

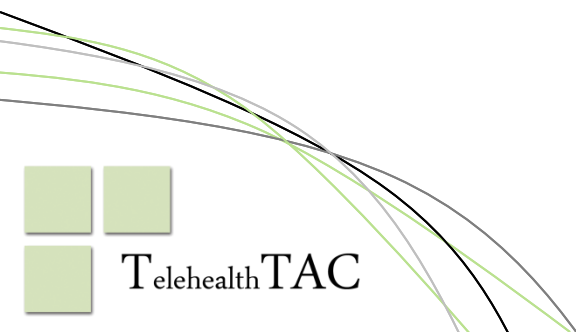
Selecting the Right Technology

Lessons learned from the TTAC



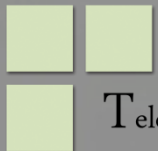
Kirt J Beck, Director

Telehealth Technology Assessment Center



Accidental Discovery

Episode: Microwave Oven



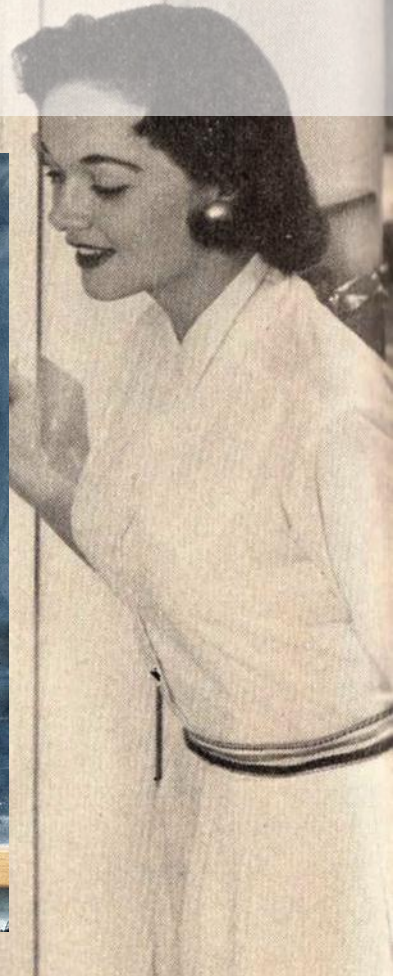
AD: Microwave



- ▶ The year: 1945
- ▶ The situation: World War II
- ▶ The person: Percy Spencer



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Telehealth TAC

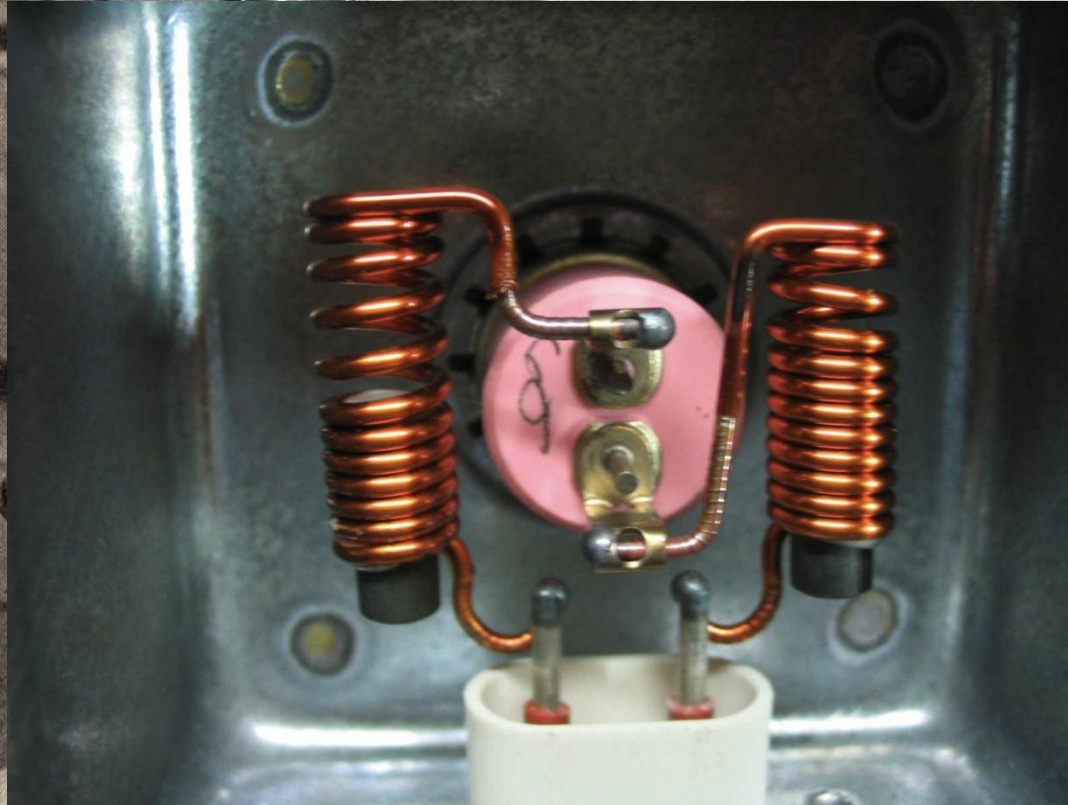
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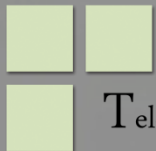
▶ The person: Percy Spencer



