digitalhealth



Advancing patient engagement: the role of AI and data

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## **Chair: Stacey Hatton**

CNIO University Hospitals of Derby and Burton FT

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#AIDATA23

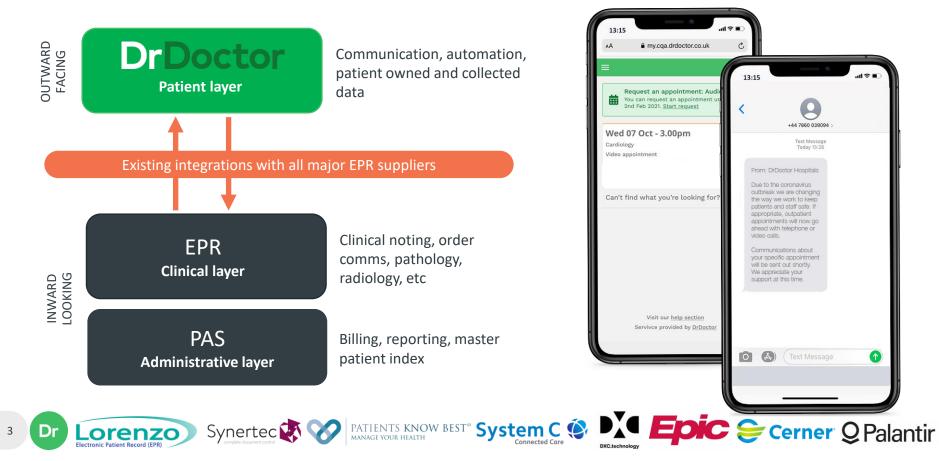
# DrDoctor

# Milking the model

Building new products from existing models



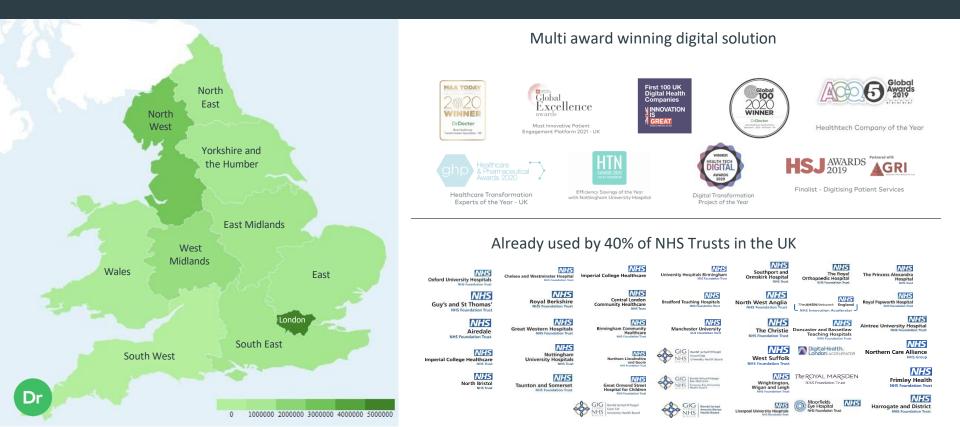
# The Complete Patient Layer



Text Message

Today 15:26

# DrDoctor is already used by 21M patients across 60 leading providers

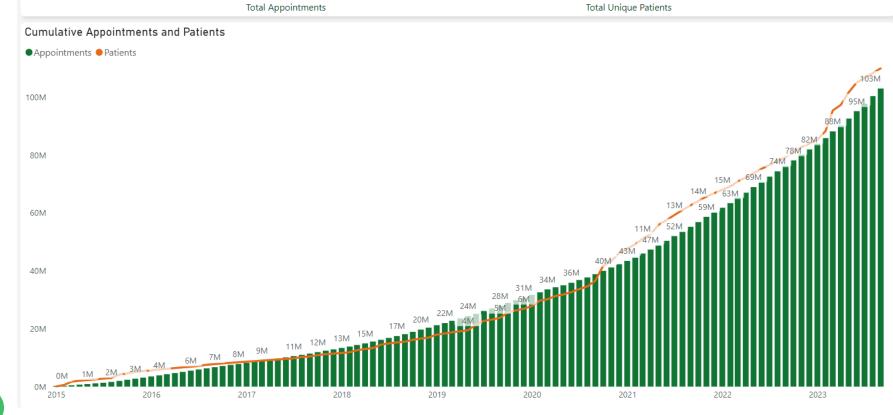


### Cumulative Appointments and Patients

# 103M

24M

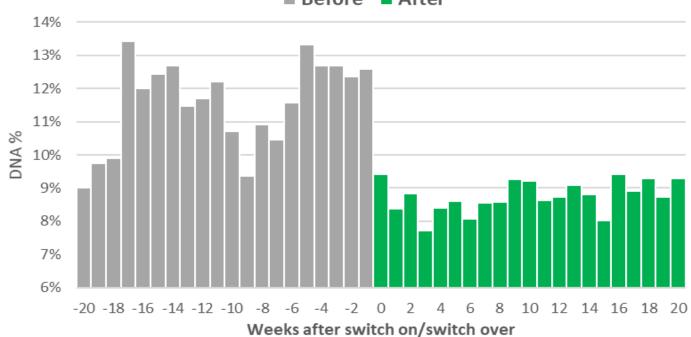




5 **Dr** 

# Utilising Al Across our product stack

# **Sending reminders reduces Did Not Attends**



■ Before ■ After

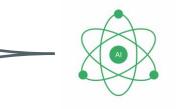
# How does the model work?

#### **Example Features**

- Days since last booked
- Specialty
- Day of the week
- Reminders enabled
- Contact details up to date

- # of previous appts
- # of previous DNAs
- # of previous cancellations

 Appt format (eg. Video, phone, etc)

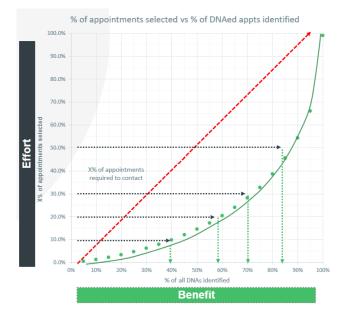


The prediction is run against → the **patient** within their booked appointment

The model is made up of 42 features

# **Can we Find DNAs?**

### DNAs Found across each Score Decile (300,00 appointments / Decile)



The top decile of scores caught 40% of missed appointments.

The top 2 deciles caught nearly 60% of them.

So, rather than randomly contacting 60% of patients, we just need to focus on the top 20% highlighted by our model.

\*Data aggregated across all trusts like with DNA Prediction.

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# The interventions



We have a model that can effectively identify appointments that are likely to DNA. This model powers 2 interventions:



#### Intervention 1: Manual Calls

- A page powered by the DNA model in the Staff Portal used to prioritise calls for Confirmation Callers / Booking Teams
- Trusts set a threshold of patients that they want to contact, eg. Patients who are 60% likely to not attend their appointment
- Calls are made manually as normal, and the Confirmation Caller updates the contact status in the Staff Portal to log whether the patient has advised they will attend, has cancelled their appointment or has amended their appointment.

- A 'filter' that sits on top of existing 'extra' reminders.
