

Empowered Care

Digital transformation continues to enhance and alter the structure and practice of intensive care, with patient-centered, personalized care models emerging as the future of critical care worldwide.

Yet in a typical setting, there are just two key actors - the patient (the recipient of care) and the care provider (doctors, nurses, and allied professionals), who are both significantly disenfranchised. In a recent study, 54% of the families of critically ill patients did not comprehend the clinical status of their loved ones accurately¹. What is more telling is that half of those families did not even ask for more information!

Providers on the other hand, function in a high-stress environment. As a testament to that fact, a large national survey found that critical care is the specialty with the highest risk of burnout - exceeding, 50%². The lack of adequate emergency and critical care systems, and severe working conditions exacerbate the situation further.

While technology will undoubtedly form the basis for solutions to these problems, many of the existing solutions are poorly designed, cumbersome to use and often make a bad problem worse. Major societies such as the American Medical Association, suggest workflow fixes and reducing documentation as the top two strategies to reduce burnout and work-related stress for care providers.

It is clear that for effective care, the provider needs to be empowered to deliver the best possible therapy and the patient needs to be empowered to receive it, with both stakeholders playing an active role in the process. The solution that enables this is a combination of well-designed technology and world-class care, that leads to:

Empowered providers
Empowered patients
Empowered care

References:

1. Azoulay E, et al. Half the families of intensive care unit patients experience inadequate communication with physicians. *Crit Care Med*. 2000
2. West CP, et al. Interventions to prevent and reduce physician burnout: a systematic review and meta-analysis. *Lancet*. 2016

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