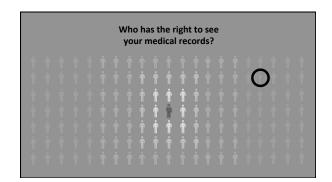
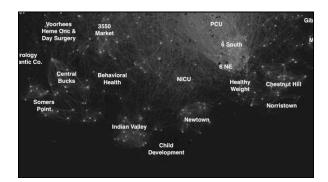
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AND PATIENT CARE	
Binal R, Desay, MO, MB + Chief Medical Informatics Officer The Children's Hospital of Philadelphia + January 7th, 2016	
Birden	
Disclosure	
□ I have commercial interests with the following:	
Compensated lecturer, American Medical Informatics Association	
■ Co-founder, Haystack Informatics, Inc.	
□ I do not intend to discuss an unapproved/investigative use of a commercial	
product/device in my presentation.	
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Alacat Information @CHOD	
About Informatics@CHOP	
□ 2015 Computerworld "Best 100 Places to Work"	
2015 Healthcare's "Most Wired Hospitals"	
HIMSS EMRAM Stage 6 Clinical Informatics Program	
24 embedded provider informaticists	
16+ Board-Certified Clinical Informaticists Department of Diagonalism 2, Usefult Information	
Department of Biomedical & Health Informatics	
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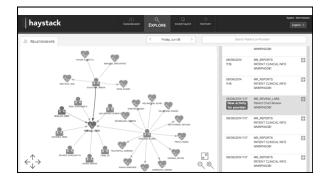


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Haystack Informatics Graduate of CHOP & Dreamit 2014 "Open Carwas" program CHOP innovators partnered with entrepreneurs Four month accelerator program Patient privacy monitoring software Social network analysis and machine learning to identify EHR "snooping" events

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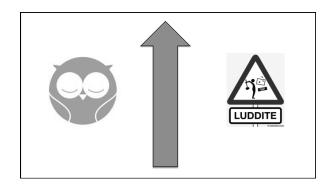


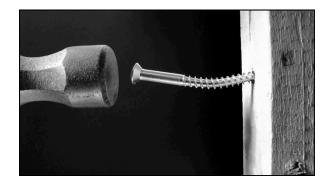






"Chant no more your old rhymes about bold Robin Hood, His feats I but little admire, I will sing the Achievements of General Ludd Now the Hero of Nottinghamshire"





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Innovation must address a problem

There's a difference between ideas, inventions, and innovation.

- "Idea" is a novel thought or insight, but without form.
- "Invention" is the creation of something new, but without application.
- "Innovation" is a product or process applied to solve a problem.





Innovation in medicine is the same, but different

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Why can't we innovate in medicine?

- □ We can, it's called **Research**
 - Human subjects, requires IRB
 - Contribute to generalizable knowledge
 - May result in licensable IP
 - Systematic testing of a hypothesis
 - Typically an external funding source, such as a grant from public or private agency with no fiduciary expectation



Why can't we innovate in medicine?

- - Desire to improve a process, protocol, or program
 - Uses a standard QI methodology, such as
 - Plan-Do-Check-Act

 Aimed at producing change in a process
 - Typically internal operational funding source



Why can't we innovate in medicine?

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- □ We can, it's called Entrepreneurship
 - Shared goals of improving health but also demonstrating return on investment
 - For your investors, the latter is most important
 - Subject to same restrictions as rest of healthcare
 - Some very important differences, latitudes, affordances





Risks of innovation in medicine		
	Mission If you're a not-for profit hospital, is this really aligned with your mission? Financial Who is paying for this and what (if anything) do they expect in return? Clinical Be sure the risk to patients is minimal, or else this is "research" There's a reason why the FDA must approve medical devices Professional Credibility Conflict of interest	

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What else is different? Healthcare is heavily regulated IRB / Human Subjects FDA HIPAA HIPAA Institutional COI policies Institutional consulting policies Institutional consulting policies

Haystack experience

□ Client 1: Behind the Firewall

- Haystack employees had to undergo CHOP background checks, as do all "contractors"
- Assigned a named user account
- Created a sesure ETR port



