



Experience and stories from our telemedicine journey at Landspítali Reykjavík Iceland

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Introduction and agenda today for the next 20 minutes

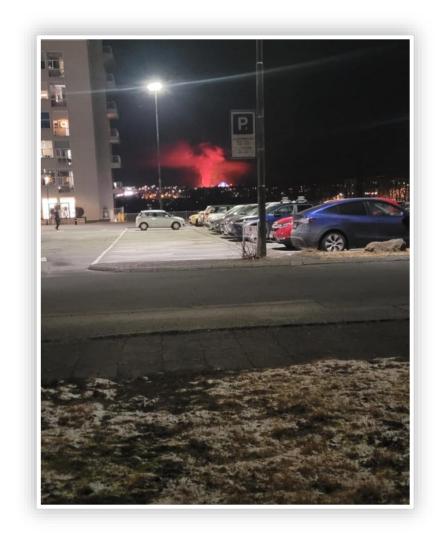
- Facts about the Icelandic health system and Landspitali
- Experience and stories from our telemedicine journey at Landspitali Reykjavík Iceland
- The journey so far overview
 - COPD and Fibrosa
- The way forward multible opportunites and challenges in our journey





Experience and stories from our telemedicine journey at Landspitali Reykjavík Iceland

Facts about the Icelandic health system and Landspitali





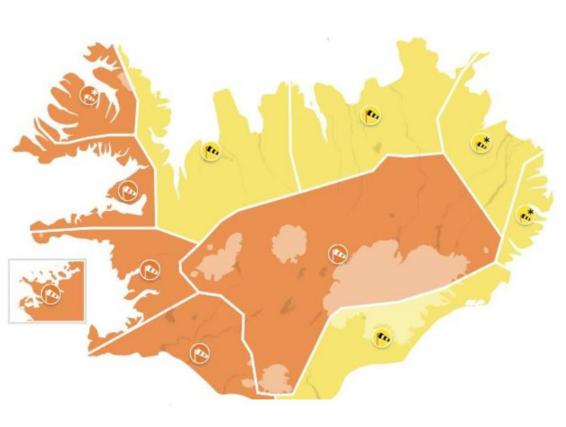
The Icelandic National Health Service

- Health care centers throughout the country deliver primary care
- Landspitali University Hospital provides general services for the Reykjavik area
- Akureyri Hospital, a teaching hospital in the Northern part of the country, delivers specialized care for the region
- Six small district general hospitals
- Private medical practice
- Generally good access to health services
- Universal health insurance



The Icelandic population numbered 384,000 in January, 2024 242,000 (63%) reside in the Capital Region







Clinical services in 2023

94,200 emergency visits

348,958 outpatient visits

27,400 admissions

624 hospital beds

4.8 days average length of stay

14,600 surgical procedures

3,166 births

7100 Employess 4900 FTE



The future development of Landspitali's services

Government of Iceland



- 1. The future development of Landspítali's services, p. 124
- The future development of Landspítali's services, p. 10; shifting to better suited institutions
- 3. The future development of Landspítali's services, p. 141

To manage increasing demands by 2040, Landspitali needs to...



Improve work environment and coworker satisfaction to ensure talent retention



Reach 1% productivity increase per year¹, by improving operational and procurement-related practices



Reduce the expected increase in need for beds by ~50%, and reduce outpatient visits by ~65%², by increasing ambulatory and community care and supporting other parts of Icelandic healthcare



Reach at least 0.2-0.6%³ productivity increase from digitalization and automation per year, with goal of becoming the global front-runner within digitalized healthcare



Achieve a successful commissioning of the 'New Landspitali'



Our strategy

- Revise the organizational structure, the management team, design of clinical services and delivery of care
- Reduce the perceived gap between central and frontline management
- Enhance clinical service lines
 - Emergency services and acute care
 - Scheduled services (surgical procedures etc.)
 - Ambulatory and community services
- Overcome critical staffing shortages
- Enhance digitization and use of data in daily operations
- Promote research and innovation
- Create an attractive work environment