- The DNA model highlights patients most likely to not attend their appointment, the Trust selects the threshold as in Intervention 1, and an automated SMS is sent out to high likelihood patients.

Intervention 2: Smart SMS Reminders

 This intervention is best either for Trusts who do not currently have both reminders switched on, have neither reminders switched on or who are looking to bring down what they are spending on reminders without increasing their rates of DNA dramatically.

# Intervention 1: Manual Calls List

#### **DNA** predictions ? Logout 📑 DrDoctor -0100% Q 11 March - 17 March 2022 📋 Booking team (1) 🔻 Status Prediction: 0% ()-Add status 🔻 Search appointments .... Patients $\sim$ Name 🛛 🔻 Hospital number Phone number Time & Date Clinic description Speciality Appt type Prediction Status aRe Setup 0799000000, Contacted Jane Garner 0000001 11 March, 09:00 am C-1AK11 Transplant Clinic Knight,AJ Cardiology 98% In person 0799000000 Reports Output Description (Contact Output Description) Griff Shepard 0000001 0799000000 11 March, 09:10 am C-1AK2C General Surgery Knight, AJ Cardiology In person 97% ÷ System C-1AKSC Surgical Care Practitioner Clinic Knight, with some extra content, Abdallah Cairns 0000001 0799000000 11 March, 09:20 am Cardiology 97% Left message In person and it should wrap Elora Adams 0000001 0799000000 C-1CC2A General Haematology Chang,C 97% 11 March, 09:30 am Cardiology Telephone Caille Blackwell 0000001 0799000000 11 March, 09:40 am C-1GS4C Stroke Medicine Subramanian Prof G Cardiology Telephone 80% Mariyam Coombes 0000001 0799000000 11 March, 09:50 am C-1MD4C Gynaecology Das,M Cardiology 80% Telephone Nadeem Higgins 0000001 0799000000 11 March, 10:00 am C-1MG3R RADIOTHERAPY PATIENT Griffin.M Cardiology Video 80% Kia John Mccormack 0000001 0799000000 11 March, 10:10 am C-1SR10 Kingsmill H/D Nephrology Roe,S Cardiology Video 75% Rochelle Ramos 0000001 0799000000 11 March.10:20 am C-2AB1C Respiratory Medicine Binnion.A Cardiology 66% In person Glyn Bowden 0000001 0799000000 11 March, 10:30 am C-2JBTC Post Critical Care Follow Up Telephone Cl Cardiology In person 66% << 1 2 3 4 5 >>> Rows per page 10 🔻 1 to 10 of 198

Dr

# £7m a month opportunity across our clients..



Even a 0.37 pc.pt reduction in DNA across our client base (~23m appointments a month) is 60k additional outpatient appointment or £7,100,000 at a blended tariff of £120...