Client 2: Outside the Firewall

- Amazon AWS HIPAA-compliant private cloud server
- Amazon <u>will</u> execute a BAA with clients (available whitepaper)



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Google's nine pillars of innovation



- Innovation should come from everywhere
- □ Focus on the user
- ☐ Aim to be 10-times better
- □ Bet on unique insights
- Launch and iterate
- □ Give your employees 20% time to create
- □ Default to open (platform, not solution)
- □ Fail well
- □ Have a mission that matters

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Innovation in healthcare is necessarily different

- · Must balance innovation with risk to patients.
- · Medical devices requires a different level of testing rigor.
- People tolerate buggy software, but not in healthcare. So "launch and iterate" doesn't translate the same way.
- "Failing well" means different things to Google and to a hospital.
- I don't know about you, but nobody is giving me 20% time to tinker!

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derisk

verb [I or T] (ALSO de-risk) / di: risk/

to make something safer by reducing the possibility that something bad will happen and that money will be lost.

Challenge Implicit/Explicit Assumptions Positioning / differentiation Demand Market size Feature set Competition Pricing / business model Sales / adoption cycle



Goals of Derisking

- □ Convert assumptions into knowledge

 - As quickly as possible
- Decrease assumptions to increase value
- □ Consume intellectual capital <u>before</u> outside
- $\hfill\Box$ Know when to proceed and when to pivot



Validate assumptions, iterate frequently



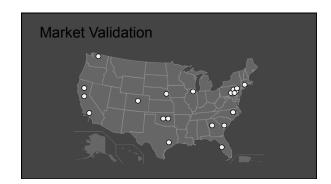
- □ Customers

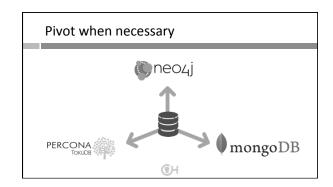
 - Who are they?
 What do they think?
 What do they like/dislike?
- Who will fund this and why?
- □ Talent
- Who do you need to bring this to market?
- □ Time

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Credit: Patrick Fitzgerald, CHOP OIE & The Lean Startup Book by Eric Ries

Examples of Derisking Target market: you see rare diseases a lot, but does your target market? Dollars: is the group that would benefit the group that would pay for it? Sales cycle: hospital enterprise software sales cycle is 1-2 years! What does it solve: do others agree this is a big enough problem to warrant a special solution? What special solution? Credit: Steve Barsh, Dreamit Ventures





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Derisk early: challenge every assumption

- Nine out of ten startups fail (worse than restaurant industry!)
- Be aware of your own confirmation bias: of course you think it's a great idea, it was your idea!
- Choosing to change $\underline{\text{early}}$ is easier than being forced to change $\underline{\text{late.}}$





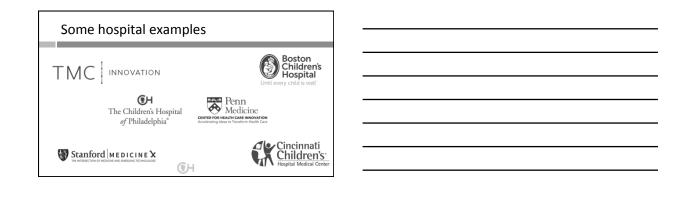
Build a strong team and seek out expertise

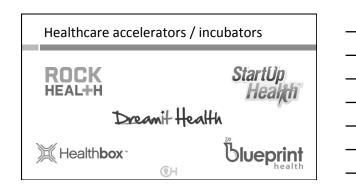


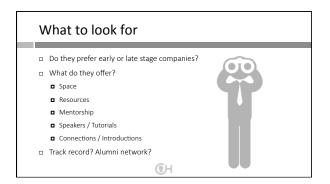
Raise your hand if you can answer yes...

- □ Your hospital has a device fabrication / prototyping facility?
- □ Your hospital has a mobile apps development shop?
- □ Your hospital understands modern web technology?
- □ Your hospital has a formal structure to support innovation?
- Your hospital can introduce you to innovators, investors, and entrepreneurs?
- $\hfill\Box$ You have personal experience with starting a company?