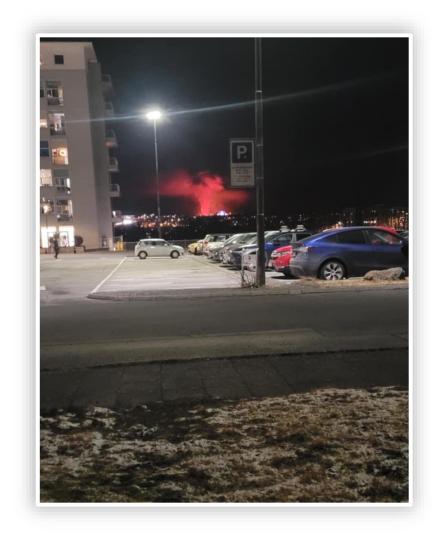
Our new hospital which will open 2030





Experience and stories from our telemedicine journey at Landspitali Reykjavík Iceland

The journey so far...





The journey of thousands of miles begins with just few steps.

We are just beginning our journey with several pilot projects and research project

....they will help managers to take decisions on best practises in e-health







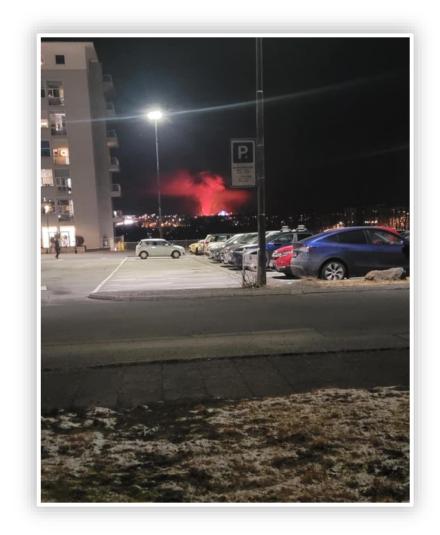
Digital healtcare at Landspítali

				B. Carlo at Earla option	
Medical specialities	Partner	Type of project	Number of patients involved	Aim - Purpose	Status
Pulmonary COPD and Fibrosa	Dignio	Pilot project	30 patients	20 patients with COPD and 10 patients with fibrosa are treated from home via remote monitoring. We are testing the benefits both from the patients side and the hospital in terms og timesaving, security and other factors,	Sept 2024 - sept 2025
Cardiology	Sidekick	Science reasearch/ feasibility study	250 patients	Improving outpatient care for heart failure through digital innovation. It is a digital solution aimed to improve health with remote monitoring of heart symptoms (sensors). It is also a solution that supports lifestyle changes and self care support. With motivational messages to patients.	Ends desember 2024
Diabietes	Cloudcare	Pilot and research	900 patients	Enabling RM and management of all insulin sependent diabetes patients. CGM: > 90 %. Around 950 patients are follow up at Landspítali Diabetic clinic with RM (Type one diabetes). Insulinpumps: 624 (50%) , where 588 is using semi-automated pump	June 2024
Sleeping disorders	Resmed.com / Airview	Reaserach and Pilot project	12000 patients	RM from home. Help people sleep better, breathe better and live longer	Ongoing
Cancer - Hospital at home	Landspítali / Hospital at home	Pilot project	10 cancer patients	The project involves implementing new equipment that uses artificial intelligence in clinical decision-making. It also requires programming a connection between remote monitoring and the patient's medical record. The solution increases continuity of care, as monitoring can be started in the hospital, people can be discharged earlier and continued at home. Remote monitoring increases patient safety, improves treatment, shortens response times and thus prevents deterioration.	Tests start in februar 2025
Cancer	Meðvera	Operational project	?	A portal for patients undergoing treatment for cancer in Landspitali. The portal was designed and embedded within the electronic medical record and public health portal of Iceland and consists of symptom and needs monitoring, educational material, and messaging. The portal provides functional combinations of symptom tracking and remote monitoring and tailored information for symptom and self-management and clinical follow-up and a messaging function to communicate with the health care team (HCT).	2023
Employees - Wellnes center	Kara Connect	Operational project	?	A Wellbeing Hub, were our employees are free to choose from 3000+ expert practitioners to support their mental health and Wellbeing. When your employees feel better, your hospital is doing better. Wellbeing at work begins with meeting your team's needs on their terms.	2023
Mental health - eating disorder	Recovery Record	Pilot project	20 patients	Replacing food diary (on paper) with an electronic food diary with the help of recovery record. RM of patients with food disorder	sep.23
We expect the	list to expand				



