



General Perspective: From Data to Wisdom?

HIMSS Eurasia

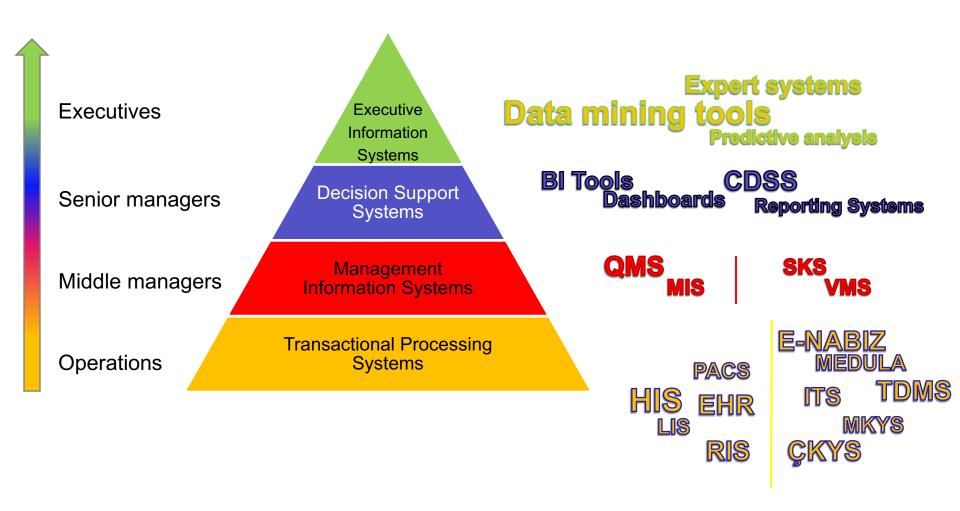
İlker KÖSE, PhD
Country Director of HIMSS Analytics, Turkey
Istanbul Medipol University, Turkey

26 October 2018 Istanbul, Turkey



Information systems pyramid

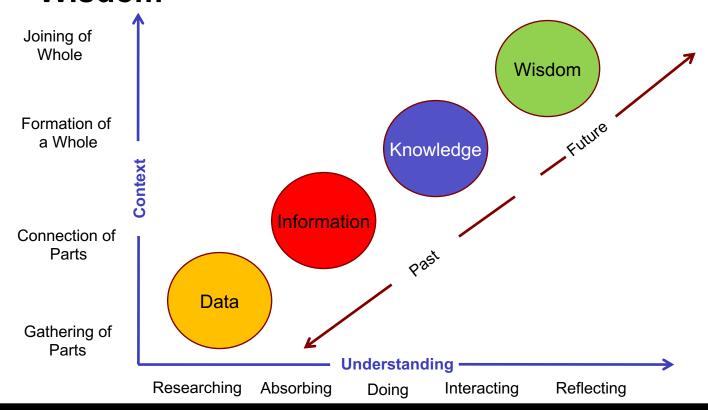






DIKW

- Data,
- Information,
- Knowledge,
- Wisdom

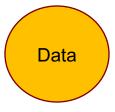












Healthcare data

- Admission, referral and discharge data sets
- Anamnesis, lab and radiology results
- Consultations
- Prescriptions
- Operations,
- ...

Managerial processes

- Resources and assignments
- Procurements, transferring and usage of consumables, med. devices, etc.
- ...

Financial data

- Expenses (human resources, current expenses, etc.)
- Income from SSI (SGK)
- Income from cash payments
- ...

Data exchange

- EHR exchange
- Claim processing
- ...

«If you torture the data long enough, it will confess»
Ronald H. Coase (Essays on Economics and Economists)

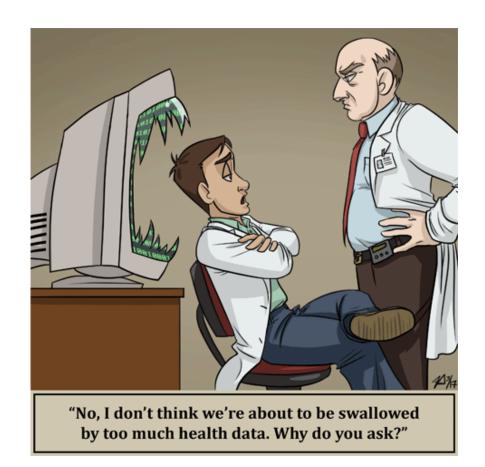
















Calculations on processes

- # of examinations, # of operations, # of emergency cases, etc.
- Time period calculations (waiting time, discharge time, operation time, etc.)
- ...



Combinations of results

- Referral rate, revenue per case, BMI, etc.
- Risk assessments (fall, decubitus ulcer, pain, coma, etc.)
- ...



Alerts, guidelines and best practices

- Order set suggestions based on symptoms, lab results, etc.
- Drug interaction alerts during drug orders
- Drug order alerts based on lab result during orders (Potassium ≥ 5.5, then don't prescribe potassium, INR ≥ 3.5 then don't prescribe varfarin)
- Radiology and lab order alerts based on patient profile and previous lab results
- Alerts based on vital signs
- Nursing care plan suggestions based on risk assessments
- ...



«What a culture we live in, we are swimming in an ocean of information, and drowning in ignorance»

Richard Paul Evans, A Step of Faith























Quality indicators (JCI, TUSKA, HIMSS, etc.)

- Utilization rates of meaningful usage of EHR (CLMA, e-Order, eMAR, CDSS, PACS, etc.)
- Evaluation based on the indicators of clinical guidelines (success rates of treatments, etc.)
- Evaluation based on the indicators of quality parameters (length of stay, referrals, complications, etc.)
- ...

Efficiency indicators

- Process efficiency
- Resource efficiency (ambulance utilization, etc.)
- Facility efficiency (Bed occupancy rate, facility utilization rate, etc.)
- ...

Planning and management indicators

- Drug and equipment availability
- ...

«Any fool can know. The point is to understand»

Albert Einstein

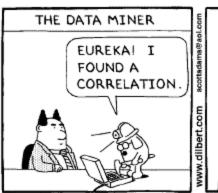
















Copyright 3 2000 United Feature Syndicate, Inc. Redistribution in whole or in part prohibited











Predictive analysis

- What will be the chronical diseases prevalence for the next five years?
- What is the required number of physicians with respect to specialties for the next 10 years?
- What will be the next year healthcare costs?
- ...

Analytical processes, «What ... if...» questions

- What will the total cost be if SSI (SGK) pays for this drug?
- What will the waiting time of patients in hospital be if we have 500 more physicians?
- What if I assign 5 more nurses in emergency department?
- What if I change the supply chain process in that way?
- What will the healthcare costs and quality indicators be if we use such homecare functions?
- ...

Descriptive analysis

- How many patient, hospital, etc. profiles that we have?
- How many types of doctors in terms of prescription habits/content?
- Which cases are similar in terms of costs and diagnosis?
- What is the services frequency and coexistence ratio?
- ...

«Where is the wisdom we have lost in knowledge? Where is the knowledge we have lost in information?» Thomas Stearns Eliot















Thanks