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AD: Microwave

- Know when to take advantage of those with the skills and capacity
- You don't need formal training to do wonderful things
- The most expensive solution isn't always the best
- Be prepared for people to use your technology in novel ways
- Testing can be messy
- OSHA?!



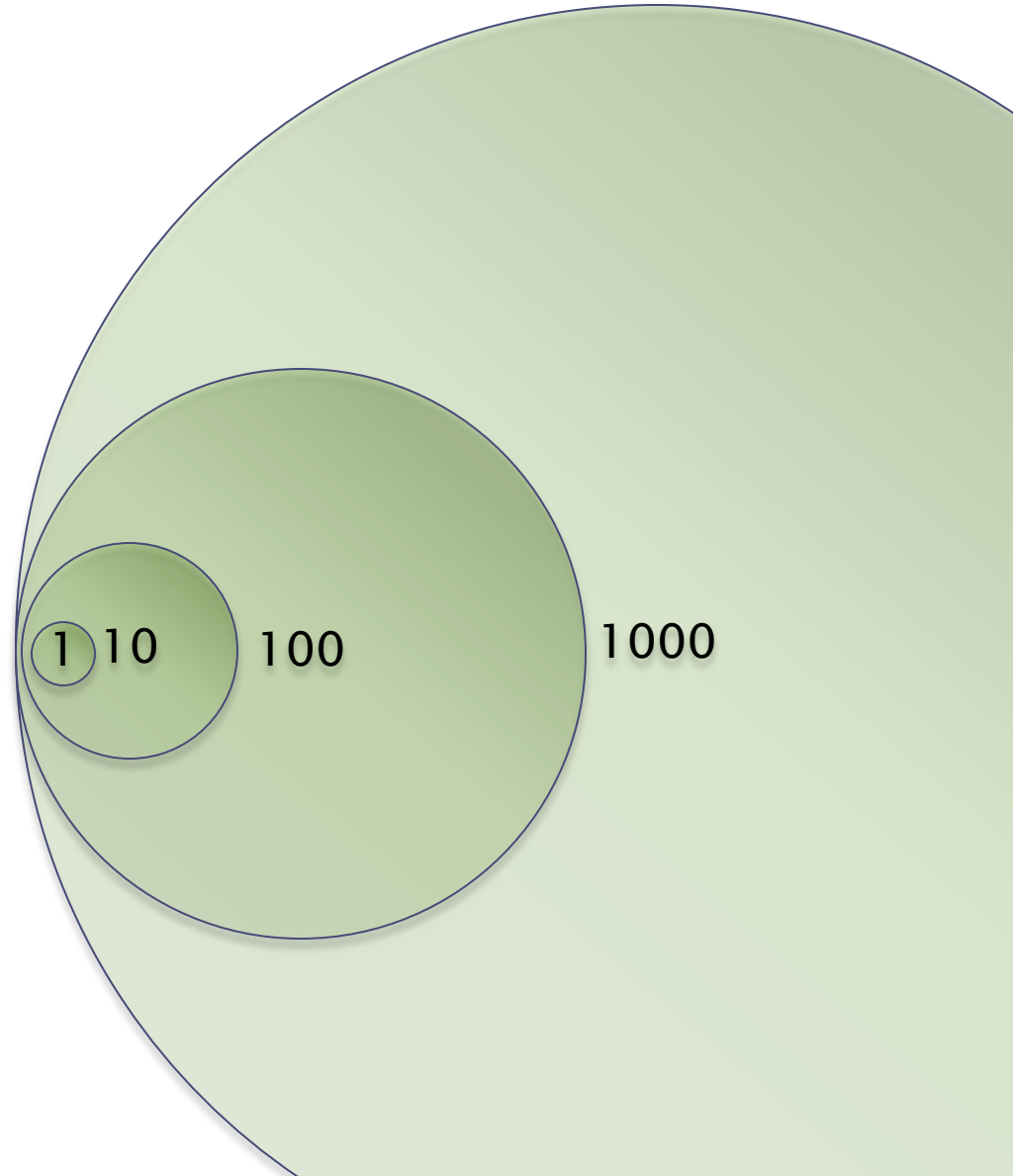
Today's Talk

