

The logo for HIMSS Colombia, featuring the word "HIMSS" in a bold, blue, sans-serif font with a small blue dot above the 'i', followed by "Colombia" in a grey, italicized, serif font.

**HIMSS** *Colombia*

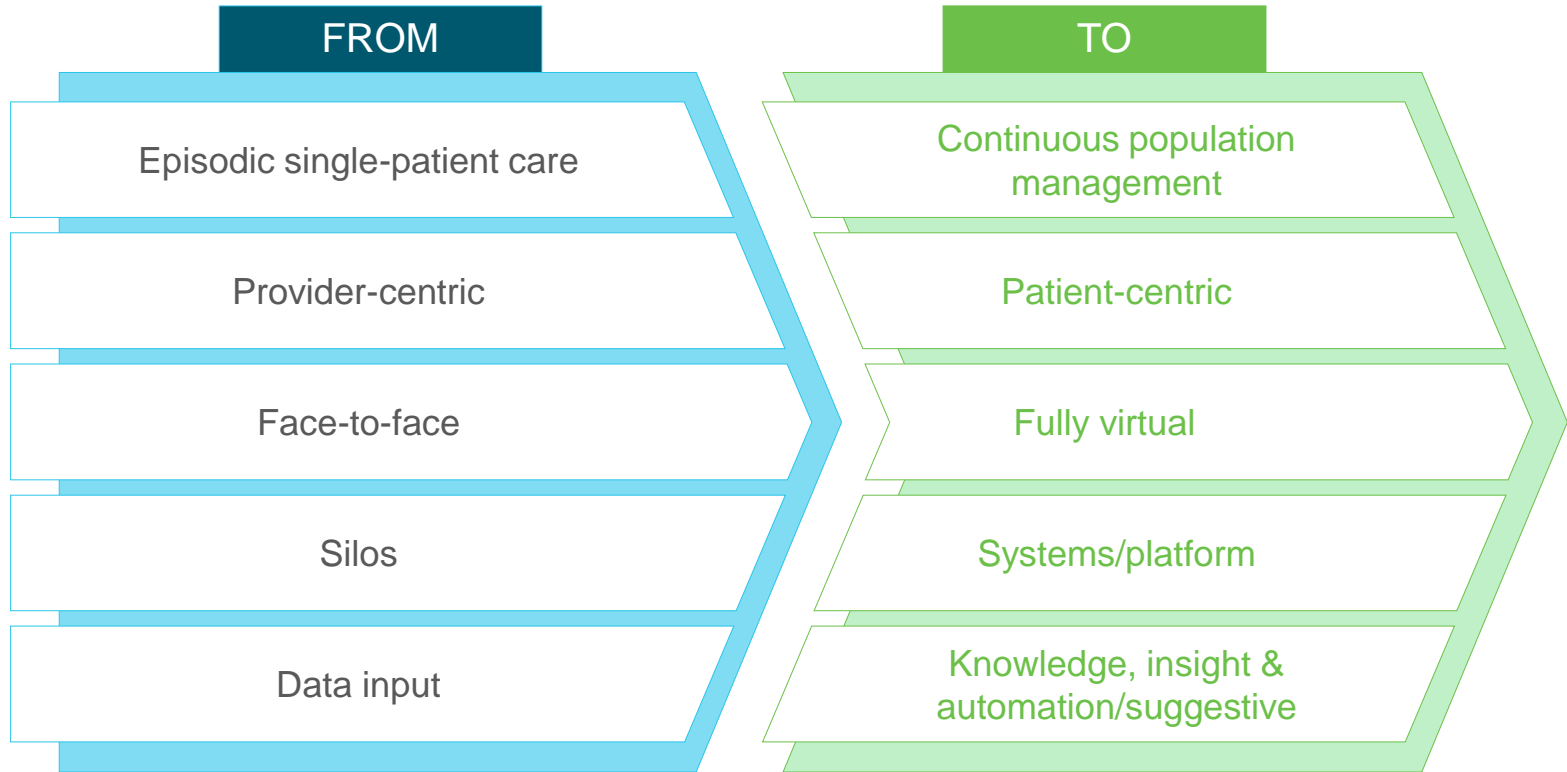
**Bogotá, 27–28 November 2017**

## Tendencias