certified HIT / Drummond certified
RTLS asset tracking system

2014 — **First HIS implementation in KSA**

2013 — **Next generation HIS**
Patient Guide & Bedside Concierge

2012 — **Mobile EMR**
Dashboard

2011 — Developing next generation HIS
DR system
Desktop virtualization

2010 — HIMSS Analytics STAGE 7

2009 — Next generation PACS system

2008 — Design of next generation HIS system

2007 — **Real-time asset tracking system**
Closed loop medication administration

2006 — **Health information exchange (HIE) system**

2005 — Telehealth pilot project

2004 — Extension to 909 beds

2003 — **Full digital general hospital** (609 beds)

3

1st

First Stage 7 Hospital Outside North America (2010, 2015)

Certified Health **IT** Product List
The Office of the National Coordinator for Health Information Technology

Home | Overview | Contact | Product Listings

Product Name ▾ | BESTcare 🔍 | **Search** | Clear Search ❯

YOUR PRODUCTS (0)

	PRODUCT	VERSION	PRACTICE TYPE	CLASSIFICATION	CERTIFICATION EDITION	VENDOR	CHPL PRODUCT NUMBER
☐	BESTCare	2.0G	Inpatient	Modular EHR	2014	ezCaretech Co., Ltd	12302015-3341-8
☐	BESTCare	2.0G	Ambulatory	Modular EHR	2014	ezCaretech Co., Ltd	12302015-3340-8

Use Search Filters Below

CERTIFICATION EDITION
- 2014 ☑

PRACTICE TYPE
- Ambulatory ☐
- Inpatient ☐

CLASSIFICATION

2 products found « ‹ 1 › » 10 ▾ per page

Drummond ›››group
Certificate of EHR Compliance

This is to certify that:
BESTCare 2.0G

From:
ezCaretech Co., Ltd
www.ezcaretech.com
4FL, Kwanghee Bldg, 307, Toegye-ro, Jung-gu
Seoul, South Korea 04560

Completed EHR Certification of the Following:
EHR Module (Ambulatory)

ONC Certified HIT | Drummond ›››certified

Modules Tested: 170.314 (a)(1-15); (b)(1,2, 4,5, 7); (c)(1-3); (d)(1-8); (e)(2); (f)(1-3); (g)(2-4)
Clinical Quality Measures tested: 124v3; 125v3; 126v3; 130v3; 138v3; 146v3; 153v3; 154v3; 156v3; 165v3; 166v4
Additional software used: hMail Server

This EHR Module is 2014 Edition compliant and has been certified by an ONC-ACB in accordance with the applicable certification criteria adopted by the Secretary of the U.S. Department of Health and Human Services. Drummond Group is accredited by ANSI and approved by ONC for the ONC HIT Certification Program to certify: Complete EHR, EHR Module (all), and Certification of other types of HIT for which the Secretary has adopted certification criteria under Subpart C of 45 CFR.

Holds Certificate No. 12302015-3340-8
Date Certified: 12-30-2015
Effective Date: 2014 Edition

For and on behalf of Drummond Group:

Jodi Gonzalez | (ANSI) ANSI Accredited Program PRODUCT CERTIFICATION
Jodi Gonzalez, Certification Body Manager

This certificate remains the property of Drummond Group and shall be returned immediately upon request.
To be read in conjunction with the scope above or any attached appendix.

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Drummond ›››group
Certificate of EHR Compliance

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BESTCare 2.0G

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4FL, Kwanghee Bldg, 307, Toegye-ro, Jung-gu
Seoul, South Korea 04560

Completed EHR Certification of the Following:
EHR Module (Inpatient)

ONC Certified HIT | Drummond ›››certified

Modules Tested: 170.314 (a)(1-17); (b)(1,2, 4-7); (c)(1-3); (d)(1-8); (f)(1-4); (g)(2-4)
Clinical Quality Measures tested: 9v3; 30v4; 32v4; 53v3; 55v3; 60v3; 71v4; 72v3; 91v4; 100v3; 102v3; 104v3; 105v3; 107v3; 110v3; 111v3; 185v3
Additional software used: hMail Server

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Holds Certificate No. 12302015-3341-8
Date Certified: 12-30-2015
Effective Date: 2014 Edition

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2014 EDITION
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ONC–ACB
EHR MODULAR

1st

First Certified Solution Outside North America

BESTCARE Next Generation HIS

5

Awards

2010	2011	2012	2013	2014

2010: First HIMSS Stage 7 outside North America

2011: First Hospital Chosen as "Best Practice of IT Convergence" by NIPA*
(National IT Industry Promotion Agency)

2012: First Hospital to Win National Presidential Prize for IT Innovation

2013: Winner of HIMSS-Elsevier Digital Healthcare Award

2014:
- Winner of Reddot Design Award
- Winner of iF Design Award
- SAP Innovation Award

HIMSS Analytics

STAGE 7

reddot design award best of the best 2013

iF communication design award 2014

Outstanding ICT Achievement

SAP HANA Innovation award Big Data part "Social Hero"

BESTCARE
Next Generation HIS

Gartner, 2014 CIO Agenda

Gartner Executive Programs

Taming the Digital Dragon: The 2014 CIO Agenda

2014 No. 1

Gartner.

APPENDIX: CASE STUDIES, ADDITIONAL DATA, DEMOGRAPHICS

Seoul National University Bundang Hospital goes fully digital to replatform its health systems and services

Opened in 2003 with 609 beds, Seoul National University Bundang Hospital (SNUBH) has grown to a 1,400-bed facility with 38 operating theaters. The hospital hosts 5,000 outpatient visits per day, employs 700 doctors and 1,000 nurses, and has been digital from the start.

Dr. Hee Hwang, CIO and chief medical officer, has a Ph.D. in pediatric neurology. He leads the IT steering committee and supervised the latest rollout of digital health information systems at SNUBH. "I am not an engineer or an IT guy, but I have a great interest in digital technology," he says.

His digital leadership challenge was to muster both corporate and IT resources into a single vision: Design SNUBH to be fully digital. "We were chartless, filmless and order-slipless from the start," says Hwang. Digital assets include clinical decision support systems, clinical pathways and clinical indicators. As Hwang explains, "We now use 147 clinical pathways in 13 specialties, and more than 300 clinical indicators in areas such as recovery time, transfusion management and antibiotics management. Digital covers every aspect of our practice."

The first system was built using a previous version of Microsoft's .NET Framework and browser-based interfaces. "It was getting outdated," says Hwang. "Specifically, it could not support the Nexus of Forces Gartner refers to: social, mobile, cloud and information."

The next system, implemented in 2013, took SNUBH further into the digital world. "I can say that we used IT to build our first system, but we applied digital technologies to create the second one," explains Hwang (see figure opposite for digital milestones in the hospital's evolution).

Harvard Business Review
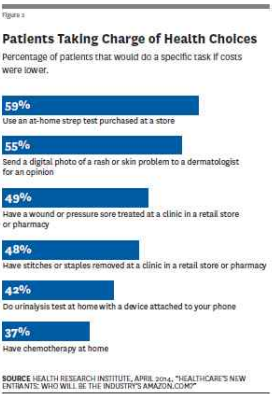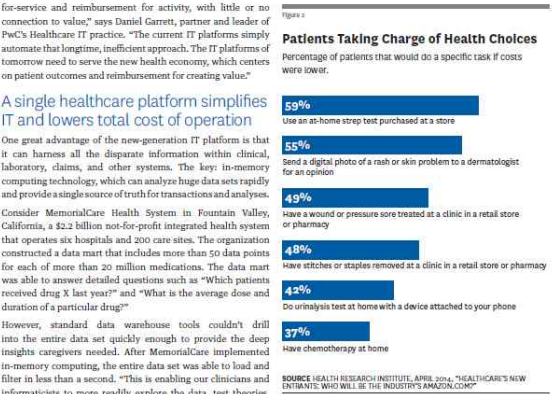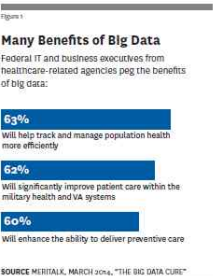
Page 1

How Big Data Impacts Healthcare

THE SPEED AND SCALE of the challenges and demands facing the healthcare industry are unprecedented. Yet in this period of rapid change, solutions are emerging that not only surmount those issues but also open new avenues to higher-value care. Cost pressures are making evidence-based medicine the industry catch phrase. At the same time, advances in genetics, biomedics, and computing technology are ushering in an era of more effective personalized medicine and treatments tailored to patients' individual characteristics.