- ▶ The Problem – Telehealth Technology
- ▶ The Process – Technology Assessment
- ▶ The Truth – Lessons Learned
- ▶ The Resources – Where to Look
- ▶ Wrap Up, Q&A

The Problem (1-10-100-1000)

The cost of finding a defect:

- During planning
- During development
- During testing
- After deployment



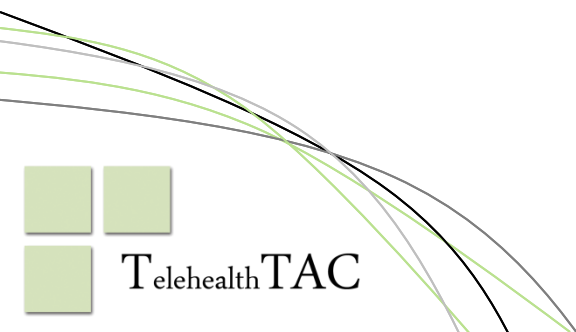
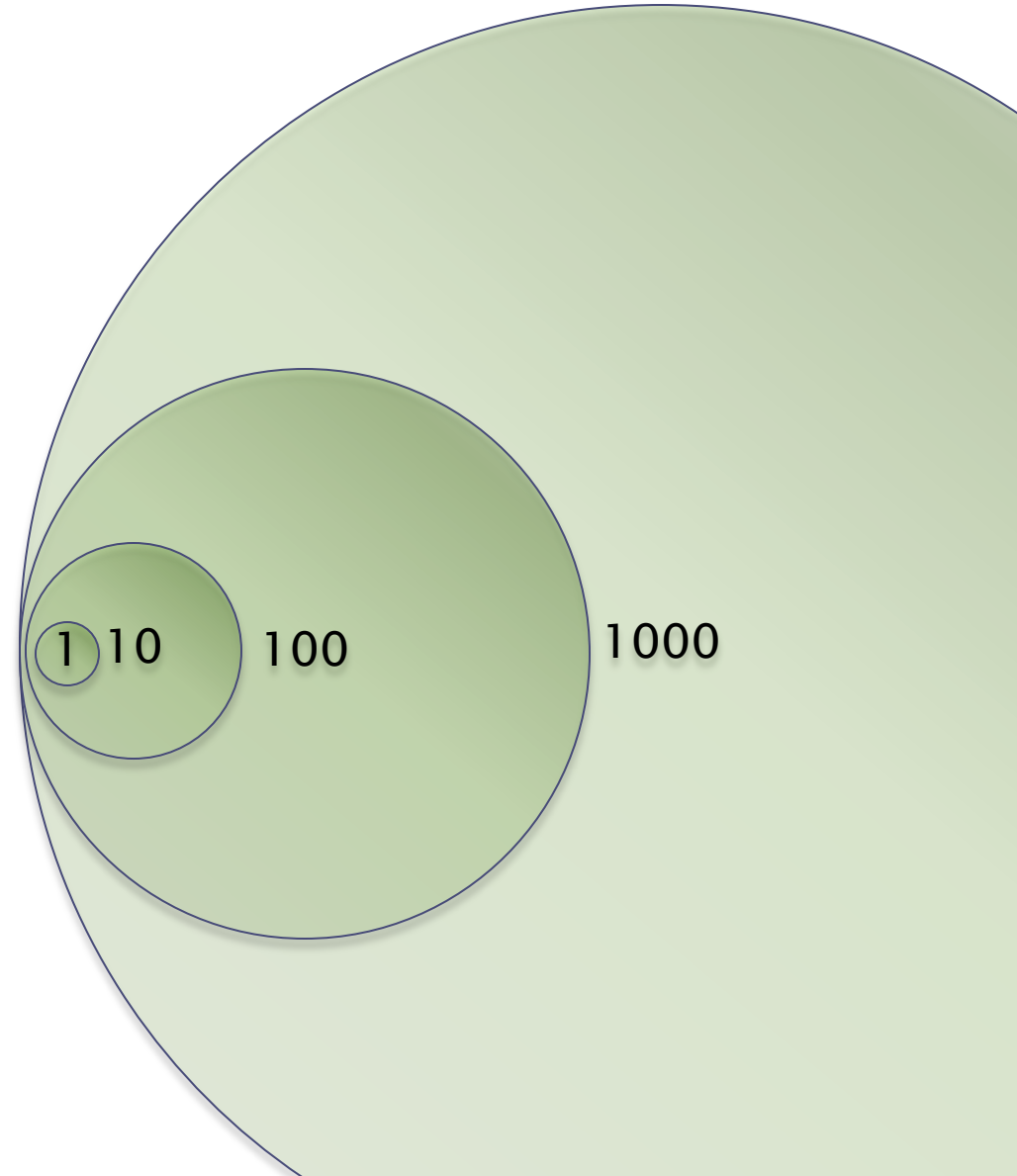
The Problem (1-10-100-1000)