en Informática de Salud

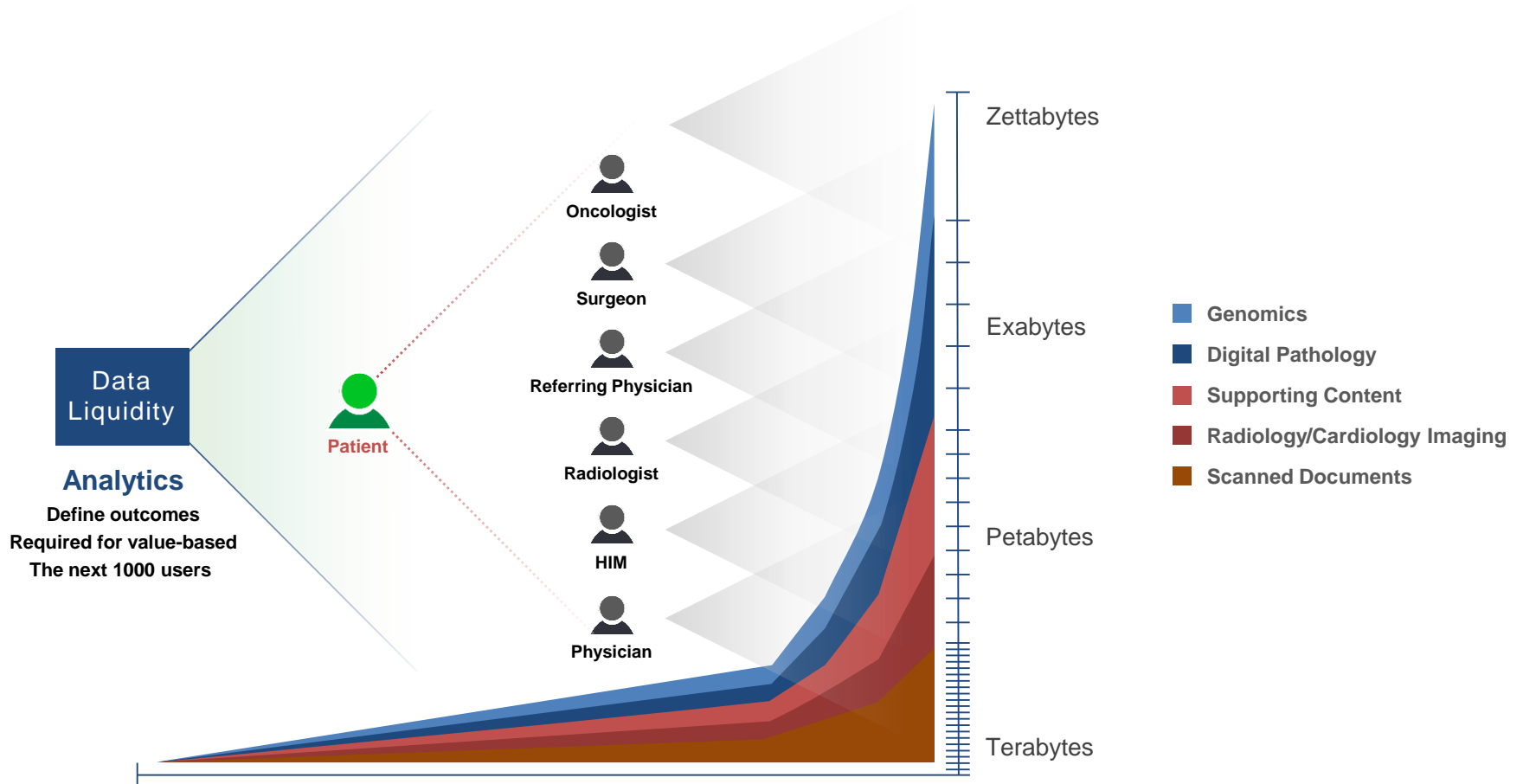
Laura Arboleda

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# Health IT worldwide is in the midst of a major shift



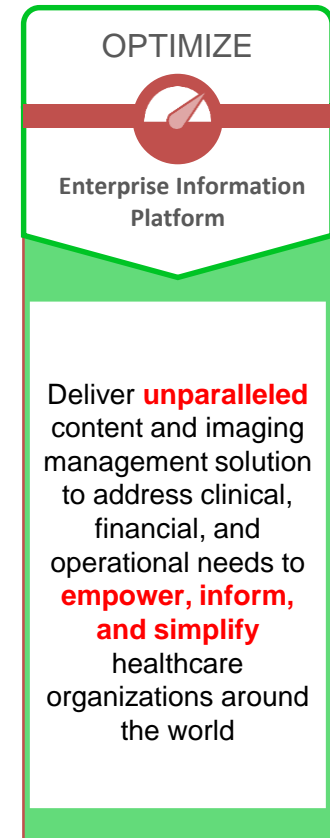
# There remains an unprecedented demand for health information



