

SYMHEALTH 2022

**National Conference on
Transforming Healthcare: Symbiosing with Allied &
Healthcare Professionals**

**Organized by
Faculty of Health Sciences, Symbiosis International
University**

Academic Schedule*

Day & Date: Friday & Saturday - April 22 & 23, 2022

SUMMARY REPORT

22nd April 2022

Organized by

Faculty of Health Sciences, Symbiosis International University

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SUMMARIES OF PRESENTATIONS

Friday, April 22, 2022,

TRACK 1

HEALTHCARE WORKFORCE: CHALLENGES AND NEWER TRENDS

Mr. Sunil Karanjikar

Director - Human Resource & Employee Relations, Jaslok Hospital & Research Centre, Mumbai

Mr. Sunil Karanjikar began his session by pointing on the fact that healthcare workers comprise of all people who deliver health services or operate healthcare facilities. He also emphasized on how nurses are important & stated that they are the main professionals on the floor. He further told in details the statistics of healthcare workforce distribution in rural & urban area & the key challenges they are facing. A recent 2020 WHO mid-term review of progress on Decade for health workforce strengthening in SEAR 2015-2024, mentions that India needs at least 1.8 million doctors, nurses and midwives to achieve the minimum threshold of 44.5 professional health workers per 10,000 population. India needs to invest in HRH for increasing the number of active health workforce and to improve the skill-mix ratio (nurses-doctors, allied-doctors etc.). Apart from the key challenges that he mentioned, he also talked about some more additional challenges like technology application in making future workforce. The new age technologies are fitting into more patient centered models. But the human touch in healthcare cannot be replaced as the patients need to feel safe and supported which can be provided by a competent, trained and compassionate workforce. Additionally, satisfaction of patients will depend on how well the satisfaction and happiness of the workforce is ensured in this high-pressure sector. He also showed concern on how healthcare infrastructure is missing in both urban & rural areas. He discussed about the workforce trends & ways to improve EVP to get success. Finally, he ended his session by telling the approaches that can be employed to bridge the capacity gap.

GENERATION NEXT HEALTHCARE MODELS

Before the speakers start with their presentation Dr. Venkat Sudigali, anchor of the session initiated the session by giving the introduction regarding the speakers of the session Mr. Biswajit Nayak, Dr. Aparna Bhagat & Dr. Arshad Khan.

Insurance- Mr. Biswajit Nayak

Head Claims and Networking, SBI General Insurance, Pune

Mr. Biswajit Nayak talked about the business model especially with regards to telemedicine uptake. Covid has helped in spreading the awareness of health insurance. But penetration is still less than 10%. The circumstances have forced people to adopt new forms of treatment, consultations & has helped insurance company to device products in a way where patient could reduce overall insurance claim cause. He said, now there are more insurance products which is revolving around outpatient part. He then said, unfortunately the form of health insurance in the country has not evolved in same pace at which the healthcare industry has. The Insurers are now open to investing more on technology as well as take care of the technology which healthcare industry is bringing in like E-ICU, and also bring in preventive & primary healthcare. In conclusion he said there should be collaboration of Insurance company & diagnostics to improve services. He also talked about blockchain technology & where it is used in insurance.

Pharmaceuticals - Dr. Aparna Bhagat

Head International Business, Wallace Pharmaceutical, Mumbai

Dr. Aparna Bhagat talked upon how shipments, communication and transportation were handled during covid. She said in export, regulatory play a major role. So, they focused on regulatory side so that the time is not wasted. Marketing & sales were handled digitally, representatives talked to doctors on WhatsApp & through webinars. She also spoke about digital pharmacy. She said companies have already started going digital in all the functions of pharma company like production, R&D, marketing & sales, they are getting in touch with all software companies for effective digital solutions for cost effectiveness, for better outcome like patient experience. And this is definitely going to help. She believes the next generation business models would be of collaborative approach. So, now the challenge for pharma company, who have patents, is to shorten the time to market. Hence, collaboration with company & R&D houses & then getting it automated like AI in R&D so that time to market get shortened. So, before the patent expires, the company doesn't lose revenue. At the end she emphasised on working in collaborative environment like collaboration with software companies for software solutions.

