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Origin Integrated Studios

THE OFFICIAL NEWSLETTER

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OUR RECENT DEPLOYMENTS

WE HAVE JUST SUCCESSFULLY
DEPLOYED TO...

— PUSAT PERUBATAN —
ANSON BAY
MEDICAL CENTRE



 **KBMC**
A Specialist Hospital
Kota Bharu Medical Centre Sdn Bhd (393760-H)



極樂寺慈善醫院
KEK LOK SI CHARITABLE HOSPITAL



100%
DEPLOYMENT RATE

WELCOME ABOARD

WE'RE HONoured TO HAVE
YOU WITH US...

[Click here to read the news](#)



SIGNING CEREMONY WITH ADVENTIST PENANG ON
21ST APRIL 2021 (GUANGMING NEWSPAPER)

Upcoming Releases

New clinical features are out for your Origin EMR, improving workflow efficiency!

Central Sterile Services Department

and its processes

To cater for the Central Sterile Services Department (CSSD), Origin now facilitates the sterilization process for medical / surgical supplies and equipment, which is able to record all steps throughout the process from pre-disinfection to cleaning to packing. Departmental requests are also enabled so other clinical units can raise individual request for equipment or supplies. CSSD can then have visibility of requests and respond accordingly with expected delivery time of requested item. These new features will be able to allow efficient tracking of CSSD Workflow and enhances information sharing between CSSD and other clinical units.

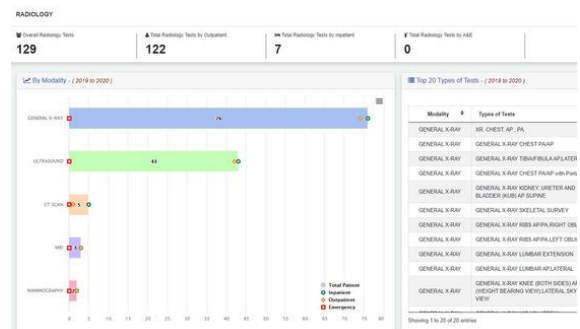
		CATEGORY	TYPE
Decon	55	<input type="checkbox"/> SCI-STR	ITEM
Complete Decon	0	<input type="checkbox"/> SCI-CRV	ITEM
		<input type="checkbox"/> SCI-STR	ITEM
Packing	0	<input type="checkbox"/> SCI-STR	ITEM
		<input type="checkbox"/> SCAP	ITEM
Auto Cleave / Sterilize	0	<input type="checkbox"/> SCAP	ITEM
		<input type="checkbox"/> SCAP	ITEM
Dispatch Store	0	<input type="checkbox"/> SCAP	ITEM
		<input type="checkbox"/> SCAP	ITEM
Dispatched	0	<input type="checkbox"/> SCAP	ITEM



Create PO:- The PO module has undergone a facelift. Origin is now able to configure the system by applying the best discount to each item. The total will then be calculated automatically.

MAINTENANCE REQUEST		
Maintenance Work No	<input type="text"/>	Requester
Destination	<input type="text" value="BIO-MEDICAL ENGINEERING"/>	Req. Department
		Request Date

Maintenance & Asset Profile :- Allows users in individual departments to create medical & non-medical equipment profiles to record information relevant to equipment maintenance e.g. vendor name, PPM frequency, PPM due date etc. Departments can then raise maintenance request to the BME department through Origin. This will help to ensure all equipment are monitored and maintained accordingly



Radiology Dashboard:- Incorporates several variables, allowing indication of modality usage, modality popularity and utilization rate by daily, monthly and even yearly time frames. Statistics generated will then be able to help in department resource planning

[illegible]

Implementing a THIS & EMR: What Should I be Looking Out for?

WRITTEN BY ERIN LEE

Healthcare is moving swiftly towards digitization. It is without doubt that electronic documentation and automated and streamlined processes significantly oils most wheels within this multi-departmental multi-functional machine – a hospital. With the Covid-19 pandemic hot on our heels, it is more eminent than ever that hospitals must digitize and in fact, expand reach out from the 4 walls of the hospital to continue delivering care. This is a point of time where healthcare must be present, ever ready to service the community.

However, once a decision is made and the hospital intends to go digital, it is not uncommon to hit another roadblock – what should we look out for to know the system that I am adopting would suit our needs?

Read on to find out more.



FLEXIBLE

Healthcare is such a hectic and ever-changing scene where practices and guidelines change every few years. No doubt evidence-based practice is the golden standard and we will surely evolve with the accumulated experience. Nevertheless, ironically, healthcare is also one of the environments which do not welcome changes with wide arms. A good THIS / EMR Solution *must be flexible enough to be customized to suit existing and future workflows* so the change management is minimal. Persuasion of healthcare personnel to embark on digitization should be how the system makes work easier and not “what? More changes to my work?” That aside, the system should also be able to *catch up with changing workflows and standards* by being easily customizable. Even if the system is not easily configurable, the supporting vendor must be responsive and willing to do enhancements because healthcare, is always evolving.

"Flexible enough to be customized to suit existing and future workflows"



AFFORDABILITY

To this point, it is not always the lower the better but rather, what works for your hospital. Compare features versus pricing between systems. Features do not entirely focus on functionality but also system interface and usability. Training, retraining and change management is and will always be a hidden cost to any organization. Bear in mind, hospitals will need decide on hard (must-have) requirements e.g. interfacing with other clinical systems like PACS and LIS then state clear and stand firm on it. Everything comes with a cost so during negotiation, ensure all grounds are covered, then only, do a final price comparison including subsequent service maintenance contracts. Work out a deal which *covers most gaps (clinical, workflow, operational etc.) with the investment.*

"The HIS & EMR system must also be able to gear towards artificial intelligence and data analysis."

SCALABILITY

Resonating back to the earlier mentioned point on flexibility, *selected modules, if not the whole system, must be scalable.* Ensure that the product is on a flexible platform where in the future, can be deployed on other devices e.g. tablets or ipads. Look out for ability to support telehealth and self-appointment booking for customers. That will be in line with the paradigm shift of healthcare where healthcare is now, patient centric. Patients will take ownership of their own health and in return, care delivered will be tailored for them according to needs. This can be seen via a simple example of patient selecting own appointment date and hospital making it happen for them by providing a platform to do so. Looking inwards into system capability, the system must also *be able to gear towards artificial intelligence and data analysis.* A reiteration of the earlier point of evidence-based practice, near real-time dashboards and reports are the way to go if an organization is looking into process improvement and a lean workflow.