Experience and stories from our telemedicine journey at Landspitali Reykjavík Iceland

Remote monitoring (RM) of Pulmonary COPD and Fibrosa patients





About the pilot project

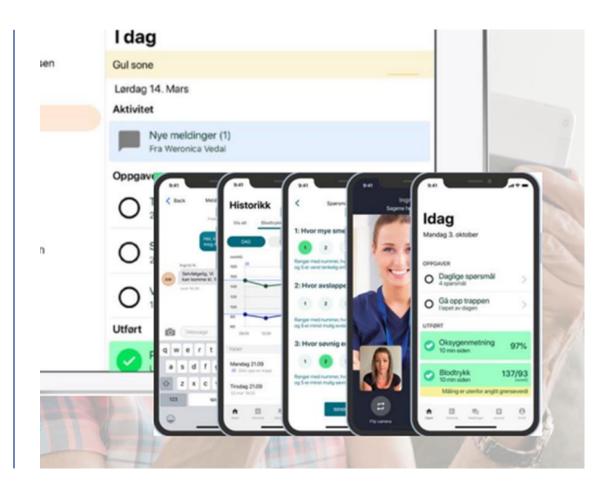
- Partner; Dignio in Norway
- 30 patients choosen with criterias technical readiness
 - 20 COPD (260)
 - 10 Fibrosa (100)
- 12 month pilot from september 2024
- Teaching period
 - MyDignio App
 - Prevent
- Training materal
 - Staff and patients
- Follow up and evaluation





Simple for the patient and healthcare professional

- An app is installed on the patient's phone
- Measurements:
 - Pulse
 - Saturation
 - Blood pressure
 - Breath monitoring for some
 - Daily questionairs
 - Weight
 - Fever
 - Many other possibilities





Remote monitoring and reaction

- To begin with, patients measure themselves daily
- When threshold values have been set for each one, the system flags:
 - Measurements that are out of range
 - Unfinished projects
 - Messages from patients





- Response to out-of-range measurements:
 - We send a message and ask the patient to measure himself again
 - If he doesn't answer or doesn't perform the measurement, we call
 - We can book a video call through the system if we feel that we need to assess the patient with our own eyes
 - Patients can always request a call via text message if they are concerned about something

Important Dignio features

- ✓ The possibilities to communicate through messages is valuble for the nurses and patients
- Questioners, both valideted and our own, makes a good foundation for triage (Obs; the length of the questioners)
- ✓ Potensial for better use of treatmentplans







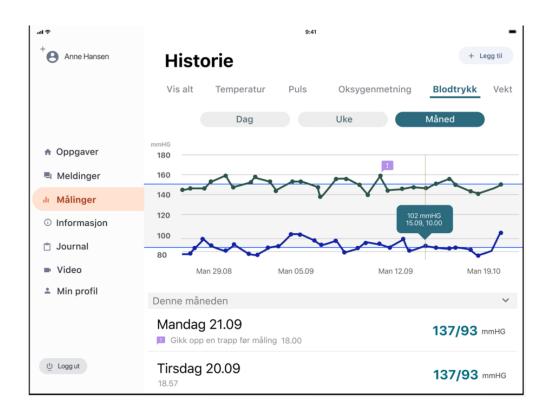


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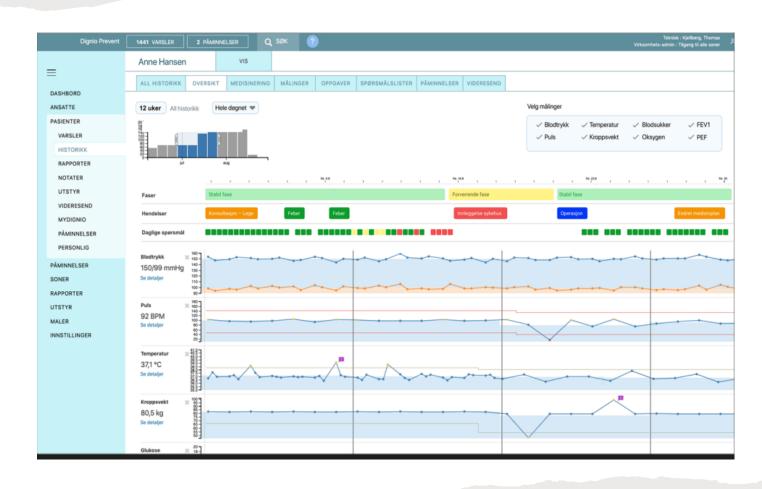
The patient measurements - his overview