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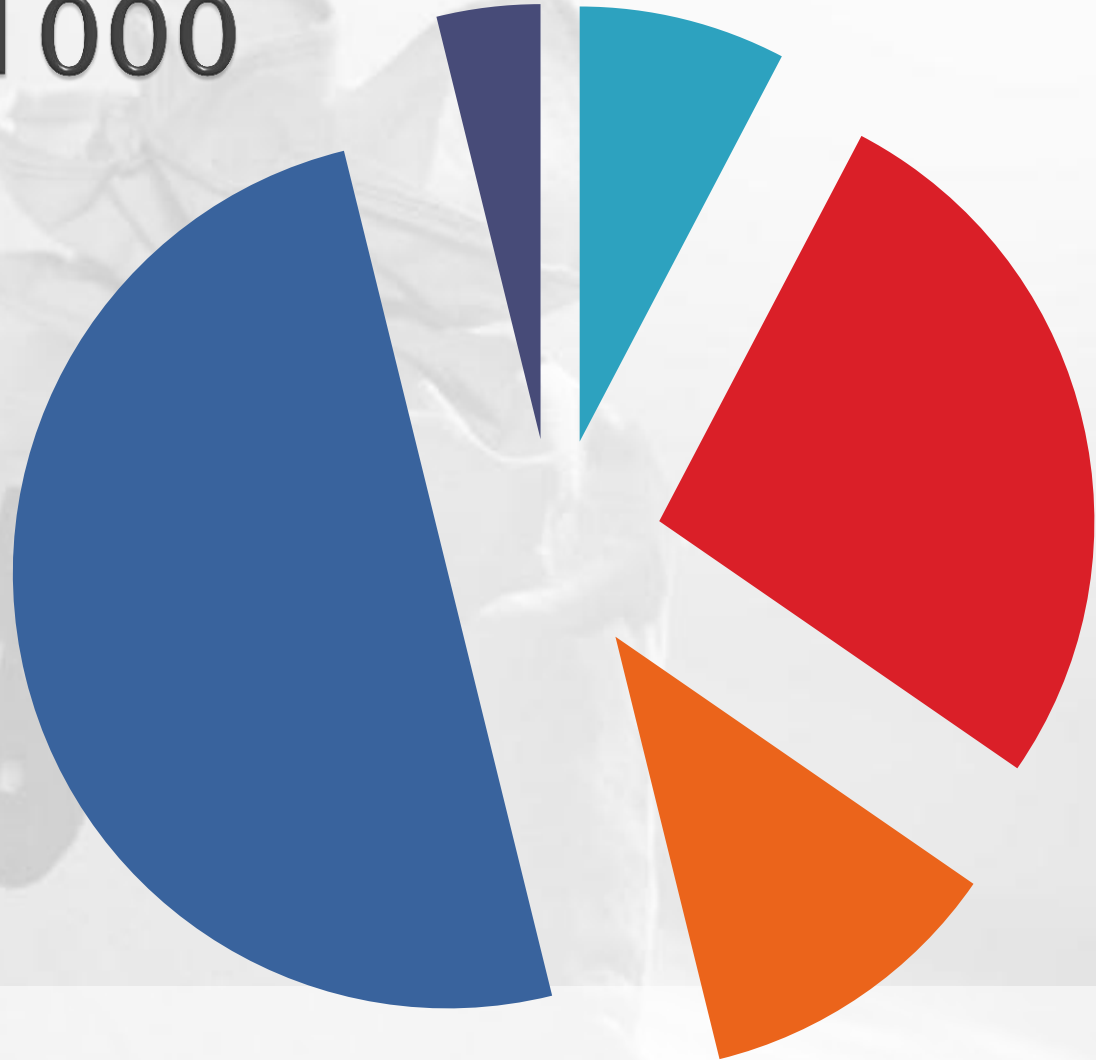
The cost of the wrong technology:

- During planning
- During assessment
- During staging
- After deployment



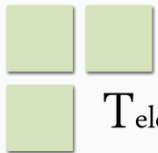
The Cost of 1000

- Planning and Deployment
- Equipment Purchases
- Staff and Training
- Doing it Again
- Lost Confidence



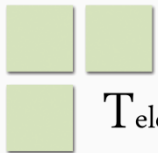


What's Your Problem?

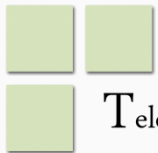


It's Too Hard!

What's Your Problem?

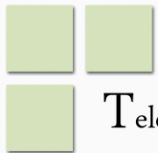


I'm Not Technical!



Just Tell Me!

It's All The Same!

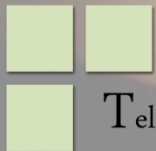




WRONG ANSWERS!

What Are We Going To Do?!

- ▶ **Remain calm**
 - Tea, yoga, and long baths may help
- ▶ **Learn how to do it right**
 - Repeat after me, “Yes, I can!”
- ▶ **Find out how it works, and how to get help**
 - Experience (yours) + Experience (others) = Goodness



Telehealth TAC

A Processes Overview

- Establish Requirements
- Review the Market
- Procure the Devices
- Plan the Tests
- Test the Plan
- Select a Device
- Deploy and Support



Establish Requirements

- Gather as many points of view as possible
- Create shared meaning around the requirements
- Think through a variety of requirement types:
 - Functionality
 - Portability
 - Interoperability
 - Usability
 - Data Integrity

If this is all you do, you will be way ahead of those who just head to the market immediately.

Review the Market

- Use online resources – Google, Bing, Amazon, etc
- Phone a friend – TRCs, OAT Grantees, TTAC
- Talk to organizations that have existing programs
- Contact the manufacturers and vendors

If you find yourself doing this before you have a firm grasp on the requirements, go back a step.

Procure the Devices

- Manufacturers and vendors can be incredibly useful
 - Loaners are great!
- Buy and borrow what you need
- Keep it all organized
- Try to get the devices in at the same time

Your budget and time might not allow this – consider finding a way to get access to the devices at a store, conference, or other telehealth program.

Plan the Test

- Quantify your requirements
- Develop methods to test against the requirements
- Planning and testing can be iterative

This does not have to be an all-inclusive, massive test suite ... what are you really looking for with your tests?

Test the Plan

- Test independently or together
 - Independent tests can prevent “group think”
 - Collaboration can foster discussions
- Document EVERYTHING
- Be consistent
- Update test if needed

Have the right people involved here – it can be a timesaver in the end if the equipment starts out in the right hands.