Pathology - Dr. Arshad Khan

Head Lab. Operations Maharashtra & Goa, Dr. Lal Pathlabs Ltd

Dr. Arshad Khan spoke about the models they are using in his lab and how much they are into automation. At this point of time, they are having 20+ labs in Maharashtra & Goa with respect to lab operation. And their operation is Hub and Spoke Model. He said they use automation in each and every aspect of laboratory business whether it be pre-analytical, analytical, or post-analytical phase. He continued by saying that they are also into launching new packages

and new tests that are available worldwide. They are also starting genomics and have also opened up close to 20 PCR where 3 are in Maharashtra in last 2 years. He then justified how AI technology helps decrease the cost incurred by the patient. We have a lot of patients and due to that we have huge data & they are just analysing data. So, by having a lot of data, the cost gets diluted. He said they have done internal analysis on how the automation can decrease the cost. They have integrated instruments in their labs.

Anchor: Dr. Venkat Sudigali
Director and COO Excell Hospital, Hyderabad.

ARTIFICIAL INTELLIGENCE IN HEALTHCARE – EMPOWERED TP SERVE BETTER

Dr. Aniruddha Pant
Founder and CEO Algo Analytics, Pune

Dr. Aniruddha Pant started his speech by telling how healthcare technology evolution took place in the past two decades & what is expected to be evolved by the end of 2030. He mentioned healthcare driving factors. He spoke about possible use cases for Artificial Intelligence at the hospital. And also threw light upon AI features for Pharma Consulting Platforms. He emphasized building a predictive system based on physiological measurements of the hospital inpatients. He then spoke about ICD Coding Assistance & it's necessity. He gave an idea for a prescription app & compliance chatbot where the prescription will be dictated by a doctor in a smartphone app that will be convert into text & print out of the same will be automated and the chatbot will take care of the patient compliance. Methods for optimization at the hospital were another area where he discussed his views. He ended the session by telling the challenges & mitigation plans.

VIOLENCE AGAINST HEALTHCARE PROVIDERS: JUDICIAL PRONOUNCEMENTS

Dr. Sanjay Gupte
Medico-Legal Expert, Past President- FOGSI

Dr. Sanjay Gupte began by saying that violence against healthcare professionals is a common phenomenon observed not only in India but also in many other developing and even developed countries & is increasing across the globe. According to a study conducted in 2015 by Indian Medical Association, in India alone, it is reported that 75 % of doctors have faced verbal abuse or physical abuse in the hospital premises with 12% of such violence occurring in the form of physical attacks. Also, according to the World Medical Association, all medical practitioners have the right to work in a safe and secure workplace. Regardless of the fact

that the Protection of Medicare Service Persons and Medicare Service Institutions (Prevention to Violence and Damage to Property) Act 2008 has been enacted by approximately 23 states in India, it has still not been effectively integrated into the administrative machinery. He then continued talking about trends in violence & its effect on society & healthcare professionals, causes of violence, and steps to be taken for prevention & interventions. There are serious doubts, which are being raised by the medical fraternity about the ability of such legal provisions to sustain beyond emergencies and ensure the everyday dignity and protection of healthcare professionals. The female healthcare workers which make up 70 % of workers in health are exposed to other hazards of violence which include sexual abuse and assault putting additional pressure on the system. The session will focus on current incidents, the absence of a specific law, the Indian Penal Code, 1860 (IPC) provisions, and the judicial pronouncements of a few cases to throw light on the appalling state of the backbone of the healthcare system.

ADVANTAGE INDIA: EMERGENCE OF HEALTHCARE START-UPS

Before the speakers start with their presentation Dr. Yogesh Bramhankar, anchor of the session initiated the session by giving the introduction regarding the speakers of the session Ms. Namita Thapar, Mr. Ajit Nagraj & Dr. Vishwas Mahajan.

Ms. Namita Thapar

Executive Director, Emcure Pharmaceuticals, Pune

Ms. Namita Thapar started by answering the question that how India needs to change in terms of way we think about the technology, the way we think about what the next wave of disruption will be & more importantly how we are going to address the biggest issue i.e., accessibility & affordability? She continued by saying that in metrics like doctor: patient ratio, patient: bed ratio, India is far behind. Our medical spend in terms of GDP is 2%. So, a lot of statistics have to change. She further continued by saying that out of 99 unicorns only 2 unicorns i.e., PharmEasy & Pristyn come from healthcare sector. In conclusion to the question, she said technology is going to play a big role in the next few years in the disruption & solve India's inherent issues of accessibility and affordability.