The patient view in the app



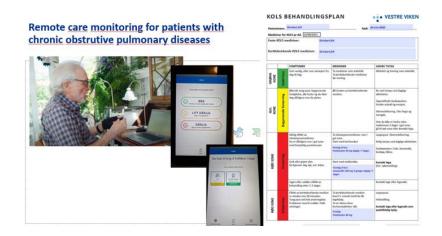
The patient 's measurements - overview for the healthcare professional

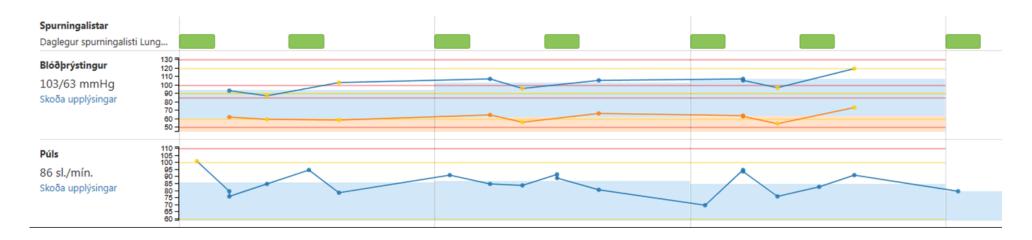
What the healthcare professional monitors





Prevent – daily questionair







150 -140 -130 -120 -110 -

Blood pressure

Notkunarleiðbeiningar fyrir blóðþrýstingsmæli

SKJÁR





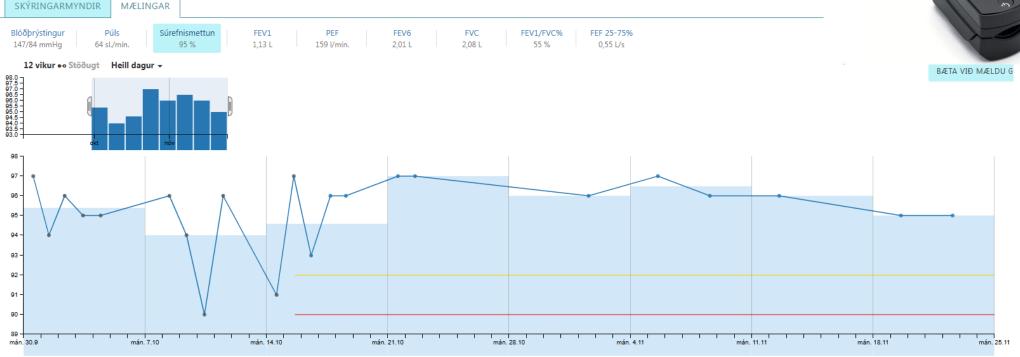
Oxygen saturation

Notkunarleiðbeiningar fyrir súrefnismettunarmæli

Tækin eru ýmist hvít eða svört.