Exploiting these opportunities requires the savvy use of data, which has been a long-term challenge for healthcare providers, who work with some of the most complex and disconnected data sets of any industry. "Most of the data systems are for billing, and they aren't used to improve the quality of care," explains Jason Jones, executive director for clinical intelligence and decision support at Kaiser Permanente, a healthcare provider and not-for-profit health plan that serves approximately 9.1 million members in eight states and the District of Columbia.

Yet healthcare organizations on the forefront of efficiency are already reaping the benefits of big data (a catchall term for the masses of structured and unstructured data flowing through organizations as well as the tools for analyzing the information). They have adopted IT platforms that simplify processes and IT systems while expanding and improving the scope and spread of care at a lower total cost of operation. The evolving IT platforms link disparate pools of data within and outside healthcare organizations and present the information with visualization tools that put actionable insights into the hands of caregivers and patients, enabling providers to invent new healthcare practices as needed. The benefits of this approach, according to a recent MeriTalk survey of 150 federal IT and business executives from healthcare-related agencies, include IT simplification; more evidence-based, value-conscious medicine; better preventive care; and improved, more personalized treatment.
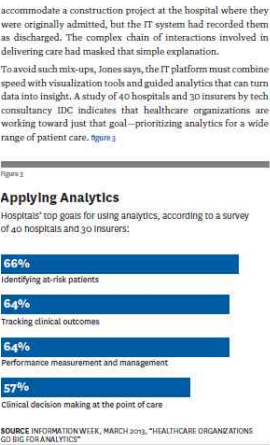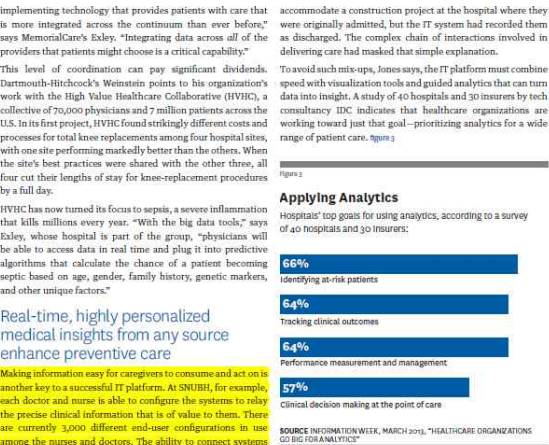
What is driving the push for big data? It's simple: the demand to create more value in healthcare. "The healthcare system of today is based on fee-

Many Benefits of Big Data
Federal IT and business executives from healthcare-related agencies peg the benefits of big data:

63%
Will help track and manage population health more efficiently

62%
Will significantly improve patient care within the military health and VA systems

60%
Will enhance the ability to deliver preventive care

SOURCE MERITALK, MARCH 2014, "THE BIG DATA CURE"

Sponsored by SAP

Page 2

for-service and reimbursement for activity, with little or no connection to value," says Daniel Garrett, partner and leader of PwC's Healthcare IT practice. "The current IT platforms simply automate that longtime, inefficient approach. The IT platforms of tomorrow need to serve the new health economy, which centers on patient outcomes and reimbursement for creating value."

A single healthcare platform simplifies IT and lowers total cost of operation

One great advantage of the new-generation IT platform is that it can harness all the disparate information within clinical, laboratory, claims, and other systems. The key: in-memory computing technology, which can analyze huge data sets rapidly and provide a single source of truth for transactions and analyses.

Consider MemorialCare Health System in Fountain Valley, California, a $2.2 billion not-for-profit integrated health system that operates six hospitals and 200 care sites. The organization constructed a data mart that includes more than 50 data points for each of more than 20 million medications. The data mart was able to answer detailed questions such as "Which patients received drug X last year?" and "What is the average dose and duration of a particular drug?"

However, standard data warehouse tools couldn't drill into the entire data set quickly enough to provide the deep insights caregivers needed. After MemorialCare implemented in-memory computing, the entire data set was able to load and filter in less than a second. "This is enabling our clinicians and informaticists to more readily explore the data, test theories, and look for correlations and associations that would otherwise be hidden," says Dan Exley, executive director of data strategy and reporting at MemorialCare.

Over time, the new health IT platform will extend its scope and spread to patients, says James N. Weinstein, CEO and president of Dartmouth-Hitchcock, an academic medical center. "The simplification of information provided by new IT platforms should allow patients to make informed decisions," he says. "Right now they have less information about their healthcare than they do about their breakfast cereal."

Simpler, more readily available information could cut the cost of healthcare while improving its quality, according to a recent Health Research Institute survey. figure 2 "Many consumers have high deductibles, and they are actively looking to reduce costs and improve quality," Weinstein says. Emerging Internet technologies could help. The survey found, for example, that patients would likely choose nontraditional forms of healthcare, such as at-home urinalysis tests using a device attached to a smartphone, if they cost less—and if they knew about them.

Patients Taking Charge of Health Choices
Percentage of patients that would do a specific task if costs were lower.

59% Use an at-home strep test purchased at a store

55% Send a digital photo of a rash or skin problem to a dermatologist for an opinion

49% Have a wound or pressure sore treated at a clinic in a retail store or pharmacy

48% Have stitches or staples removed at a clinic in a retail store or pharmacy

42% Do urinalysis test at home with a device attached to your phone

37% Have chemotherapy at home

SOURCE HEALTH RESEARCH INSTITUTE, APRIL 2014, "HEALTHCARE'S NEW ENTRANTS: WHO WILL BE THE INDUSTRY'S AMAZON.COM?"

Inventing new healthcare practices as needed for a much lower cost of care

The ability to rapidly analyze structured and unstructured data sets is improving patient care at Seoul National University Bundang Hospital (SNUBH), a South Korean facility with some 1,800 beds and 3,100 medical workers. There, doctors are using in-memory computing to improve preoperative care. Availing themselves of real-time feedback enabled by the technology, they have been able to reduce the usage of antibiotics before surgery. Not only does the reduction cut costs and help prevent the growth of drug-resistant bacteria, it is a matter of "huge clinical significance to the patient," says Dr. Hee Hwang, CIO at SNUBH.

Other health systems are using new computing technology to pull together data scattered across not only different departments but also multiple organizations. "Some organizations, like MemorialCare, are strengthening existing partnerships and

Page 3

implementing technology that provides patients with care that is more integrated across the continuum than ever before," says MemorialCare's Exley. "Integrating data across all of the providers that patients might choose is a critical capability."

This level of coordination can pay significant dividends. Dartmouth-Hitchcock's Weinstein points to his organization's work with the High Value Healthcare Collaborative (HVHC), a collective of 70,000 physicians and 7 million patients across the U.S. In its first project, HVHC found strikingly different costs and processes for total knee replacements among four hospital sites, with one site performing markedly better than the others. When the site's best practices were shared with the other three, all four cut their lengths of stay for knee-replacement procedures by a full day.

HVHC has now turned its focus to sepsis, a severe inflammation that kills millions every year. "With the big data tools," says Exley, whose hospital is part of the group, "physicians will be able to access data in real time and plug it into predictive algorithms that calculate the chance of a patient becoming septic based on age, gender, family history, genetic markers, and other unique factors."

Real-time, highly personalized medical insights from any source enhance preventive care

Making information easy for caregivers to consume and act on is another key to a successful IT platform. At SNUBH, for example, each doctor and nurse is able to configure the systems to relay the precise clinical information that is of value to them. There are currently 3,000 different end-user configurations in use among the nurses and doctors. The ability to connect systems and display targeted information also enabled the hospital to better coordinate care. In some departments, it previously took 48 hours to provide a patient referral. By pulling real-time data from different locations and displaying it in easy-to-use ways, the hospital reduced referral wait times to four to six hours.

Speed, however, is no advantage unless the data retrieved are also relevant and accurate. "If all we do is help people make the wrong decisions faster, that won't be a net business or care benefit," says Jones of Kaiser Permanente. "If you don't couple that speed with the right statistical tools, it can be hard to discern what you need to pay attention to amid the random noise."

To illustrate his point, Jones cites a situation in which a large number of patients who were treated for pneumonia at one Kaiser Hospital and discharged were apparently readmitted to another Kaiser facility soon afterward. A three-month investigation revealed that the problem wasn't with the hospital's care but with its data. The patients had been moved to another facility to

accommodate a construction project at the hospital where they were originally admitted, but the IT system had recorded them as discharged. The complex chain of interactions involved in delivering care had masked that simple explanation.