She then addressed the next question which was- are there more opportunities for Indian companies in research & development and innovation especially in chronic diseases which our Asian countries have been facing since long time and is this also giving direction to new opportunity in B2B sector where healthcare professionals & innovators come together to practice new innovations. She said there's definitely a big role that India can play in innovation. She gave example of her own company and said that Emcure is 1st to market in a

lot of chronic disease medication which help save time & life. The second area is vaccination, Emcure is also working on its mRNA similar to Moderna & Pfizer & the same mRNA technology can be used in oncology, rabies, etc, & in a lot of areas. So, there is a lot of innovation happening in a lot of other companies. She added, Innovation is a very broad term, there can be innovation in drugs, services, patient awareness, diagnosis, & India is at best spot to take advantage because we have best brain through wonderful universities, private - public partnership is becoming very rampant where the private sector is putting a lot of money. She concluded by saying that we will see a lot of innovation in coming years.

Mr. Ajit Nagraj

Chairman and CEO, Scitara Corporation, USA

Mr. Ajit Nagraj initiated his talks by telling the opportunities that there is in the healthcare for the next 5 years, those were - 1. Digital transformation, 2. Tools- AI tools, analytics tools, 3. Biotech revolution. A recent Gartner report says that by 2025, 70% of healthcare industry will be digitally transformed. He said that the pharma and healthcare is a trillion-dollar opportunity. He continued by saying that at symbiosis we have those great opportunities because much of work we do is interdisciplinary and much of how it is structured is interdisciplinary. He later talked about innovation where he said innovation is as simple as managing and scaling of a processes. He urged not to think of innovation as being something daunting. He threw light on backstage activity on how biotech is enabler in bringing patient care or wellness. He gave example of Cambridge which has single largest hub of biotechnology in the world. There are 400 biotech companies. Why is that? Because it is driven by academia, Harvard & MIT, best hospital system in the world, government, & now driven by technology. Another example he gave was about Moderna, he said they were able to deliver vaccine in war speed because of their ability to deploy technology. So, this ecosystem is very very critical. And, Pune is the hub where this ecosystem can be built but it requires right cooperation & will. He also gave advice to young healthcare entrepreneurs that “you won’t know until you try”.

Dr. Vishwas Mahajan

Founder Whizibke, EC Member and Chairman Startups and Incubation Committee, MCCA, Pune

He started by telling the key thing that is missing in healthcare start-ups viz-a-viz other kind of software start-ups & i.e., deep domain knowledge. The ecosystem needs a lot of coordination & connection of the dots & that is the challenge. Healthcare is one place where converting an idea into product has the most human value. He said Healthcare is where the

real action is, where the real science gets converted into real applications that save life. Is there enough money going there to healthcare? He added by telling his view that healthcare entrepreneurs don't pitch as well, as they could. He ended his speech by saying that Ecosystem needs a reboot.

Anchor: Dr. Yogesh Bramhankar
CEO, SCEI, SIU

HEALING ARCHITECTURE: MODERN TRENDS AND PRACTICES IN HOSPITAL DESIGN

Ar. Kshititi Nagarkar
Principal Architect Shree Design Mumbai

She began by discussing the experience of the past 2 years where because of covid, the indoors mainly homes protected us from exposure. Never has anybody spent so much time at home & yet healed himself/herself from within. This healing happened more by accident, then imagine the power of healing was to happen by intent. Several studies have advocated that the architecture of the hospital not only impacts the patients but also has an effect on the healthcare providers leading to better productivity and outcomes. Facility design can affect both the quality and delivery of care and the financial performance of healthcare institutions for optimal use of natural lighting and ventilation as well as incorporating the Green Building and healing architecture concept. The use of innovative & appropriate design strategies can help healthcare facilities prepare themselves better for the delivery of services in an increasingly patient-focused & tech-savvy culture. In an increasingly patient-focused culture, management of patient expectations is irrevocably tied to the design and planning of healthcare settings. She spoke on the concept of creating healing environment, called "Salutogenesis". the science is relatively new but it is understood that a number of the neurotransmitters react to environment stimuli, and therefore react to design. She added to her point that our environment affects our hormones as well. She emphasized on factors to consider for designing a salutogenic / healing hospital. And continued further by talking about therapeutic gardens and its benefits. In conclusion she said that catering to above salutogenic aspects, will help us inherently create a Sustainable Hospital Design which is possible through salutogenic approach of Reduce-Recycle-Reuse.