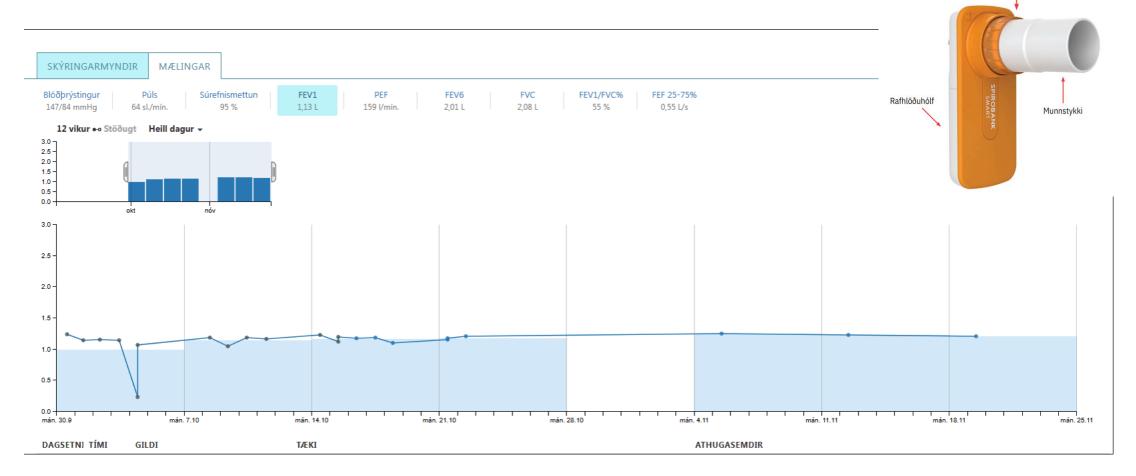








FEV - spirometer



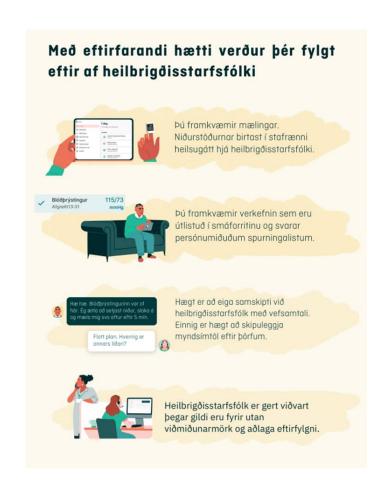
NOTKUNARLEIÐBEININGAR FYRIR Spirometer Spirobank Smart

Túrbína



The healthcare professional's Experience, learnings – first sign of success

- "We have found various ailments that we have been able to help patients with that could have caused problems and hospitalizations later"
- "Already saved a considerable number of calls to patients without compromising safety"
- In our opinion, the system is most useful to those who:
 - are newly discharged from inpatient wards
 - are unstable and have frequent exacerbations
 - have recently started oxygen therapy
 - are nervous or insecure about their treatment
 - are starting complex medication therapy





The patient - experience

- Some patients experince better and more secure follow up from the healthcare staff than before
- "My blood pressure went up and I knew exactly why....will try to take responsibility" ☺
- "for me it is important to have this direct access to my health professional – a kind of lifeline"
- I have more insight towards my healthcondition
- Figures from the Norwegian Ministry of Health show that Dignio is successful
 - Patient benefits:
 - 73% believe they have more knowledge about their own health
 - 90% believe they have better control over their own health
 - 93% believe they receive better follow-up in services than before
 - Better access to healthcare on the patient's terms





Overall aim and purpose of the pilot project

- to develop working procedures regarding remote monitoring,
- evaluate the satisfaction of patients and employees with the solution,
- Evaluate economic benefits,
- evaluate the safety and quality of the service
- evaluate the possibility of technical integration with other solutions and especially the clinical portal of Landspitali
- Increase patients' health literacy
- Increase patients' safety and sense of security
- Increase efficiency and reduce waste in the healthcare system
- Make better use of manpower in the system
- Reduce patient visits to the hospital





Happening now in the pilot project!

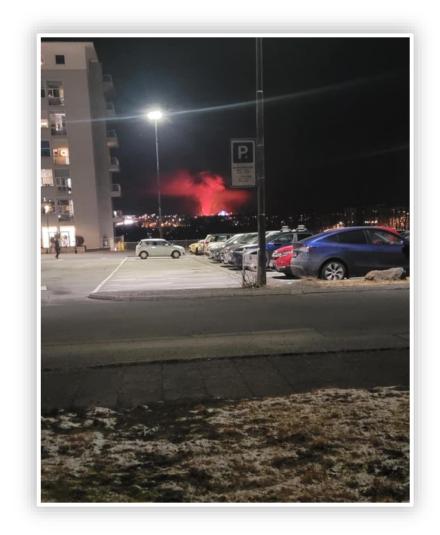
- How to use data to evaluate progress and overall benefits
- Creating service level Questionairs for follow up – "qualiatiative reasearch"
- Evaluate the patient group
 - Use the solutions and equipment with other patient groups (lungs, kidney transplant)?
 - To get the most out of the pilot project
- Knowledge and data gathering
- Learning and adapt by using experience and knowledge from other healthcare institutes
 - (Vestre Viken AAhus in Norway, and others)