## Healthcare Enterprise Information Platform Explained...

**EIP is a system that makes all clinical content accessible through your EHR**

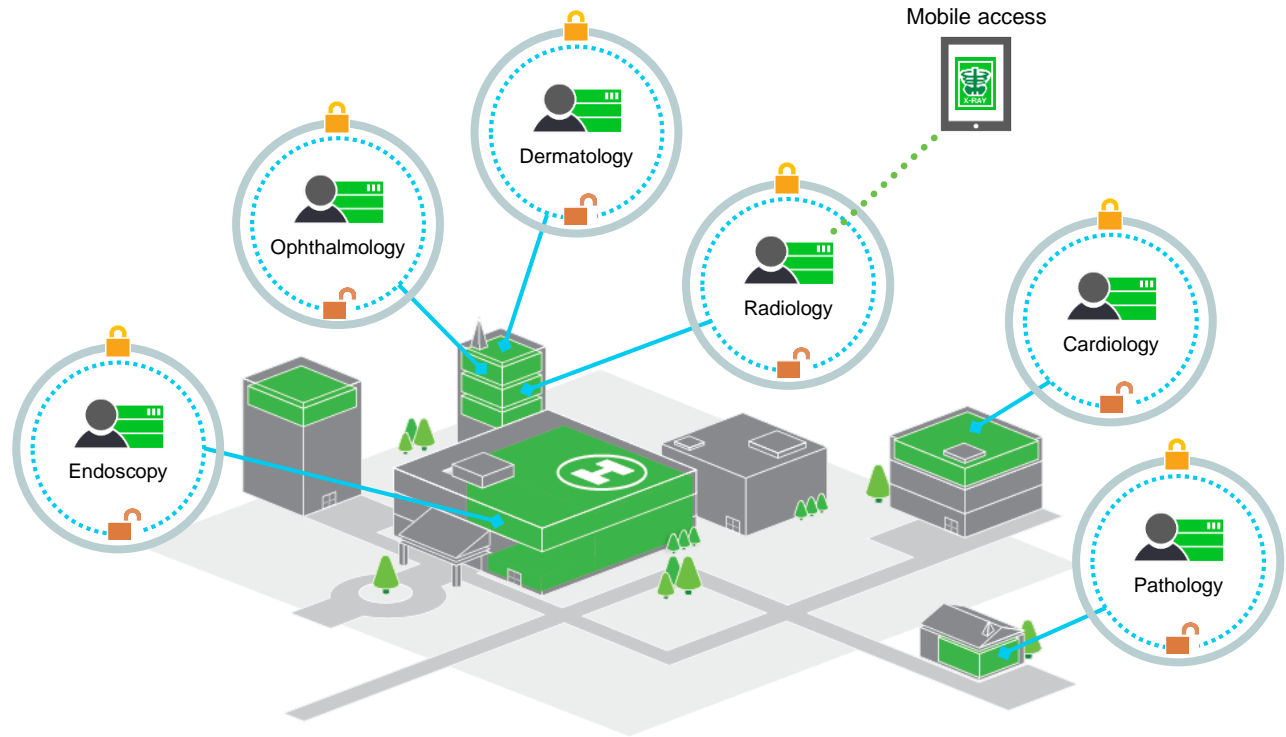
- Optimizing Electronic Health Records is the key enabler for customers needing to meet new health care objectives.
- Currently 70 to 75% of electronic records exist in disparate systems outside of the EHR.
- New methods (like XDS) must be deployed to drive additional content value.
- Integrating documents with imaging is a key to driving optimized value.
- New reimbursement models will drive additional healthcare content adoption.
- VNA is a key database platform for the future.



# Departmental ...ologies are plagued with silos of Information

Silos of vendor *locked* and *blocked* information with PHI exposure in every department

- ▶ Limited access for clinicians
- ▶ Departmental silos
- ▶ Access controlled by applications
- ▶ Migrations every 5, 8 and 15 years
- ▶ Multiple DR plans
- ▶ PHI exposure
- ▶ Vendor lock
- ▶ Vendor block