TRACK 2

PATIENT SATISFACTION TO PATIENT DELIGHT A PARADIGM SHIFT

Ms. ARCHANA GUPTA

Group Head patient experience C.K. BIRLA Hospitals Kolkata

Ms. Archana initiated the session with a warm welcome to the audience by giving the example of the incident happened at The TAJ Hotel Mumbai taking about customer satisfaction, as she has also with the Taj group. She started her career in healthcare sector in 2012 with the Manipal Hospitals and currently she is working with C.K. BIRLA Hospitals Kolkata. She said that patient however judge quality by his or her perspectives, something that is subjective and cannot be verified in some way as the outcomes as the patient is judging the overall experience of being in hospital. The session was focused on the concepts of Kano Model theory which relates to product development and customer satisfaction. In healthcare industry particularly in hospital when its about patient satisfaction the word patient is also related to the person who is suffering from the disease along with his family member, relative, friends who are accompanying him to the hospital and they are also be satisfied along with him. She further added that one should have a proper presence of mind to serve the patient and this is a continuous process. At the end she concluded the session by explaining how to create a memorable experience is the most important key for patient satisfaction.

NUTRACEUTICALS, FUNCTIONAL FOODS AND SUPPLEMENTS

Before the speakers would start the session the anchor of this session Dr. Kavitha Menon (Head of the department of nutrition and dietetics SIHS Pune) initiated the session with introduction of the speakers by sharing the knowledge of the topic to be discussed.

Dr. A.J. HEMAMALINI

Professor and Head Of Department of clinical nutrition and dietetics SRFAHS, SRIHER(DU) Porur, Chennai

She started her speech with warm greetings by appreciating the arrangements that were done. She talked about scientific formulas for nutraceutical supplements which were further added by the statement that the current Indian nutraceutical market is rising day by day by addition of dietic ingredients like vitamins, minerals, amino acids. Further in addition to the above speech she spoke about oral nutritional supplements like polymeric, oligomeric and disease specific products in which she said that the oral clinical nutrition market is the ever-growing market. In the clinical set up also dietic supplements are used only based on the clinical condition, their nutritional status inn ability to meet requirements through regular intake. At the end of her wonderful session she summarised all the points shared by her throughout her speech like dietic and nutrition supplements. Her session defining

Mrs. SMEETAL FURTADO**Senior nutritionist and dietitian Qua nutrition clinics Mumbai**

She threw some light on sports supplement and nutrition by explaining that what are sports supplement and why are they basically used for, on which she replied that it is used for improving performance of the sports person or athlete. So she explained that how supplement is needed or not is decided by following certain steps of the decision tree analysis through which it can be decided whether it should be given to a person or not. After that she briefed on various types of sports supplements along with there dosage forms, there benefits along with there side effects like caffeine, amino acid, proteins. Also she added some information that how the supplement is selected by doing the DOPE Test which is done by world anti dope agency which provides the list of supplements which are banned through world-wide.

Dr. TAN MAI LAN**Associate Professor, school of pharmacy USM Penang Malaysia**

She started her session defining nutraceutical, that is a food or part of food provides medical or health benefits including the prevention of disease. After this she said that this are products other than tobacco intended to supplement the diet that bears one or more dietary ingredients. More towards preventing treatment throughout the world in nutraceutical market, she shared that what are key market drivers like who are taking the products of nutraceuticals market are people with aging, obesity, osteoporosis, diabetes melitus. Further she also explained the adverse effects of nutraceuticals, functional foods and dietary supplements and concluded her session.

Dr. PAWAN SINGH**President R&D BVG Life Sciences Limited**

He talked about evidence based herbal medications from Indian traditional Knowledge system by giving some brief introduction of his company which is BHARAT VIKAS GROUP- BVG LIFE SCIENCES LIMITED which provides an accurate research and development unit settled in house, carrying sequencing and barcoding with scientific evaluation of plants, food and drugs. He further added that what is objective for research and development and how it is done like from selection of plant to final clinical studies. Also he explained that how product development cycles work and is formed from preliminary validation of locals than to preclinical validation further to clinical validation and FDA review and ending at post marketing monitoring.