To avoid such mix-ups, Jones says, the IT platform must combine speed with visualization tools and guided analytics that can turn data into insight. A study of 40 hospitals and 30 insurers by tech consultancy IDC indicates that healthcare organizations are working toward just that goal—prioritizing analytics for a wide range of patient care. figure 3

Applying Analytics
Hospitals' top goals for using analytics, according to a survey of 40 hospitals and 30 insurers:

66% Identifying at-risk patients

64% Tracking clinical outcomes

64% Performance measurement and management

57% Clinical decision making at the point of care

SOURCE INFORMATIONWEEK, MARCH 2013, "HEALTHCARE ORGANIZATIONS GO BIG FOR ANALYTICS"

Conclusion and recommendations

Healthcare's future is still under construction, but it's already clear that designing the healthcare IT platform of tomorrow entails reimagining not only how data is used but how healthcare is delivered. "We need to remove the barriers of time and space between the patient, the doctor, and the healthcare administrator," PwC's Garrett says. "It's about not just crunching a lot of data, but inserting that data at key moments when healthcare is delivered and consumed." And the linchpin of the entire approach will be a single innovation platform that delivers real-time and personalized medical insights while reducing costs across the continuum of care.

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SAP SAPPHIRE NOW IT Innovation Award

Trailblazer

Social Hero

Big Data

Spirit Aerosystems

NCT

Center Point Energy

Unilever

Seoul National University Bundang Hospital

T-Mobile

Textile Rubber & Chemical Company

Medtronic

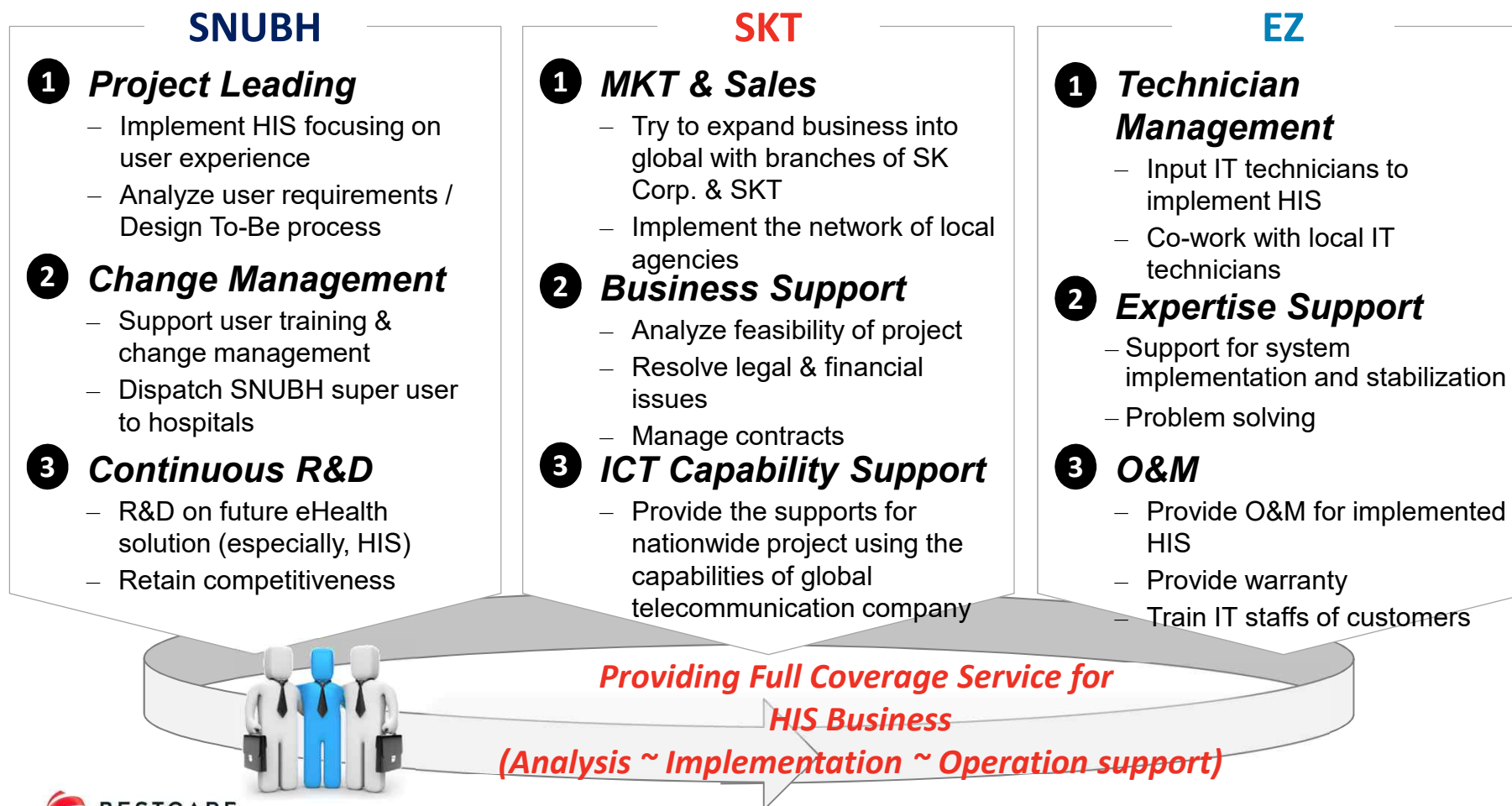Alliander

ISO 27001/27799 Certified

('14.09.15)

Standards – ISO/IEC 27001 : 2013
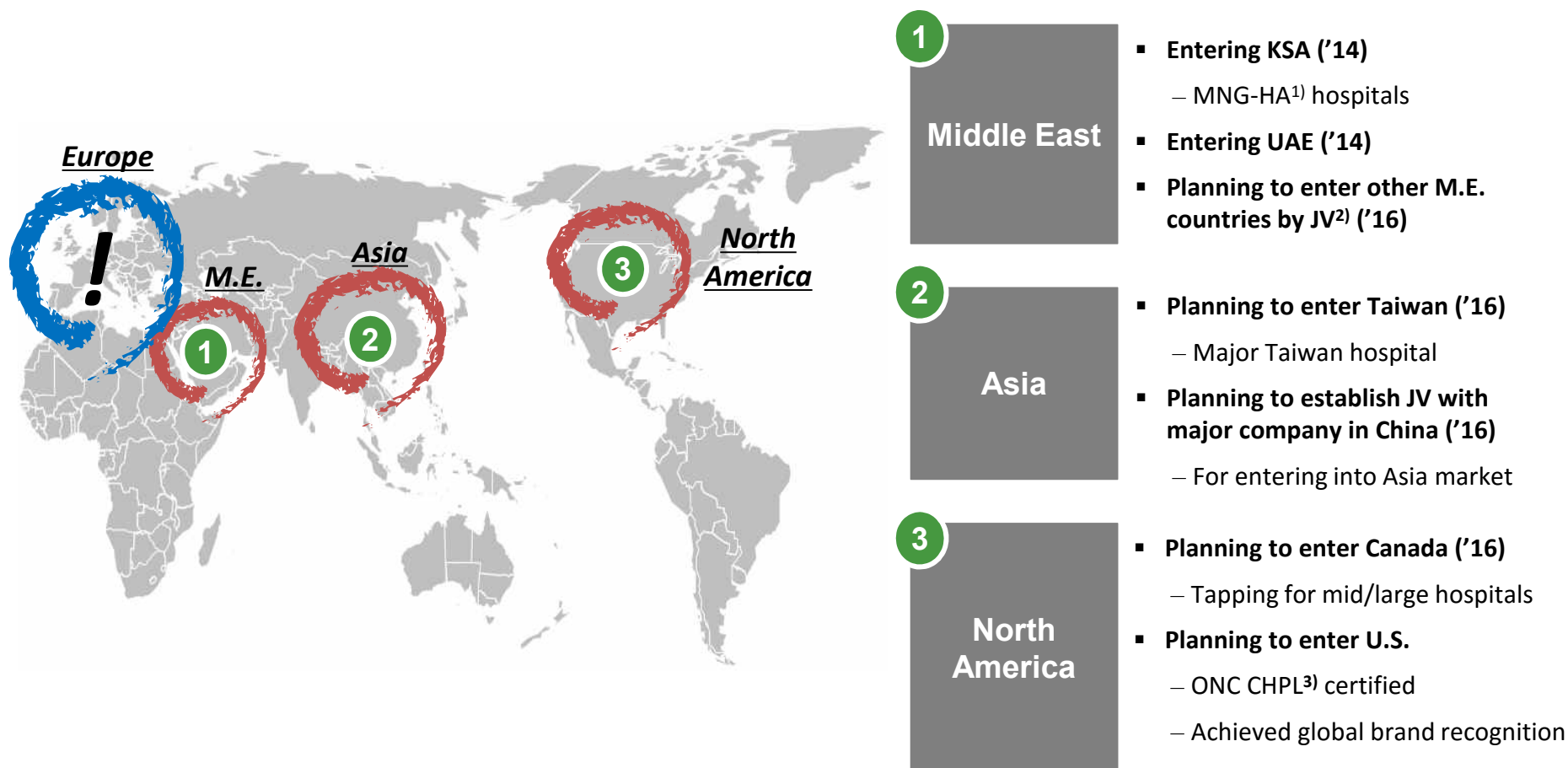**Scope of Certification – Health Security management system and maintenance activities including hospital information system for Seoul National University Bundang Hospital.**

Role for Successful Global Business

- From the development to follow-up management of HIS project, each party performs their unique roles for the successful HIS global business.

