## Real World AI: Insider Experiences and Perspectives

Thursday October 10, 2024 -- Wrightsville Beach, NC

Christy Spivey, RN, BSN, MBA, NE-BC, FACHE, Novant Health
Heather Thornton, VP Digital Applications, Sutter Health
Jim Beinlich, MBA, Principal Consultant, Himformatics
Eddie Parrish, CIO, EmergeOrtho

Annual Conference 2024

Building the Future of Health Together



## **Panel Objectives**

1

**Provide insights** into how three different organizations are thinking about and putting AI into practice.

2

**Share examples** of how AI has been successfully implemented, highlighting key strategies, **challenges**, and tangible benefits.

3

Offer practical real-world guidance on how AI efforts formed, from strategy to use cases to selecting the right tools and building a team to enable/support.





Christy Spivey, RN, BSN, MBA, NE-BC, FACHE

Senior Director of Nursing
Community Hospitals
Coastal Market &
Hospital at Home





**Heather Thornton** 

Vice President, Digital Applications

## himformatics



Jim Beinlich, MBA

Principal Consultant,
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## **Novant Health (Christy Spivey, RN, FACHE)**

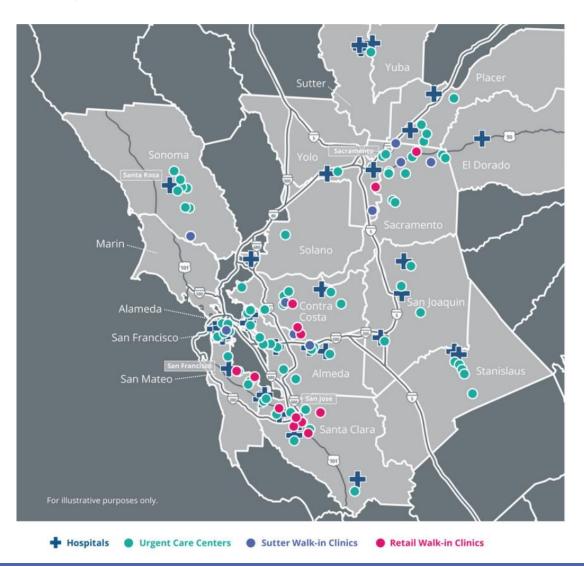
- Four-state not-for-profit integrated network of clinics, outpatient centers, and hospitals across the Southeast
- 850 locations including 19
   medical centers and hundreds of
   outpatient facilities and
   physician clinics
- More than 2,000 physicians
- 40,000 employees
- 8.3 billion USD (Operating, 2023)





## **Sutter Health (Heather Thornton, VP)**

- Sutter Health is a not-for-profit integrated health delivery system headquartered in Sacramento, CA
- Provides care to more than 3 million
   Californians
- Over 4,100 licensed general acute care beds
- 12,000+ physicians, 16,000+ nurses, and
   2,000 advanced practice clinicians
- Over 55,000 employees
- 24 acute care hospitals and more than 200 clinics





## **EmergeOrtho (Eddie Parrish, CIO)**

- Continuity of care focused linked by single EHR (AthenaOne)
- Over 1 million annual visits
- 2,211 employees
- 170 physicians including 126 orthopedic surgeons
- 62 locations in NC
- 18 IT employees
- Participant in Physician Empowered Leadership of Transformational Organizations (PELTO)



1 - How has AI changed your governance and decision-making processes for your organization -- speak to how that impacts funding.



2 - We hear a lot about trust and transparency with Al. Not just with patients, but there has also been some stir about nursing and concern about impact on jobs.

Talk a little about what you are seeing within your organization to address these areas?

3 - For general security awareness, not everyone is aware of the differences between a protected or private AI environment vs public.

Talk at a high level about the differences and what people need to be aware of?



4 - ROI has been a hot topic recently, how is your organization looking at return on investment or better yet – value add of AI and outcomes?