LINKING HOSPITAL FOOD AND NUTRITION SERVICES TO CUSTOMER FOOTFALL

Ms. BHAKTI SAMANT

Kokilaben Dhirubhai Ambani Hospitals Mumbai

She wonderfully started the session with greeting the audience and making them aware with her topic to be discussed by saying that patient satisfaction is the extent to which patients are being treated as it is an important indicator for measuring the quality in healthcare as it affects a clinical outcomes, patient retentions and medical malpractice claims. Further talking on how to take feedback from patients through various modes she added that there are various modes like phone services, hardcopy services and online services. These feedbacks should be collected section wise one by one like from admission/reception and billing to facilities and premises from this to blood bank/radiology /laboratory and pharmacy department and finally to food and beverages along with housekeeping services. Then feedback for food and beverages dietetics department was explained by her very elaborately along with the responsibility of a clinical dietitians that how to assess nutritional status of patients by determining their nutritional needs. She then threw the light on roles and responsibility of a food service dietitian like to plan menus, supervise process, develop new recipes with chef, suggest quality of ingredients explained along with the F&B Hierarchy and activities involved in food production. She ended her speech with saying that service delivery is right food to right patient.

INTEGRATING THE EXERCISE MEDICINE IN HEALTHCARE: BRIDGING THE GAP BETWEEN THEORY AND PRACTICE

Dr. AASHISH CONTRACTOR

Director of the Rehabilitation and Sports Medicine Sir H.N. Reliance Foundation Hospitals, Mumbai

He initiated with his topic by explaining the importance of exercise saying that “exercise and yoga is that medicine which should be taken regularly to be active and fit” after which he explained about All Cause Death Rates by CRF categories. He then presented integration with hospitals services “circle of care” by putting patient better then before along with who are part of this team from Surgeon, Rehab Physician, Physical Therapist to Neuro-Phycologist keeping patient and his/her family in centre. Also, he said that they promote yoga and exercise not only to their patient but also to their staff members for creating a better stress-free working environment with a stress-free life. He ended his speech by saying that exercise will help to prevent the disease but if one is already having one then it will help to reduce its’ effect, so one should regularly keep practicing yoga and exercise as prevention is better then cure.

DIGITALIZATION OF HOSPITAL OPERATIONS: PREVALENT PRACTICES, POSSIBILITIES AND CHALLENGES

Before the speakers start with their presentation Mr. Naveen Lartius Anchor of the session initiated the session by giving the introduction regarding the speakers of the session Mr. Neeraj Lal and Mr. Nishant Jaiswal.

Mr. NEERAJ LAL

Chief Operating Officer at Apollo Hospitals Ahmedabad, Gujarat

He started his session by saying that the healthcare is the second most important sector for digitalization growth after the shipping sector. He talked on how we were not developing the digitalization the healthcare field especially in the part of hospitals before covid-19 pandemic after which he showed a video regarding hospital at home in which comparison was done between other countries and India regarding the healthcare facilities availing at home through virtual consultancy and delivery of medicines. Regarding to the topic he gave us the example of the Apollo 24/7 app which is a doctor consultancy app and it works on remote patient monitoring system. In addition to that he talked about how they are promoting technology by using the artificial intelligence in equipment like camera's and using predictive analysis along with digital health records by using Care Suite Persona (CSP). He concluded his speech by saying that become a part of this digital transformation happening in the healthcare sector by using it and creating something new for betterment of this sector.

Mr. NISHANT JAISWAL

Director, Nexus Day Surgery Centres, Mumbai

He initiated his session by asking a question that “why we need digitalization of hospital operations?” to which he briefly answered that how after covid-19 the transformation came in healthcare sector in means of digitalization and hospitals operations are seen as cost centre. Further he asked another question that “what has to be done in this sector?” to which he replied that for the sake of both healthcare providers viability and patient's health, “operational improvement is the key”, he said that designing smart digital operations at hospitals, whether it is pricing, procurement, process monitoring material and energy consumption or manpower utilisation is at top agenda for Indian healthcare providers today. He ended his session in a very poetic manner by saying these lines as “**MANZIL MILEGI, BHATAK KAR SAHI, GUMRAH TO WO HAIN, JO GHAR SE NIKLE HI NAHIN**”.

NUTRITION PEARLS FOR VULNERABLE CLIENTS

Mrs. SHERYL SALIS

Consultant dietitian, Nurture Health Solutions, Mumbai

She started her speech by saying that nutrition plays an important role in life. She explained further that how it is most important thing to improve the nutrition of vulnerable group of society like young children, women of reproductive age and in post- menopausal age, adolescents as there are several problems in maintaining the nutrition levels in these group because people have set several myths for nutrition like she gave an example of that a woman is said that now you are pregnant so you should be eating for two, but the fact is that its true that your nutrient needs are increase but energy requirements only increase by about 350 calories per day for the 2nd and 3rd trimester of pregnancy , so like this there are other so many myths regarding nutrition which has to be changed with proper knowledge and practices.