SNUBH

1 Project Leading
- Implement HIS focusing on user experience
- Analyze user requirements / Design To-Be process

2 Change Management
- Support user training & change management
- Dispatch SNUBH super user to hospitals

3 Continuous R&D
- R&D on future eHealth solution (especially, HIS)
- Retain competitiveness

SKT

1 MKT & Sales
- Try to expand business into global with branches of SK Corp. & SKT
- Implement the network of local agencies

2 Business Support
- Analyze feasibility of project
- Resolve legal & financial issues
- Manage contracts

3 ICT Capability Support
- Provide the supports for nationwide project using the capabilities of global telecommunication company

EZ

1 Technician Management
- Input IT technicians to implement HIS
- Co-work with local IT technicians

2 Expertise Support
- Support for system implementation and stabilization
- Problem solving

3 O&M
- Provide O&M for implemented HIS
- Provide warranty
- Train IT staffs of customers

Providing Full Coverage Service for HIS Business
(Analysis ~ Implementation ~ Operation support)

BESTCARE Next Generation HIS

Global Expansion

With the excellent capabilities and world class solution, BESTCare 2.0, Consortium expanded its business to M.E. and Asia, preparing to jump into Global HIS company.

Europe

M.E.

Asia

North America

1 Middle East

- **Entering KSA ('14)**
  - MNG-HA[1] hospitals
- **Entering UAE ('14)**
- **Planning to enter other M.E. countries by JV[2] ('16)**

2 Asia

- **Planning to enter Taiwan ('16)**
  - Major Taiwan hospital
- **Planning to establish JV with major company in China ('16)**
  - For entering into Asia market

3 North America

- **Planning to enter Canada ('16)**
  - Tapping for mid/large hospitals
- **Planning to enter U.S.**
  - ONC CHPL[3] certified
  - Achieved global brand recognition

BESTCare Overview

The World's First and Best Digital General Hospital

BESTCare : Bundang hospital Electronic System for Total care

BESTCARE Integrated HIS of SNUBH

4 Less

EMR	PACS	OCS(CPOE)	PMS & MIS Groupware
Chartless	Filmless	Slipless	Paperless

BESTCARE
Next Generation HIS
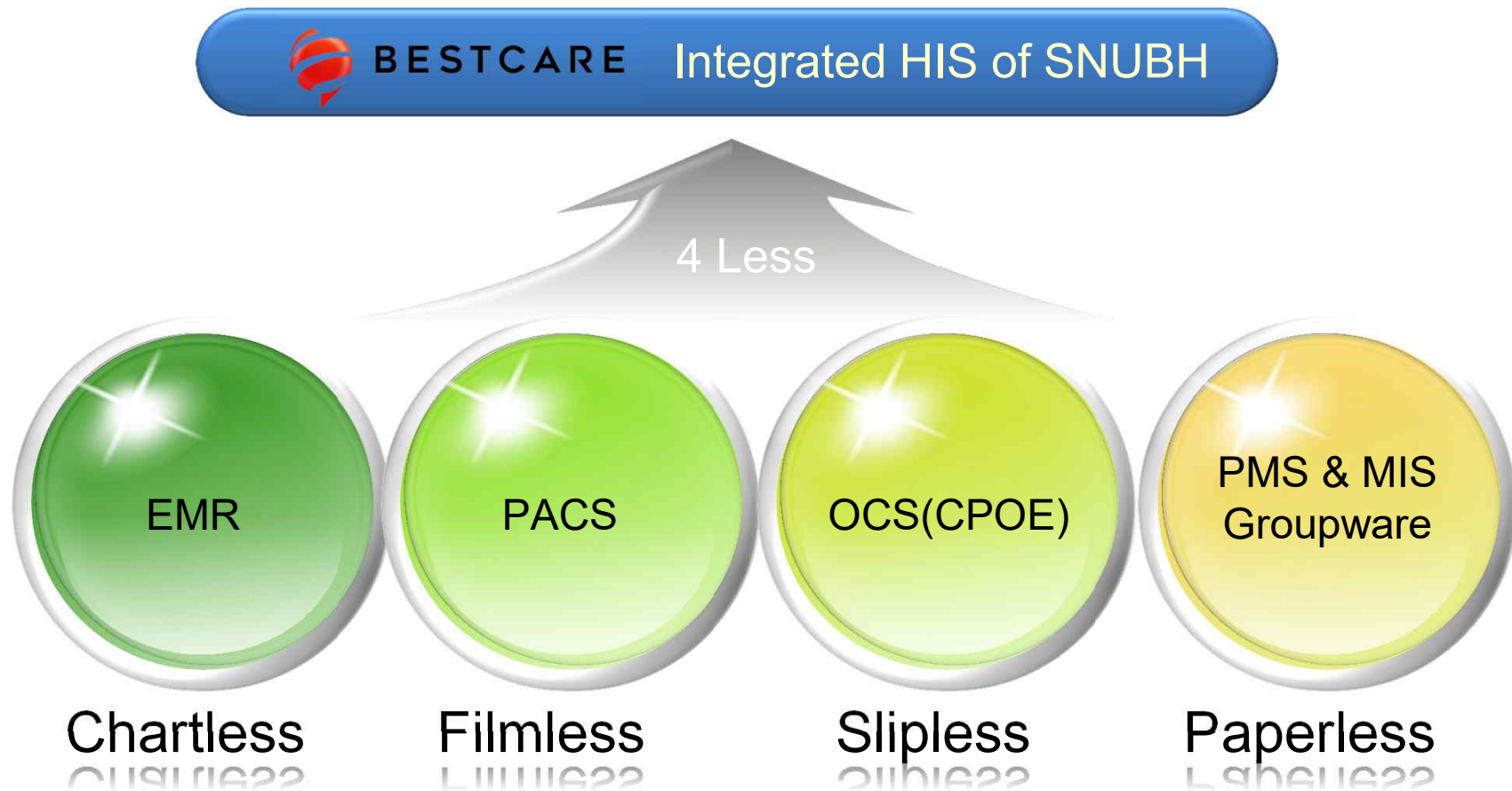
Key Considerations for Moving Forward

SOA-based Modeling
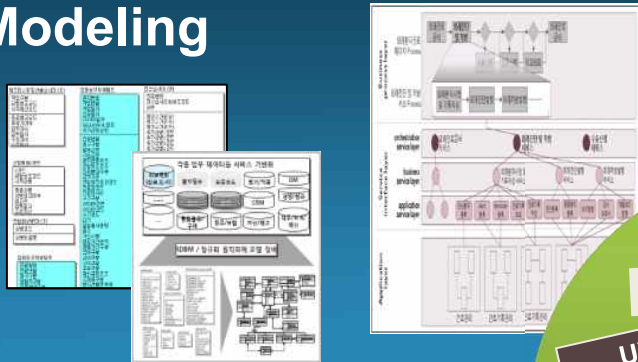
Next Generation User Experience