Experience with Haystack

- □ DreamIt identified a startup veteran, Adrian Talapan, as CEO
- We were the marketing, branding, product development, technical, sales, and HR team all rolled into one. Startups are impressively nimble.
- □ We hired our first 2 developers via Craigslist!
- □ Web stack is entirely open source
- □ Took a "mini-sabbatical" for 40% effort x 4 months
- □ Built the minimum viable product "MVP"



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Build a strong team and seek out expertise

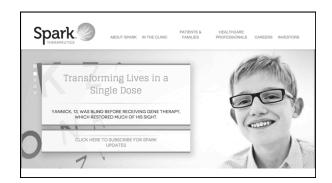
- ${\boldsymbol{\cdot}}$ $\,$ Defer to expertise where you can find it.
- Accelerators/Incubators offer a specific value see if it's right for you.
- $\boldsymbol{\cdot}$ $\;$ When given an opportunity to network, pay it forward.





Innovation comes in all shapes and sizes

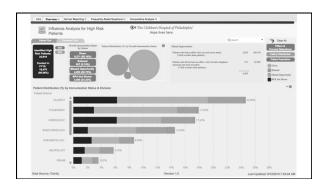


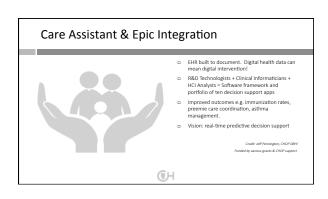


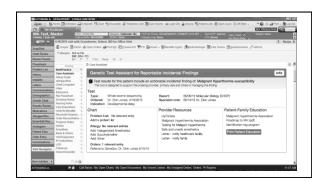
CHOP Electronic Antibiogram Dresearch suggests stratified antibiograms are most appropriate when choosing empiric therapy Epic/Meditech lab data allows us to automatically generate these and apply IDSA filtering rules Traditional antibiograms are time-intensive to generate manually Dr. Jeff Gerber and Bea Larru worked with Enterprise Analytics steam Clinical go-live this month! Built on Qliliview analysis platform

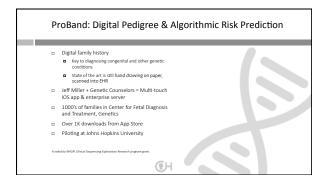


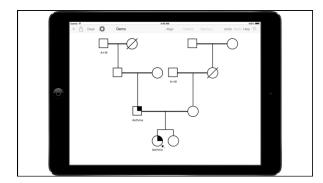
High-Risk Influenza Dashboard AAP recommends influenza vaccination for all children, especially those with certain chronic illnesses Department of Pediatrics undertook a project to improve vaccination for high-risk specially-care patients. Epic alerting & workflow was supplemented with an analytics tool to understand end-user behavior Also allowed us to provide QI-style metrics Between FV13 and FV15, saw another 50% improvement

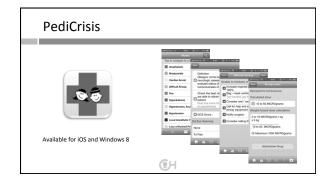










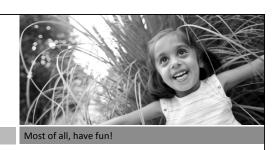




(5) Innovation comes in all shapes and sizes

- From "Big I" innovation all the way to "little i" process innovation.
- There is value in developing a culture and process for innovation.
- · Identify the correct patron up front and make sure incentives are aligned: what's in it for A to pay you to build B?
- Learn to "pitch" your ideas big or small for traction.





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Most of all, have fun!

- Some of the most creative and exciting work I've done in years.
- Startups are very different from hospitals, and the differences are enlightening.
- Valuable and portable skillset.
- $\cdot \quad \text{Incredibly rewarding experience, enduring relationships.} \\$





















Office of Innovation & Entrepreneurship

- □ Educate, Elevate, & Expand
- □ SPRINT Program
- Provide entrepreneurial support at any stage of development
- Penn Hackathon, Philly Codefest

Patrick FitzGerald VP of Innovation & Entrepreneurship fitzgeraldp@email.chop.edu





Thank You!

@email.chop.edu