TRACK 3

BUILDING INTELLIGENT HEALTHCARE SOLUTIONS FOR TOMORROW

Mr Narendra Shaligram

Head of Operations FIGmd, Pune

Points discussed:

- **Patients' lookout:** Cheaper health insurance, Easier Management and Reactive management
- **Doctors Lookout:** Easy documentation, Minimal interference in clinical workflow, Faster approval cycles, Easy access to longitudinal history, High patient throughput
- **Insurance companies will look at** best possible care, effective utilisation of network and avoidance of unnecessary procedures, cost effective and insight into patient care. He spoke about 'ABHA' a centralized system which take care of doctors in all area.
- He also spoke about

Designing value-based care through information capture with the help of systems like Alexa, Google voice based clinical record entry system. Predictive plan preparation can also help in designing value-based care. ABHA plays a integral role in integrating newly introduced systems. Templates can be used for standard care planning. Use of tablets instead of notepads will be more beneficial.

Information Acquisition by using Integrated connectors to HER systems, HL7 and FHIR based data acquisition can be used. Handwriting recognition system can be used for

capturing data from hand written notes to digital data. Machine learning and Artificial intelligence for coding of clinical terms ICD10, SNOMED, LOINC can be used. It will help to collate data in the system for maintaining records.

Information Distribution should be done effectively through patient mobile application which can be easily shared with the care team. Data sharing and data availability depends on FHIR and CCDa form.

Payer use cases is used by the insurance companies to design the HR protocols. It can also be used to establish and monitor the process protocols which will ultimately reduce the cost in future. High risk patient's treatment protocols and exceptions in term of fast care as well as differential risk adjustment payments can be decided on a logical parameter.

Challenges faced are: resistance to change from the doctors as they feel that it increases their burden of additional documentation. They even do not adopt HER specially in the rural area. And even today small hospitals are not using the information technology systems like ABHA.

Q & A:

1. How to secure digital data in healthcare?
2. Coding imposes additional cost so can doctors be trained for medical coding as it is practised in USA.
3. Software development is advanced so it can be used in healthcare so that work becomes easy. And interface problem is occurring which should be explored.
4. What is the Indian scenario in medical data getting captured HIS system? Is there any thought or work going on it for Indian doctors?

HEALTHCARE SIMULATION: NEED OF THE HOUR

Surgeon Commodore Dr. Manish Honwad
Senior Registrar, INHS Asvini, Mumbai

Sir imposed on that simulation is a need of the hour. Sir enlightened us that simulation was brought into practice with high fidelity flight simulators. He said that simulation is important to learn the skill before practising on patients to avoid errors. Simulation education is based on cognitive psychomotor domains. He explained that it is a multispectral approach. Simulation makes sure that no harm is caused to patients, it helps the students to learn through error and scheduled errors. Simulation helps to translate knowledge, skills and attitude to efficient clinical care. As a simulation educator we should remember we are working with interdisciplinary team which helps us to learn an outcome. We need to have

part skill trainers for teaching simulation. Outcome of simulation is new learning and behavioural change. He spoke about the role of simulation health educators where he said they train the novice to experts. Sir also spoke about the AR/VR – the immersive simulation portals using augmented reality. Audience response system is something which they use to make out which student is not doing well. Blooms taxonomy plays a very important role to design a good simulation. 3D audio visual studio is a must while learning through simulation. As it helps to have repository for future learning and revising back for the students. Mixed reality is also something which helps in leaning normal and abnormal scenario simultaneously.

**Ms. Abra Pearl
Consultant INC.**

Mam started by asking the audience is simulation a technology or a technique? And clarified that simulation should be focused as a technique than a technology. Mam focussed on the number of medical errors happening and because of which simulation plays an important role in learning. Simulation is needed for decreased length of stay, limited clinical sites, faculty shortage, patient safety initiatives, medical legal issues and cultural change. Mam explained that simulation bridges the gap between clinical learning and practice. Mam highlighted on the circle of learning which comprise of knowledge acquisition, skill proficiency followed by decision making then simulation in teams and finally going for clinical experience. Simulation training helps in competency development and maintenance. This helps the trainee to get aware about their competency which leads to learning and then to practise. And to maintain the competency. Ma'am also spoke about the shift of paradigm i.e. from to learn by seeing to learn by doing. Benefits are that it helps in patient safety, better preparation of new students, support innovative teaching strategies, also helps in adhering the protocols, overcoming the shortage of faculty and clinical sites. It also benefits by providing opportunity to practise and acquire clinical skills. It also prepares students to provide quality care. Ma'am also focussed on the importance of debriefing which is the important key of simulation training. Structure of simulation was also discussed. Which comprised of pre brief then scenario followed by debriefing. Ma'am also talked about the revision of the nursing curriculum in which simulation is the part of the curriculum. OSCE is an important and mandatory method for evaluating simulation. Summarization was done was focussing on its importance by preparing students for their future career and enhancing maintenance of proficiency. Mam concluded with a story explaining the importance of human touch in patient care in the presence of technology use in healthcare.