Patient-Centered Smart Health Patient Portal
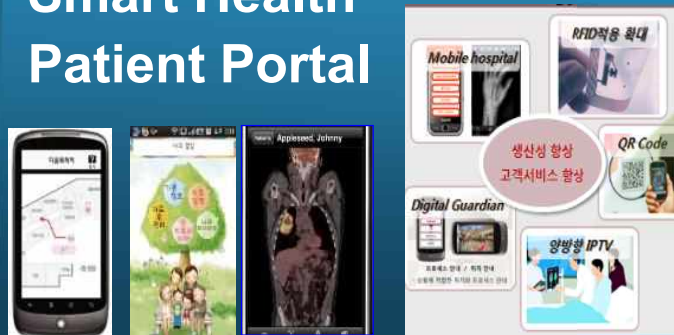
Standard Terminology Free-text Retrieval

CDW · Personalize · Terminology · Sharing · UX · Multi-tasking · CDSS · Summary sheet · IT Governance · Privacy/Security · Patient Portal · Flexible · Mobile

BESTCARE
Next Generation HIS
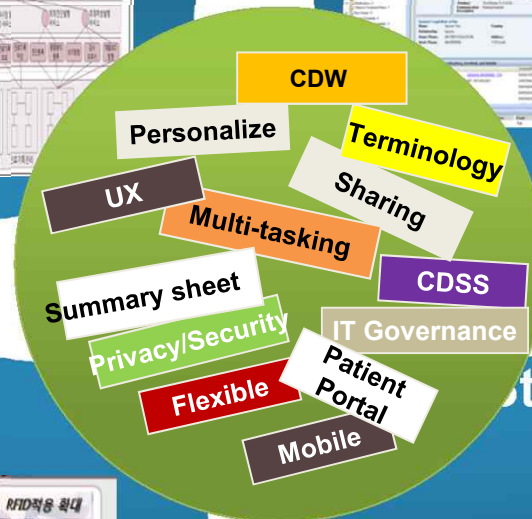
Evidence-Based Patient Care System

CLMA (Closed Loop Medication Administration)

CI (Clinical Indicator)

4C

CDSS (Clinical Decision Support System)

CP (Clinical Pathway)

Patient Safety

Standardized Practice

Quality Control

BESTCARE
Next Generation HIS
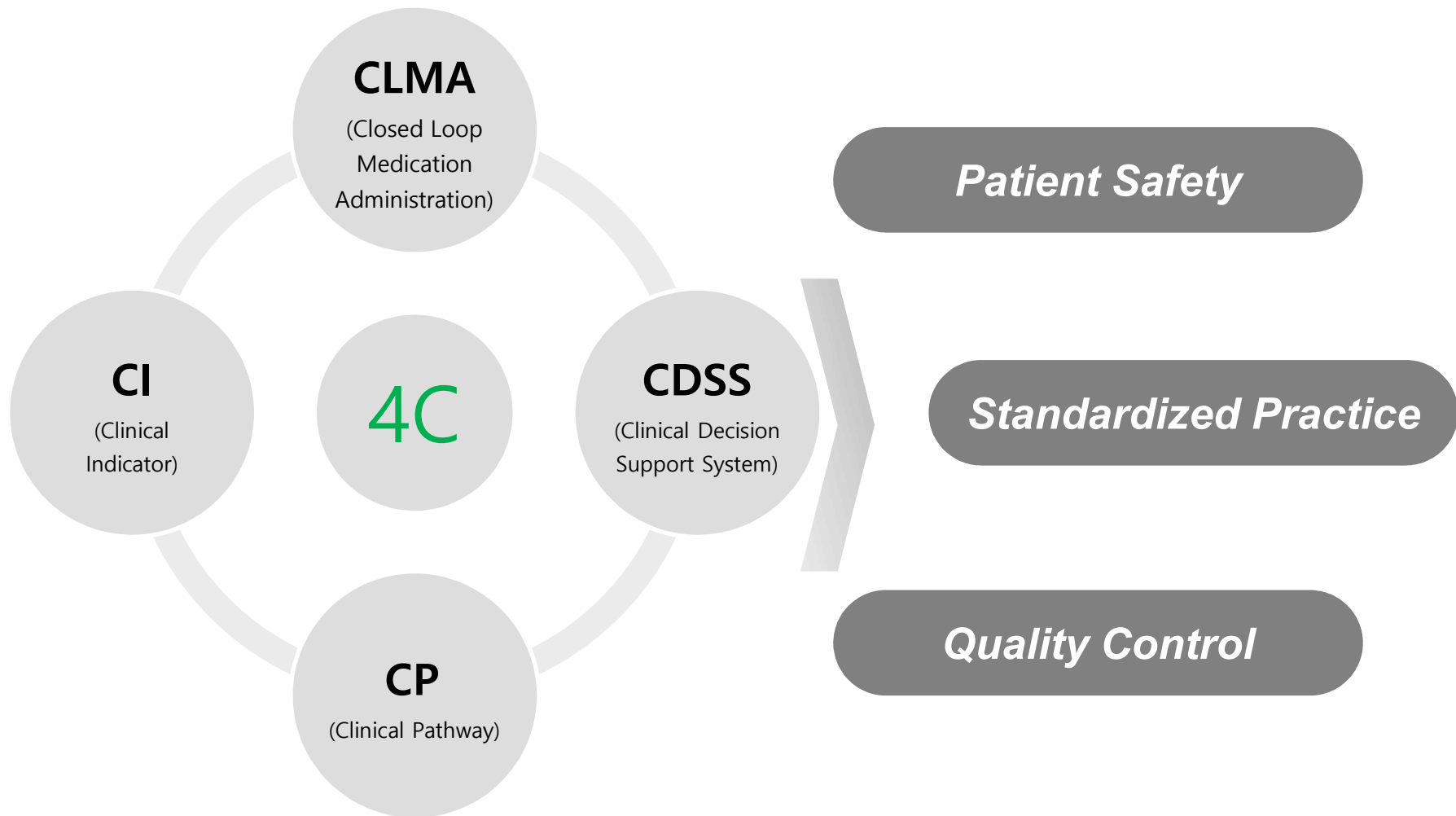
Use of Standard Terminology

Medical terms mapped to standardized terminologies.

Terminology	Number	Medical terms of reference	
Chief Complaint	6,646	SNOMED – CT	UMLS
Diagnosis	22,683	SNOMED - CT	ICD-10
Operative Procedure	9,660	SNOMED - CT	ICD-10
Nursing practice	3,781	ICNP 2.0	

BESTCARE
Next Generation HIS

Medication Administration

(Right patient, Right medication, Right dose, Right route, Right time)

1 **Print RFID wristband**
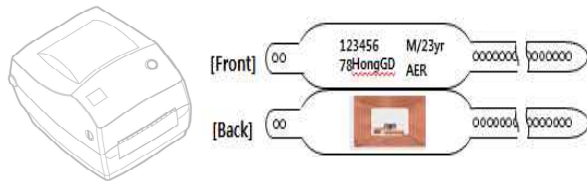
2 **RFID wristbands given to all inpatients**

3 **Scan RFID tag to staff ID card and patient's RFID tag to wristband**

4 **Crosscheck patient ID and medication barcode**

Correct → **Save**

Interfaced to EMR → **Time of administration**

08:17/Y, 12:41/Y, 19:00/,

Mismatch → **Wrong patient ID!**

Wrong Time! Check time of administration.

BESTCARE Next Generation HIS

(Right patient, Right medication, Right dose, Right route) (Right time : Plan ±1 hour)
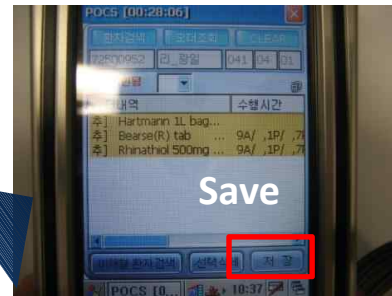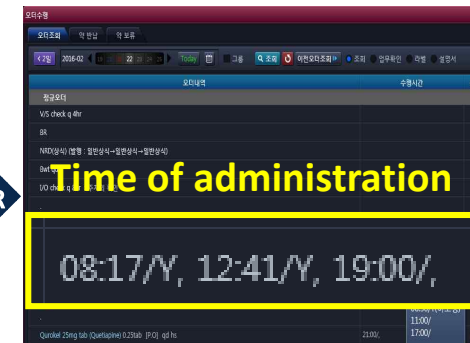
Human milk

Human milk management process (from storage to feeding)

[Attach neonate's barcode]

[Attach barcode on bottle]