Experience and stories from our telemedicine journey at Landspitali Reykjavík Iceland

The way forward –
Multible opportunities, challenges and learnings awaits us

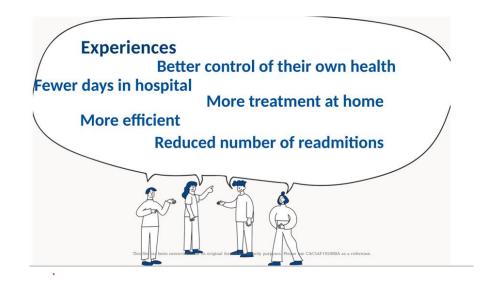




Expected benefits

- Improved access to specialized medical care, not least in remote areas
- to be able to respond earlier to the deterioration of patients through early intervention,
- thus preventing further deterioration and a possible visit to the Emergency Department or admission to the hospital.
- There are also hopes for a reduction in the number of home visits, and "unnecessary" visits to the outpatient department.
- Secondly, the goals for patients are to increase their health literacy, for patients
- to take more responsibility for their own health,
- to increase their safety and to improve their quality of life.







Common goals of all our ongoing telemedicine projects, and future projects

		Digital hea	altcare with Lar	ndspítali	
			Number of patients		
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				solution aimed to improve health with remote monitoring of heart symptoms	
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Cardiology	Sidekick	feasibility study	250	With motivational messages to patients.	2024
				Follow up at Landspítali Diabetic clinic with RM of around 950 patients. (Type one	
				diabetes). Enables RM and management of all insulin sependent diabetes patients.	
				CGM: > 90 %	
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	Resmed.com/	Reaserach and Pilot			
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				continuity of care, as monitoring can be started in the hospital, people can be	februar 2025
				discharged earlier and continued at home. Remote monitoring increases patient	10010012020
	Landspítali / Hospital			safety, improves treatment, shortens response times and thus prevents	
Hospital at home - Cancer patients	at home	Pilot project	10 cancer patients	deterioration.	
Cancer	Meðvera		?	Samtal við Kristínu Skúla	?
Wellness center for employees at the	l				
nospital	Kara Connect	Operation Project	?		2023
5-et	B	Dileteration		Replacing food diary (on paper) with an electronic food diary with the help of	05
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We expect the list to expand					
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- Reduced admissions
- Fewer days in bed
- Prevent admissions
- Reduce visits to the outpatient department
- Promote patient engagement
- Reduce contact surfaces with "stable" patients
- Eliminate waste in patient care
- Provide services to patients in real need



Evaluation of benefits

- Opportunities to align and coordinate measures between our ongoing e- health projects
 - Not only in project silos and not only clinical measuresments
 - Knowledge sharing between telemedicine projects
- Create and follow up measures that sustain "business models" and aknowledge benefits
 - Inside the hospital
 - With the patient
 - Overall in the healthcare system
- Overall goalsetting in e-health from the government





Measuring benefits and progress

Chronic obstructive pulmonary disease – changes in admissions and days in hospital when included in digital home-based follow-up*

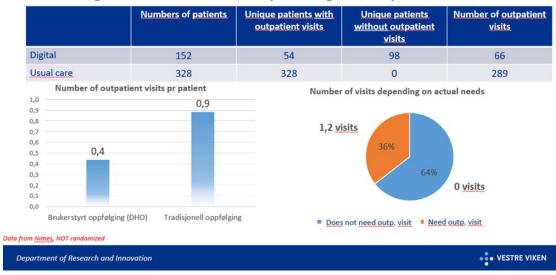
		Before inclusion*		After inclusion		
	Point of inclusion	Admissions	Number of days in hospital	Admissions	Number of days in hospital	
Pas 1	2021	3	18	0	0	
Pas 2	2021	2	14	1	4	
Pas 3	2022	4	23	5	14	
Pas 4	2021	3	10	0	0	
Pas 5	2022	1	1	0	0	
Pas 6	2023	1	4	0	0	
Pas 7	2023	1	3	0	0	
Pas 8	2021	2	6	0	0	
Pas 9	2023	4	16	0	0	
Pas 10	2023	1	2	1	2	
Sum		22	97	7	20	