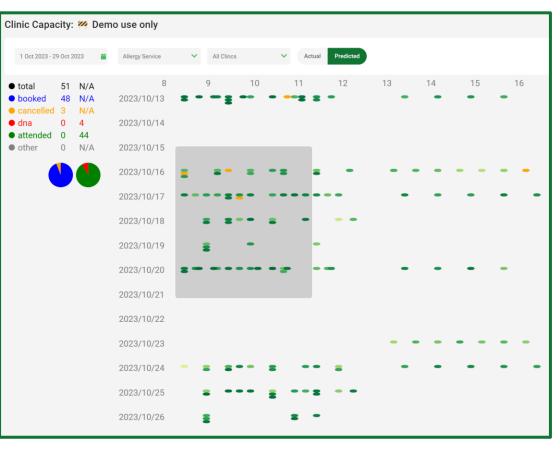
Next step is automated calls

All appointments

# **Intervention 2: Smart SMS reminders**

Notification Settings						
Appointment confirmation	On	Send patients confirmation when appointments are booked, cancelled or rescheduled				
Reminder	On	Send patients reminders before their appointments				
Reminder days notice	9 ~	Days prior to appointment (recommended 1 · 3 days)				
Extra reminder	On	Send patients an extra reminder before their appointment				
Extra reminder days notice	14 ~	Days prior to appointment (recommended 7 - 14 days)				
DNA prediction extra reminder		Our AI model will predict the likelihood that each appointment has to DNA. You can set the threshold to only send extra reminders to those most likely. Learn more				
% of appointments	35	% of appointments to receive a extra reminder				
Confirmation and reminder int	Iro	Preview 0				
Confirmation and reminder en		at DrDoctor Unreal Hospital Text CHANGE for alternatives, CANCEL to cancel				
	70	For queries call 02089999999				
		Characters: 116/1377, Fragments: 1, Estimated cost per SMS: 1.9p				

# Predicting true clinic capacity to book efficiently



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## Thanks! Any questions? @twhicher





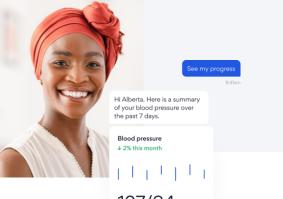
Using conversational AI to support long-term condition management.

lan Wharton Founder, CEO



Mary's most problematic symptom is chest tightness.

Her adherence rate over the last 30 days is 78%.







### aide

#### Patient platform

Improving multi-condition self-care with medicine optimisation, monitoring and education.



You have recorded your peak

flow a total of 12 times in the

past 7 days. Your most recent reading is 425 L/min.

>



#### Inhaler technique

Using the correct inhaler technique will help you manage your asthma symptoms well and reduce the risk of side effects.

Peak flow ↑ 3% this week

#### 416 Your peak flow has increased by

Coming up next	
Measurement Blood pressure	

Hi Julia,

#### Suggested quick actions

Show me inhaler technique Symptom check-in

#### Peak flow log

12/14In the past 7 days, you have recorded your peak flow 12 times out of 14.

Record my peak flow

Morning, Alberta. It's time to take 2 puffs of your Beclometasone inhaler.

I can't right now I have now taken this I have already logged this

#### **Clinician platform**

Improving clinical decision-making with realworld patient data and insights.

<		Julia Adai	ms	Female · 64	Asthma						Logou
Overview		N	/ledicine	es							Utili
Medicines			Ð	Julia stops	taking ł	ner preventer	inhaler as	she doesn't t	hink she nee	ds it.	~
Measurem	ents										
Symptoms			$\bigcirc$	Her reliever	inhaler	use is more	than usual.				~
Patient det	ails										
		R	egular n	nedicines							Last 30 day
			Average	e adherence		Times skippe	d	Reasons for	skipping		
			73	<b>%</b> ↑ 5%		6 / 48		🚺 I do	n't think I need it	•	+2
			Adhere	nce over time (S	%)					↑ 29	% this mont
			100			•					
			75		/	$\frown$				/	

## Meeting the complexity of patient engagement at scale with natural language.

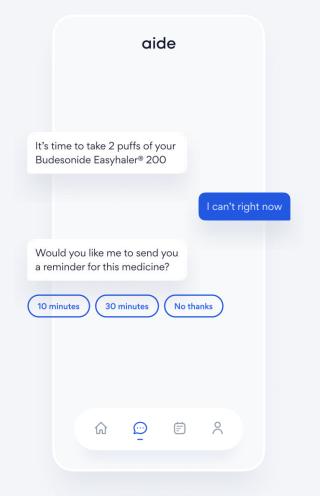
Aide has short, daily conversations with patients to help them adhere to their medicines, capture structured monitoring and improve their levels of health literacy.