Human milk storage

Prepare feeding

Milk feeding

RFID Wrist band

Barcode attached bottle

EMR interface

[interfaced to nurse's acting sign]
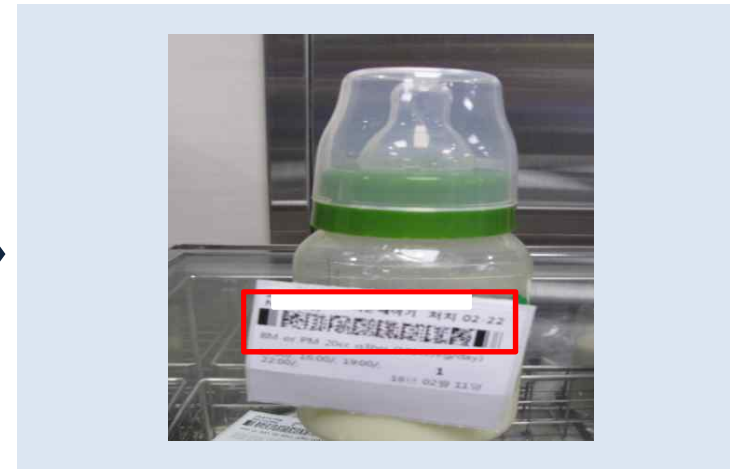
[Check patient's ID and Barcode with PDA]

18

Blood bank - Delivery

Print out label for pick-up (nursing unit)

- **Blood T/F Order**
- **Patent's name, number**
- **Nurses name, number**

Pop-up (nursing units)

Blood Preparation complete

Matching report

Scan all three barcodes :

#1 Barcode on cross-matching
#2 Barcode on blood product
#3 Barcode for pick-up

- **Blood product is dispensed when all three information**

Lab technician | Nurse | Delivery staff

→**Attach and dispense product.**
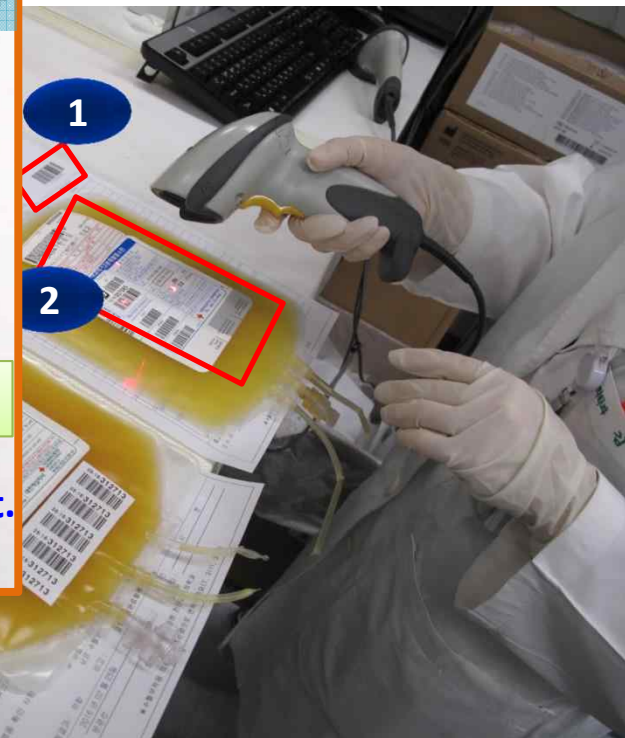
DW & CI

CDW Architecture

In-Memory Big data Solution
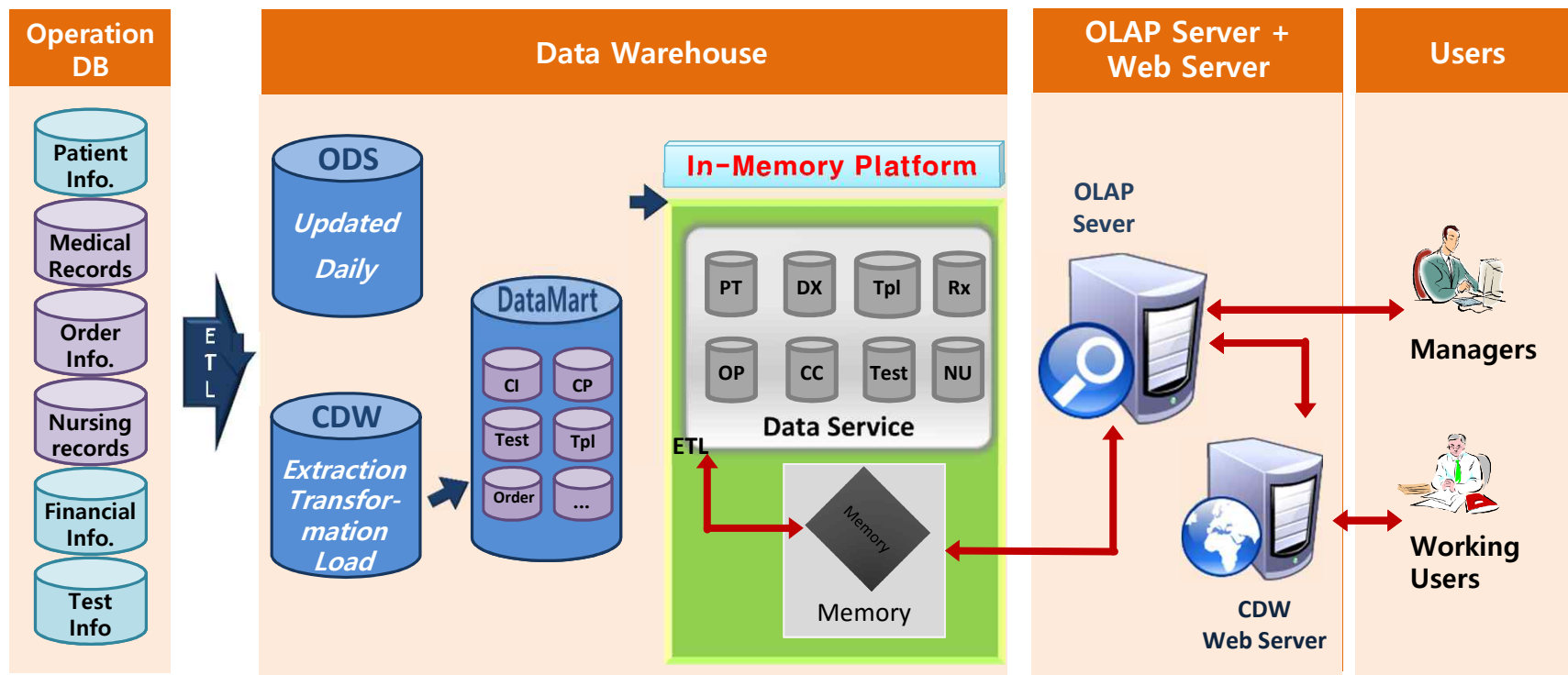
CI Development/Monitoring

Number of Clinical Indicators

No.

463 electronically managed indicators. (As of 31.12.2015)