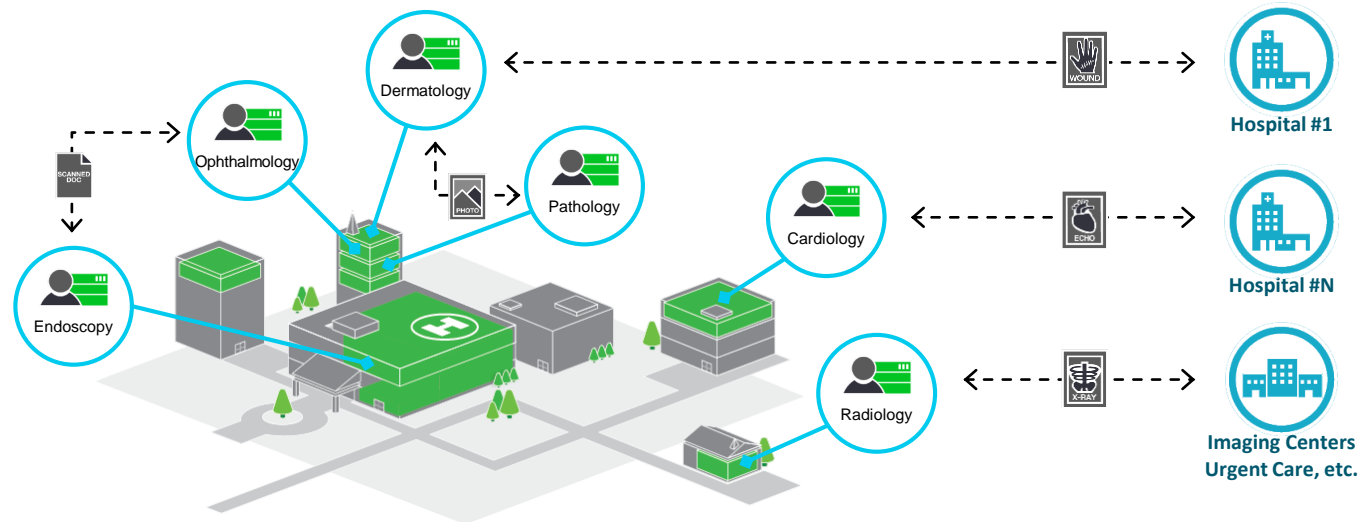


# Interoperability is forefront in departmental ...ologies needs

Sharing information and promoting collaboration internally and externally

## Roadblocks to Interoperability

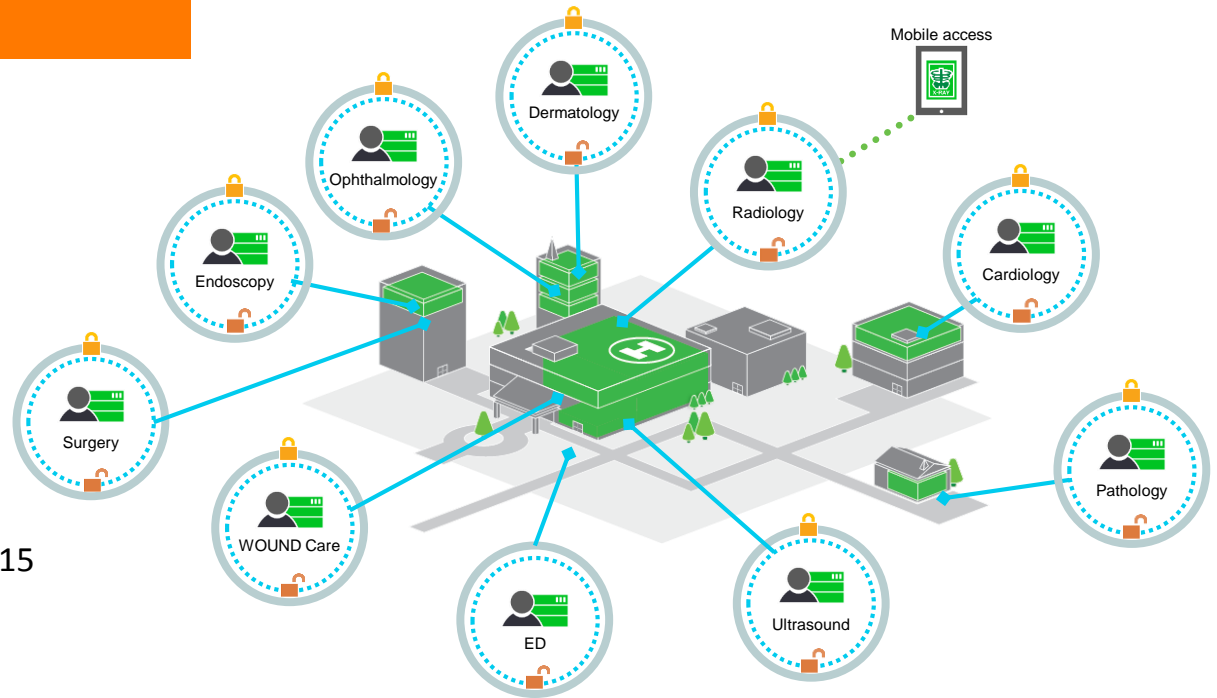
- ▶ Custom interfaces can be cost prohibitive
- ▶ Each sharing instance may require individual, proprietary visualization tools based upon specialty which can make image exchange difficult.
- ▶ Need to control security and privacy risks
- ▶ Requires standards-based technology
- ▶ Beware of custom software creating a snowflake.