Select a Device

- Get the reviewers together
- Discuss the scores – clarify discrepancies
- Consider bringing in the initial requirements team
- Be prepared for a second review of top performers
- Make a decision and share your results

This will happen regardless of how many of the previous steps you have taken – your exact process here will vary depending on your other efforts.

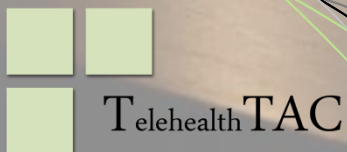
Deploy and Support

- Device Staging
- Configurations
- Spares
- Warranties
- Customer Support
- Troubleshooting
- Training
- Replacing Equipment

This requires its own plan, process, and work that will likely be somewhat unique to each technology, organization, and deployment size.



You want me to WHAT!?



Repeat after me – www.telehealthtac.org – we have toolkits and materials that talk about all of this in much more detail.

Lessons Learned – DSLR Cameras

- ▶ A large, frequently changing market that is targeting many people with different needs.
- ▶ Brought in 17 cameras, 13 lenses, and 10 lights for evaluation
- ▶ Two experienced photographers on the team, previous work assessing point-and-shoot cameras

Lessons Learned – DSLR Cameras

▶ The Plan:

- Shoot images of the eye, teeth, mouth, head, back, wound, finger tips, hand, and an elbow
- Use various lens and light combinations with each subject and camera body
- Use custom-made software for image review

▶ The Goal:

- Determine if camera bodies or lenses make a significant difference
- See how equipment performs with common but diverse imaging needs

Lessons Learned – DSLR Cameras

- ▶ Keep your focus just that – focused
- ▶ Homegrown solutions can be outgrown
- ▶ Use the experts that you have
- ▶ Be willing to “cut your losses” if evaluation work is not producing useful information

Lessons Learned – EHR Carts

- ▶ A rapidly growing market with healthcare-oriented products
- ▶ We were asked to help finish the build for a dozen carts to be used in the OR
- ▶ We knew little about the carts, the needs, or the parts but did have previous cart-building experience

Lessons Learned – EHR Carts

- ▶ The Plan:
 - Assemble the pieces needed for one cart, then repeat the process for the others
 - Work from general build notes from previous work groups
- ▶ The Goal:
 - Do it all in three days

Lessons Learned – EHR Carts

- ▶ Know your requirements
- ▶ Establish the process before doing work
- ▶ Assembly lines propagate errors if something needs to be redone (1-10-100-1000)
- ▶ Committing to deadlines without knowing the work can make for late nights

Lessons Learned – Stethoscopes

- ▶ A fairly small market with mostly established players and a few new, smaller manufacturers
- ▶ We brought in 13 stethoscopes, with some purchased and some borrowed
- ▶ We had experience with a few models of stethoscope as a part of a previous Store & Forward project, had audio equipment experience with one of the testers

Lessons Learned – Stethoscopes

▶ The Plan:

- Create a foam sound booth and test inside that
- Use a tone generator and audio analyzer to test frequency response

▶ The Goal:

- Determine which stethoscope provides the best auscultation ability in a quantitative test

Lessons Learned – Stethoscopes

- ▶ K.I.S.S. – Keep It Simple, Smart-guy
- ▶ Foam sound booths are not sound proof
- ▶ Audiologist labs after-hours are quiet
- ▶ After-hours cleaning crews are noisy
- ▶ Using doctors' ears can provide more relevant information



YOU WANT ME TO WHAT!?



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Help is Here (and There, and There ...)

- ▶ Telehealth Resource Centers
- ▶ Office for the Advancement of Telehealth
- ▶ American Telemedicine Association
- ▶ Telehealth Technology Assessment Center

Help is Here

▶ TelehealthTAC

◦ Toolkits

- Desktop Videoconferencing, Digital Cameras (point-and-shoot, DSLR), Electronic Stethoscopes, Home Health, Patient Exam Cameras, Technology Assessment 101, Videoconferencing Bridges, Videoconferencing Codecs, Video Otoscopes

◦ Webinars and presentations

◦ Email, phone, and personal help

Summary

- ▶ Technology assessment is a hard but critical practice
- ▶ It's a process that you need to actually *do* to learn
- ▶ It is okay to make mistakes, as it builds experience

Questions?

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Additional resources for telehealth program development can be found at www.telehealthresourcecenters.org



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