Q & A:

1. What is the difference between the simulated patients and standardised patients?
2. How can the attrition rate can be reduced in Nursing?
3. What can be done to bring down the quality dissolution?

CLINICAL TRIALS, CLINICAL RESEARCH & PRACTICE

Dr. Sundeep Salvi

Director, Pulmonary Research and Education Foundation, Pune.

Sir started his session by focussing on why and how healthcare team should undertake Research which is an important part of healthcare career. Introduction of the speakers Dr. Sanjay Pujari and Dr, Harshika Sachdeva was given.

Dr. Sanjay Pujari

Director and chief consultant, Institute of Infectious Diseases, Pune.

Sir started the session by talking about Why research should be understood by clinicians as it improves the quality of practice. He emphasized on the importance of research in clinical practice. He also stated how the pandemic have affected the clinical area. He also explained how science have struggled during the pandemic for providing the quality care to the patient. Science during the pandemic have demonstrated a quick evolution of vaccines through drug trials. In the history of journal publications, papers were withdrawn from the Lancet publications as there was a drift in the evidences. He spoke about the importance of networking in research as it helps in getting to know about new researches and even helps in getting funding. Training in research methodology is also an important factor in Clinical research and practice. He spoke about two types of research that is institutional based research which can be done in our own setup or institution. Here digitalization is very important to get a correct data. He also focussed on importance of knowing the regulatory processes like taking consent from patients. Finally, he spoke about clinical trials where he stated that research is not just about finding new drugs. He told about investigator based clinical trial and the team involved in it.

Dr. Harshika Sachdeva

Director of Operations, J Arc Healthcare Solutions, Mumbai.

Mam started by stating the importance of the principal investigators who are the main part of the Clinical research team. Clinical trial team also plays an important role. Data is collected at site by clinical data management team. Today electronic data base systems are used for data capturing after which cleaning of data is done which ensure the data is useful and all-important information is present. Once all the data is gathered and cleaned then it is handed over to SAS programmer. Here the statisticians are involved and data is prepared. And after this phase the data is ready for publication. Mam stated about decentralized trials where maximum patients are retained and the data is coming fast. Mam concluded by saying that decentralization is the new way forward and real-world evidence is again a new way forward. These will help to get better evidence for clinical trial.

Q & A:

1. How important is passion for building research culture?
2. Data collected is questioned when publication is sent and it is rejected. How should it be worked on? What is the role of ethical committee?
3. How should the data be documented for a good data documentation in perspective of physicians?

TECHNOLOGY TOWARDS ADVANCEMENT OF ALLIED HEALTHCARE PROFESSIONALS

Mr. Arun G Krishnan

Sr. project Manager, BETIC, IIT Bombay

Mr. Arun started by talking about technology infusion in healthcare, starting from patient encounter to virtual care. And this transformation is based on patient centric approach. He also spoke about the shortage of healthcare professionals and the shortage of clinical settings too. Sir also spoke about medical device industry from western countries and eastern countries which altogether designed the Indian medical device industry. He also spoke about their initiatives which support start-up. He also spoke about a small facility at IIT Bombay, COEP Pune. VNIT, Nagpur which helps in eco system for building infrastructure. He also spoke about 2 days MEDHA programme which is followed by 1 week programme MEDIC and followed by other training programmes of different durations. Sir also spoke about various products designed in medical technology field which can be helpful in providing head to toe care, diagnosing and assessment of the patient. He enlightened about the process of reaching the needy people at grassroot level who need these medical devices specially implants or prosthesis. Mr Arun concluded by emphasizing on how we can define healthcare transformation.

Dr. Ambuj Chaturvedi

Senior Vice President, IKP Knowledge Park.