# Typical healthcare delivery organization's situation

## BEFORE an EMI Strategy

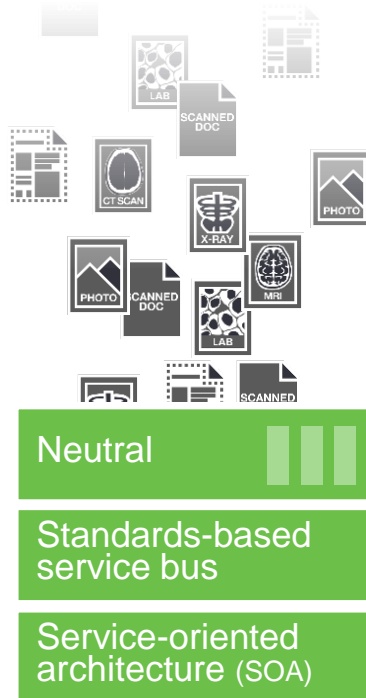
- Limited access for clinicians
- Multiple viewing requirements
- Departmental silos
- Access controlled by applications
- Unchecked costs by proprietary applications
- Vendor *lock* and *block*
- Multiple migrations every 5, 8, and 15 years



**Result: a failed solution driving cost, complexity, and limited access**

# Industry perspective: What is a VNA?

Consolidates imaging information throughout the enterprise



## Basic benefits of a VNA

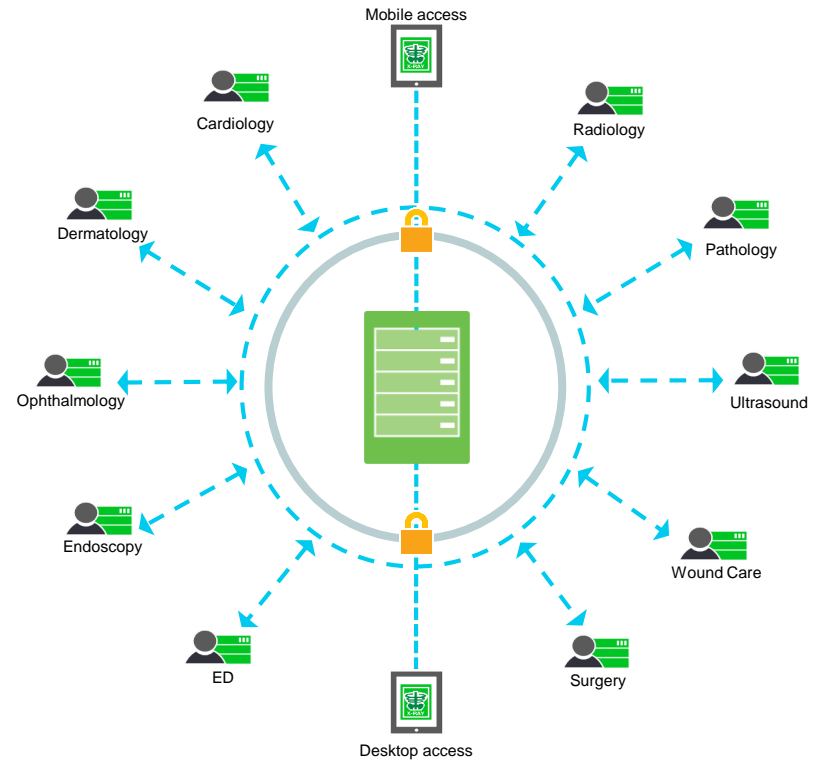
- ▶ **Platform:** Much more than an archive, a platform “enables”
- ▶ **Open architecture:** Based on standards or standards-based interfaces
- ▶ **Accepts data irrespective of source:** Source and format should blur and become unimportant
- ▶ **Sharing:** Data becomes liquid
- ▶ **Originating source(s) are changeable:** Customer has choice and control to change data sources and consumers