Year

BESTCARE
Next Generation HIS
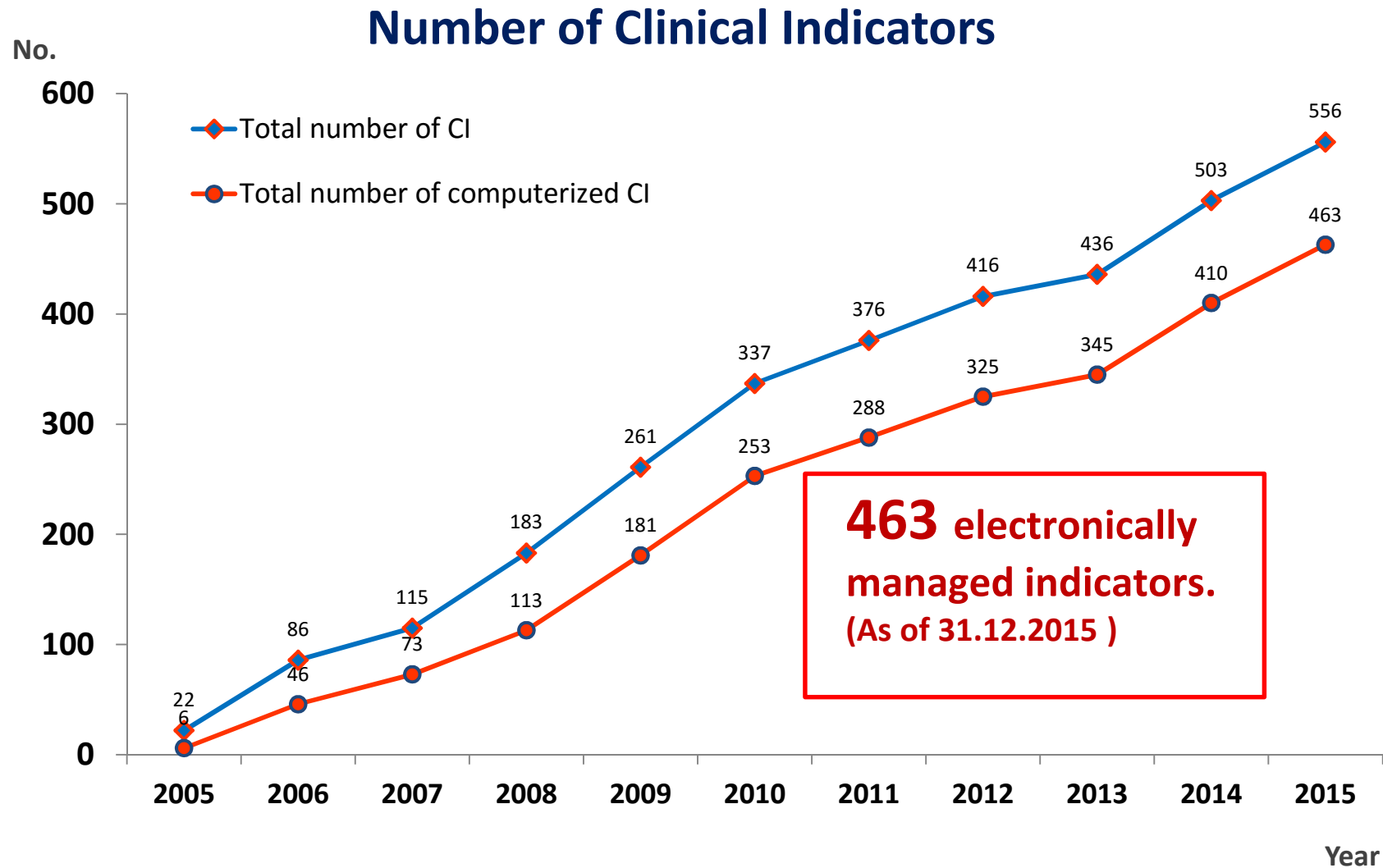
Optimal Prescription of Preventive Antibiotics by CI Application

Credited to its CI application, SNUBH provides consistent quality of healthcare, such as improving preventative antibiotics administration rates beyond target level

Appropriateness at SNUBH improved via CP, after-cause analysis, and course-correction with the medical department

Avoid antibiotics to rate (%)
3rd Cephalosporin administratio rate (%)
Aminoglycoside administratio rate (%)
Combination of antibiotics rate (%)

Administration rate of non-recommended antibiotics: target (10%)

BESTCARE
Next Generation HIS
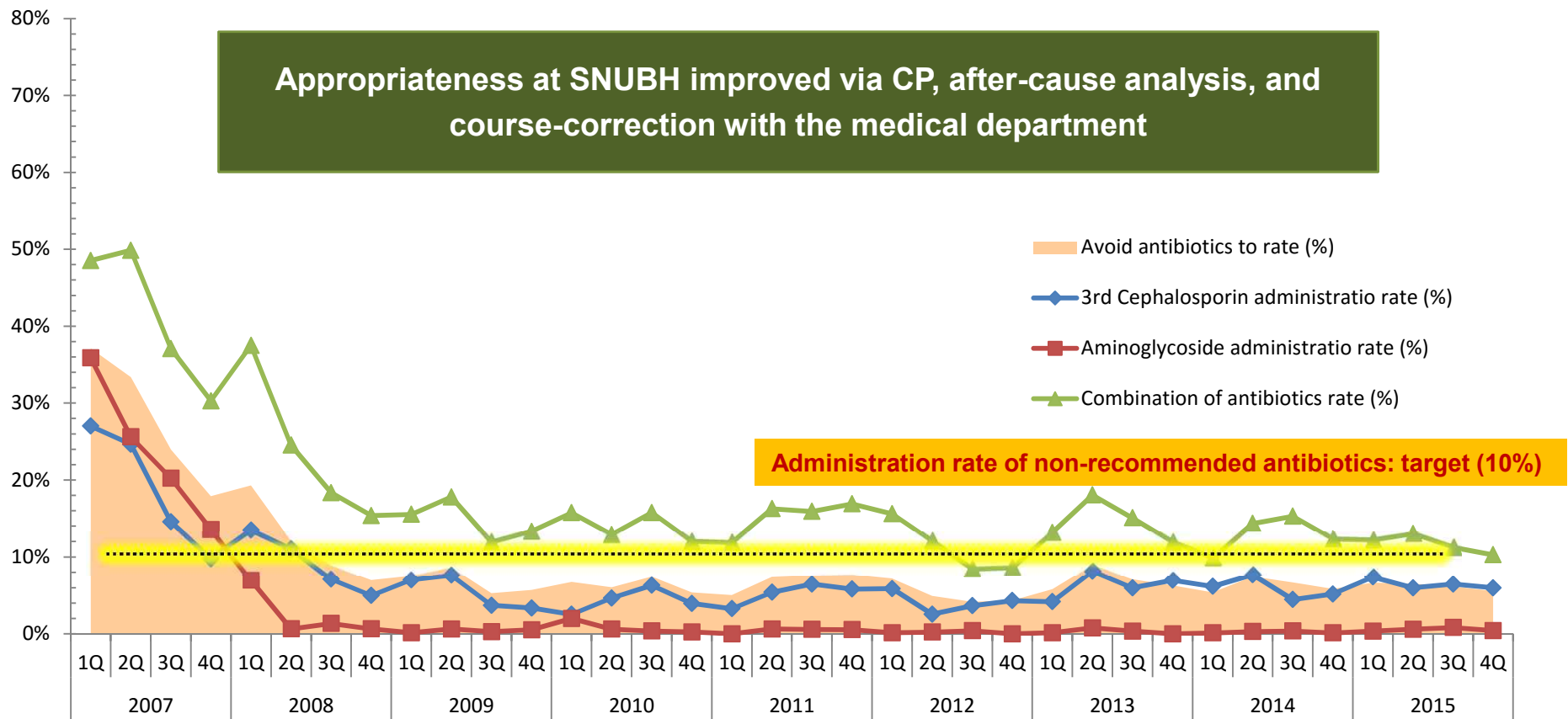
Smart Hospital & Patient Engagement Solutions
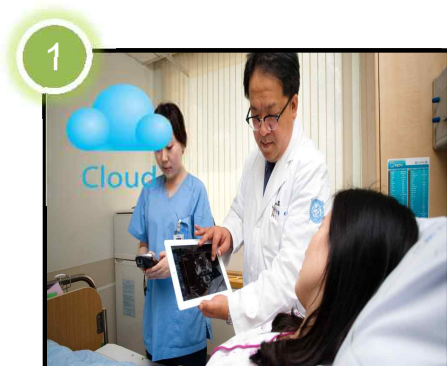
Desktop Virtualization

Mobile EMR

Dashboard
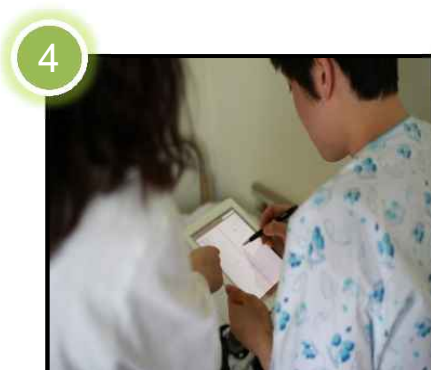
Mobile e-Consent
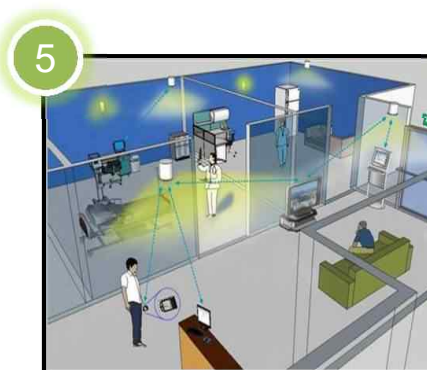
Smart Patient Guide

Smart Bedside Station

Patient Portal

BESTCARE
Next Generation HIS

Mobile EMR

- Secure access to entire EMR record
- Mobile PACS Integration
- User-friendly interface
- Any smart devices

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Dashboard

Dashboard (BESTBoard®)