Dr. Ambuj started with focussing much on history of digital healthcare. It started with first tele call in 1897 then to clinical USG in 1956 followed by DNA sequencing in 1977 and then IMIA formation in 1989 followed by European health telematics association in 1999 and finally COVID in 2020. Sir also spoke about 3 key themes i.e., Diagnosis, Treatment and Monitoring on which technology impacts. He explained that technology first compensate with diagnosis then it competes and lastly it Complement with the diagnosis. Sir spoke about (DEEP) D health elite enterprise programme which was launched to help the start-ups. Sir discussed some case studies which focussed on structure and function pattern of brain, Doctor driven home based care, monitoring system which monitors the physical movement and finally about platform which enables personalized community-based interventions. In future plans he spoke about the revolutions coming in the field of Robotic Surgeries, Health concierge/Alexa which will be a technological solution in health monitoring. Sir concluded by raising a question that is whether this technology growth is a major disruption for the medical fraternity.

Q & A;

1. Is Artificial intelligence reliable in diagnosing?
2. What is the lifespan of any Biomedical equipment? What are the guidelines given in Indian scenario for disposal of any Biomedical equipment?

LEVERAGING DIGITAL MEDIA PLATFORMS FOR BUILDING HEALTHCARE BRANDS

Anchor- Prof. Dr. Shreeram Gopalkrishnan
Director, SCMC, Pune.

Dr. Shreeram started with how the Digital Media platforms helps in building the healthcare brands. He asked Ms. Ankita Wadhwa:

How Digital Marketing plays a pivotal role in branding the healthcare setup.

She replied that creating an online brand can be one of the way, advertising is the money horse, the more you invest the more you get, and word of mouth won't help much.

Next question to Apoorva:

How is the service delivery at hospital ground is done?

She replied that branding is totally different when it comes to hospital setup. She said she has to twin with different departments and plan a more efficient process.

- Reviews of Online applications like Practo are very high. Mostly because of the way they are entertained and answered.

She replied that it's all about positive image building.

- Dr Shreeram spoke about organic search which determines the reality in the market and inorganic search is where money is given to put the organisations on the top of the search.

Ms. Ankita Wadhwa:

- **How organic or inorganic activities are planned?**

It depends on the requirement. The activities are planned as per the specific requirements of the client or common people.

Next question to Apoorva:

- **How do you manage entire patient journey and how do you generate and manage the footfalls in the hospital?**

We focus a lot of patient's experience. It makes the process easier for the client and make their journey easier and comfortable. Marketing campaigning are used to generate and manage footfalls in hospital. Hospital also creates digital foot prints. Pay ads are done. Word of mouth is also most beneficial.

Ms. Ankita Wadhwa:

- **Are marketing strategies misleading the consumers regarding the products?**

She submitted that advertising should not misguide the consumer but inculcate the truth along the branding strategies.

Next question to Apoorva:

- **What is the role in insurance business?**

We build a lot of good relationship through various initiatives through marketing. For payment we make it an easy process. We streamline the payment process. We focus a lot on (TAT) turnaround time.

- **How influencers play a big role in our life?**

They do it to become thought leaders and not advertising. Doctors are understanding the importance of building a brand.

- **Question:** Marketing of healthcare products by celebrities should be banned as they have no knowledge about the products. Marketing should be a big no in medical field.

- **How can a doctor be ethically or legally charged for advertising?**

As per MCI guidelines a notice can be given about change of doctor or area of practice. Talking about a case is prohibited but imparting information to masses is acceptable. For younger doctor's digital media is a great platform to showcase their expertise or coming in picture.

MINDFULNESS FOR HEALTHCARE PROFESSIONALS

Dr. Rajendra Barve

Consultant Psychiatrist, Parivatan: The Turning Point.

Dr Barve started the session by talking about the importance of Mindfulness for healthcare professionals. Sir has taken an activity for all the audience. He spoke about what is mindlessness state. And explained that mindfulness is used to bring us out of mindlessness. Mindfulness is getting aware about your feelings. As there are so many distractions, no excitement and joy in work loss of job satisfaction specially in medical professional's life and that is where mindfulness plays a vital role. He explained that mindfulness is simple but it is not so easy. He explained that being mindful requires the person to attend the awareness about the self. He concluded by saying that mindfulness relieves chronic pain, reduces anxiety, decrease stress, calms the body, integrates emotions and resolves childhood trauma. It's not a matter of letting go you would if you could. Instead of **'let it go'** we should probably say **'let it be'**.