*Data from <u>Nimes</u>, NOT randomized

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Effects of digital home-based follow-up - changes in outpatient visits



Effects of digital home-based follow-up - changes in responsibilities, tasks and time spent

	Visit (doctor)	Video/ phone (doctor)	Handling <u>the</u> questionnaires (nurse)	Total time	Time doctor	Time nurse
Digital	24 min.	3 min.	20 min.	47 min.	27 min.	20 min.
Usual care	53 min.	5 min.	0 min.	58 min.	58 min.	0 min.

...and we want to collect data that present similar data that we see here, in the near future

* Memoilly registered data

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** VESTRE VIKEN



Where do we want to go?

Examples of remote care monitoring in Vestre Viken hospitals

Dignosis	Type of follow up		
Epilepsy	Self registrations		
Chronic obstructive pulmonary disease (COPD)	Self registrations and measures		
Diabetes	Self registrations and measures		
Chronical Heart Failure (CHF)	Self registrations and measures		
Post follow-up after surgery (different cases)	Self registrations		
Inflammatory bowel disease	Self registrations		
Atrial fibrillation	Self registrations and measures		
Dialysis (home)	Self registrations, measures and remote monitoring		
Cancer immunotherapy, chemotherapy, surgery	Self registrations		
Osteoporosis	Self registrations		
CPAP, Pacemaker/ ICD, dialysis, AF, etc.	Remote monitoring		
And the list expands every month!			

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... VESTRE VIKEN

Development of the virtual hospital

2022

 1800 unique patients followed up at the virtual hospital

2023

 4676 unique patients followed up at the virtual hospital

2024

 10 100 unique patients followed up at the virtual hospital



Digital services in Vestre Viken virtual hospital

- 26 patient courses in clinical service
- Over 10 000 patiens are followed up digitally
- · #Digital first

National goal:

- 1% of the patients should be followed up digitally (PROM)
- 15% of the patiens should recieve digital consultations

Avdeling for forskning og innovasjon



Development areas for virtual hospital

- New <u>health</u> services, spred <u>the</u> health services
- Hospital in network
- · Home based hospital?
- · Precision medicine
- Collaboration with municipalities and industry
- Future clinic?







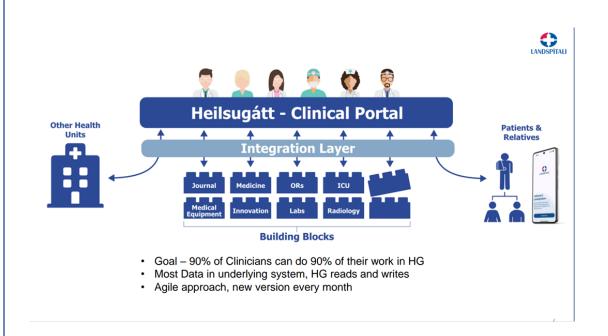
A few challenges...

Data do not flow between systems and are not integrated directly from the remote monitoring into the clinical portal

...not yet

Manual work is needed

Resource intensive and costly to integrate the RM into the clinical portal





Telemedicine Remote monitoring

E-health





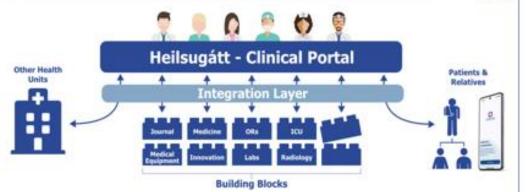








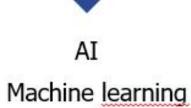




- · Goal 90% of Clinicians can do 90% of their work in HG
- · Most Data in underlying system, HG reads and writes
- · Agile approach, new version every month











Seek knowledge and help from others when implementing and going forward