55-inch digital dashboard system for ward, ICU, and ER
Opened in March, 2012

BESTCARE
Next Generation HIS
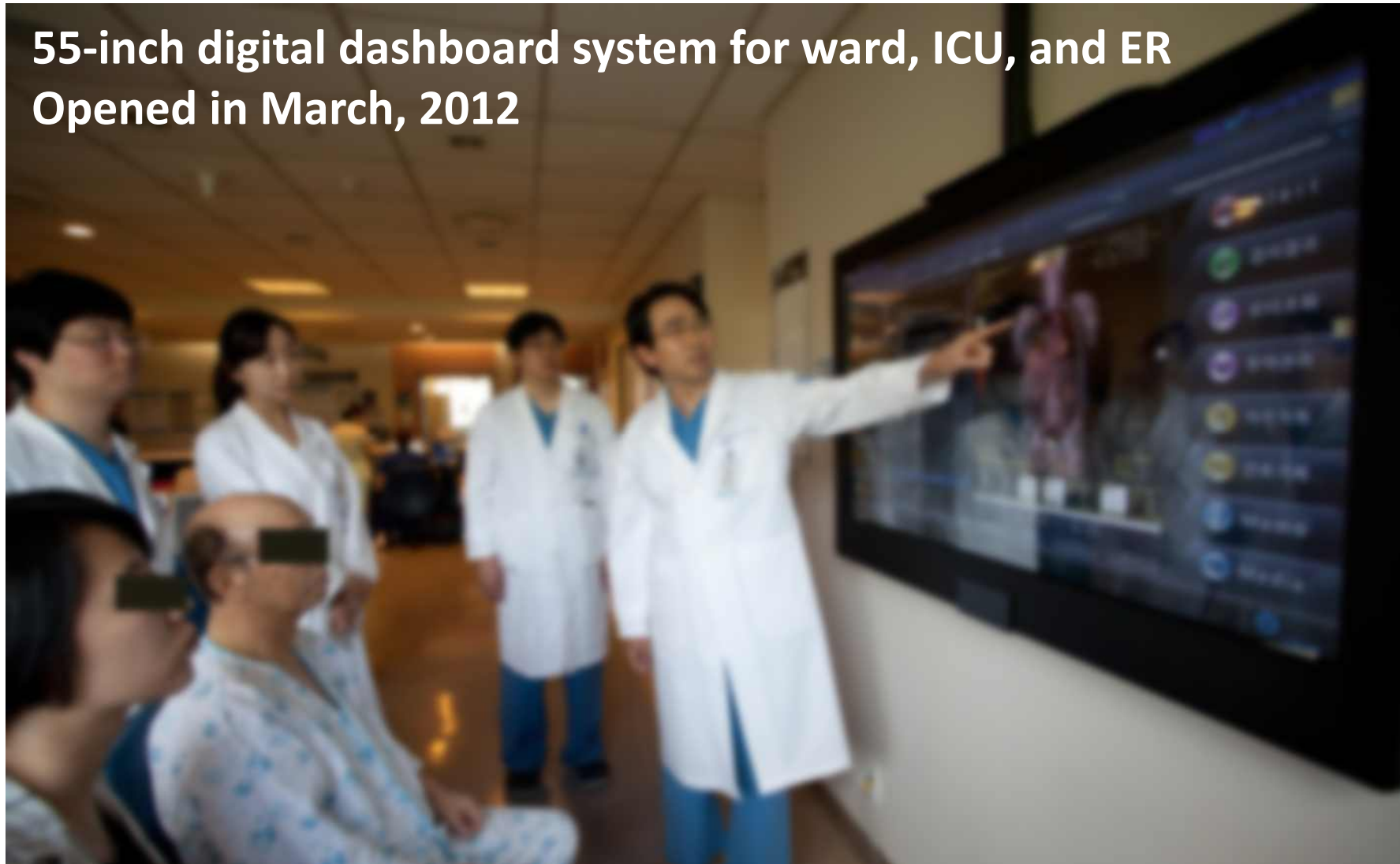
Smart Patient Guide
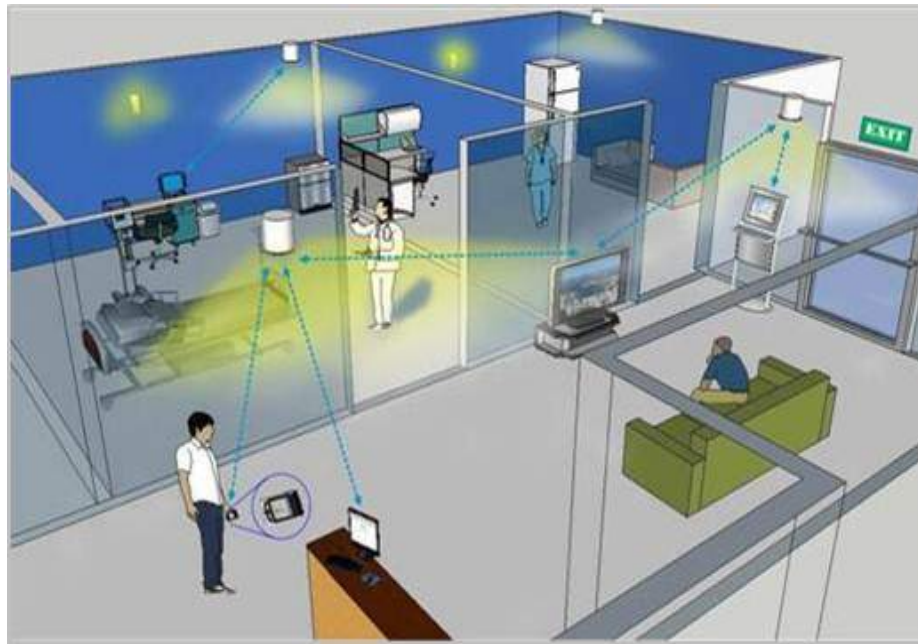
- Real-time location-based service
- Indoor location tracking using Bluetooth APs

Smart Clinic Information

Smart Indoor Navigation

Smart Outdoor Navigation

Smart Survey

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Smart Bedside Station

BESTCARE
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Smart Bedside Station

Patient-centered user-friendly UI/UX

※ This work was supported by the IT R&D program of SNUBH and SKT.

reddot design award
best of the best 2013

communication design award
iF 2014

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Diabetes Care

Study Result on Diabetes Care Device
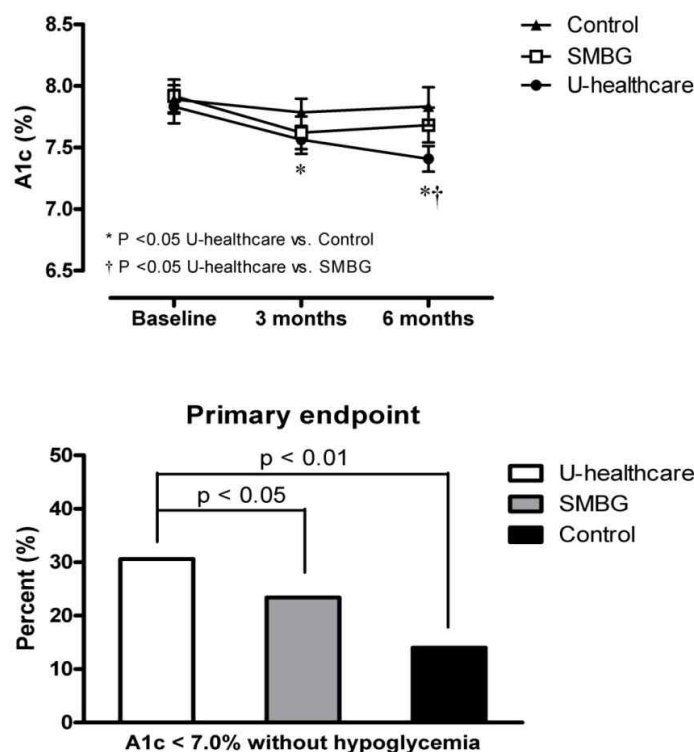
Published Journal

Changes of A1C level over 6 months of study in the u-healthcare, SMBG and control groups and A1c < 7.0% without hypoglycemia

Diabetes Care; IF=7.3

Future Plan

- Further integration of EHR system with smart ICT technologies

Barcode/RFID
- Closed-loop infusion pump integration with EMR

IoT
- Continuous patient monitoring for nursing and rehabilitation
- Hospital environment monitoring

Big Data Analytics
- Cloud-based population health management
- Predictive CDSS with data mining

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Thank you!