# Enterprise imaging management strategy from Hyland

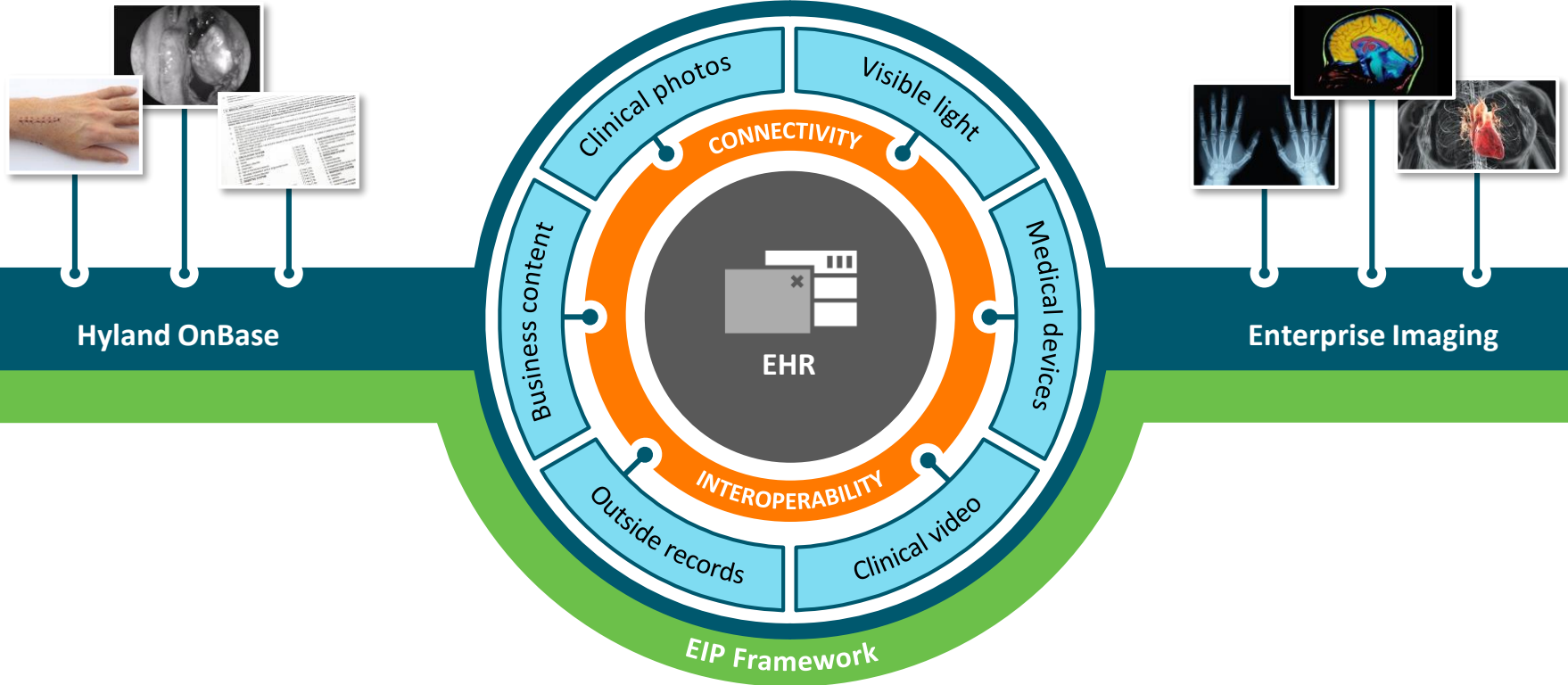
## AFTER EMI from Hyland Healthcare

- ▶ Single point of access for clinicians
- ▶ EHR integration for access control
- ▶ Consolidated storage focus
- ▶ Single DR plan, supporting a BC plan for multiple applications
- ▶ Simplified migrations with cost removal
  - Disk to disk
  - App to app
  - Data refresh
- ▶ Significant security improvement that manages PHI exposure
- ▶ Provides a path to deconstruct PACS and reduce costs



**Result: A complete patient-centered integrated EMI solution across the enterprise**

# The solution: Empower, Inform, and Simplify Content and Imaging Management



# First Principles

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- Leverage Portfolio of Best-of-Breed Components
- Deliver an Integrated ECM-EMI Solution
- Vendor Neutrality, Interoperability & Data Liquidity
- Availability, Performance & Scalability