# 5 – Share some real-world examples of the value-add of AI in healthcare.



Slide Reference

## **VizAl Spoke and Hub Model**

Patient arrival at PSC

Perform HIHSS, NCCT, CTA

### **Value Proposition**

- ✓ **Service:** Access care where patients live
- ✓ **Quality:** LVO door to intervention time
- ✓ **Team:** Data pushed, convenient
- ✓ **Growth:** Regionalized system of care supports appropriate patients staying local; Primary stroke center patient transfer expedited to definitive care
- ✓ Finance: Number of patients retained in community hospital pays for software

Historical Workflow **Current Workflow** 171 105 Feb 2017 - Nov 2018 Nov 2018 - May 2019 min min ED physician calls Call CSC CSC physician sees physician about **CSC** physician CTA results, confirms possible LVO confirming LVO LVO on app, calls House Sup to Call to House Sup accept patient CT angiogram to transfer patient performed at PCS to CSC Rad Tech House Sup calls reconstructs CSC physician to accept images Depiction of Hub and Spoke Network before Patient transferred to Radiology and after AI software Total CSC ED, registered, interprets study Time implementation using evaluated mean time of CT 66 min angiogram at primary Radiology calls ED Patient transported stroke center to door ~in physician to to Cath Lab where at comprehensive stroke inform of LVO EVT performed center

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Source: Early experience utilizing artificial intelligence shows significant reduction in transfer times and length of stay in a hub and spoke model (viz.ai). Hassan et al. 2020

# 6 - Share a little bit about barriers or potential pitfalls for achieving potential value of AI use cases.





## Thank You!



Christy Spivey, RN, Senior Director of Nursing Community Hospitals Coastal Market & Hospital at Home



**Heather Thornton**, Vice

## himformatics

Jim Beinlich, MBA, Healthcare Information Technology Principal Consultant



Artificial intelligence applies advanced analysis and logic-based techniques, including machine learning, to interpret events, support and automate decisions, and take actions. - Gartner Glossary

### **ML & Deep Learning**

Algorithms used in supervised and unsupervised learning that operate guided by lessons from existing information



Robot-assisted surgery

#### **NLP**

A machine learning technology that gives computers the ability to interpret, manipulate, and comprehend unstructured text



Voice recognition

### **Predictive Analytics**

The use of historical and current data to predict future events



Sepsis onset detection

#### Gen AI & LLM

A specialized type of
Al that has been
trained on vast
amounts of data to
understand existing
content and generate
new content (images,
text) based on
prompts provided to a
Gen Al application



Clinical summary generation

## **Getting started with AI**



**INVENTORY** what you already have

- Applications
- Platforms
- Medical devices



Implement GOVERNANCE

- Leverage existing data or analytics governance
- Develop policies and standard operating model



Start with the right **USE CASES** 

- Leverage existing systems
- High-value, actionable
- Must be able to operationalize workflows



Begin building **SKILLS** and **LITERACY** 

- Assess where you are
- Leverage existing employee and training platforms
- Develop a plan

### **Value Proposition**

- ✓ Service Access care where patients live
- ✓ Quality LVO door to intervention time
- ✓ Team data pushed, convenient
- ✓ Growth regionalized system of care supports appropriate patients staying local; Primary stroke center patient transfer expedited to definitive care
- ✓ Finance number of patients retained in community hospital pays for software

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Hassan et al. 3

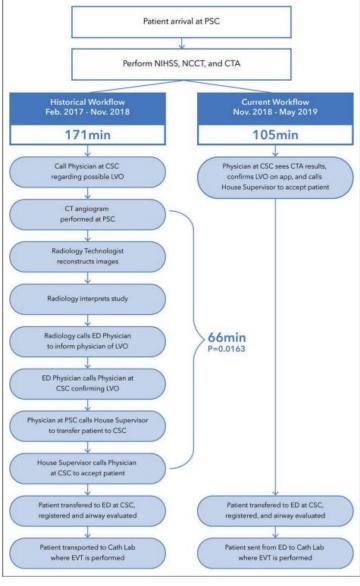


Figure 1. Depiction of the Hub and Spoke Network Before and After the Implementation of Al Software using mean time of CT Angiogram at primary stroke center to door-in at comprehensive stroke center.