#### Designed for comorbidity

Asthma, type 2 diabetes and hypertension today. Building support for top-10 conditions.

#### Safe, structured pathways

Aide conversations are clinically designed and do not diagnose or suggest prescription changes.



Proven patient impact. Achieving 75% average adherence in patients with asthma or type 2 diabetes in NHS England pilot.



Adherence % over time Most-improved patient, aged 71, prescribed beclometasone twice daily



#### 15 seconds or less

Time it takes for patients to record symptoms in Aide.

70% after 30 days

Number of patients still using Aide every day.

#### 71 years old

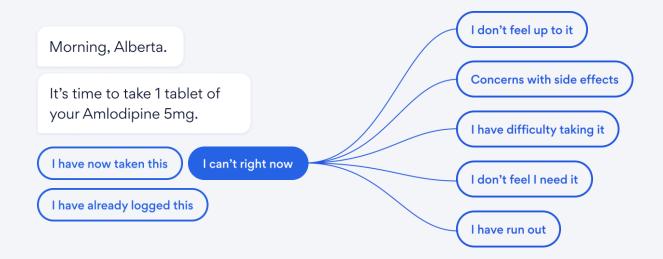
Oldest user of Aide, with a median user age of 61.

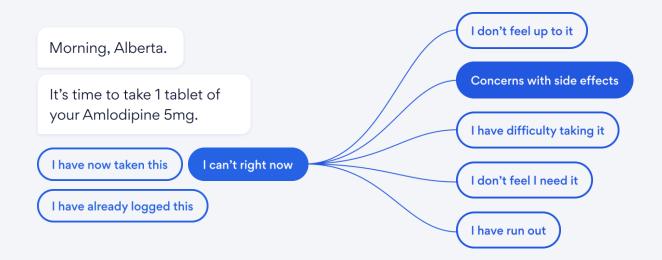
#### Rural, ageing, hard-pressed

Average area classification of patients in the pilot.

Morning, Alberta.
It's time to take 1 tablet of your Amlodipine 5mg.
I have now taken this I can't right now
I have already logged this

Morning, Alberta.
It's time to take 1 tablet of your Amlodipine 5mg.
I have now taken this I can't right now
I have already logged this







Sorry to hear that, Alberta.

In a few words, let me know how you feel after taking your Amlodipine 5mg.

Headaches for a couple of hours after taking it

Severe

Would you say this side effect is mild, moderate or severe?

Moderate

Mild

3/4 Do you ever stop taking your medicines if you feel ill?



#### 4/4

When you feel like your condition is under control, do you sometimes stop taking your medication?



41% of patients told Aide they stop taking their medicines when they feel that their condition is under control.



Research Report

# It's only a computer: Virtual humans increase willingness to disclose

Gale M. Lucas <sup>a</sup>, Jonathan Gratch <sup>a</sup>  $\stackrel{>}{\sim}$  🖾, Aisha King <sup>b</sup>, Louis-Philippe Morency <sup>a</sup>

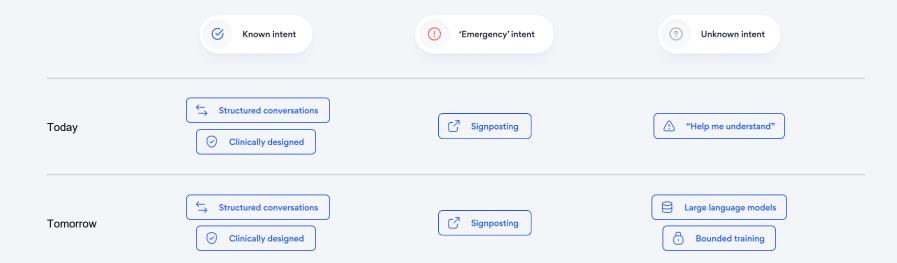
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https://doi.org/10.1016/j.chb.2014.04.043

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#### Conversational AI approach in Aide



- $\rightarrow$  ian.wharton@aide.health
- $\rightarrow$  @aidehealthco

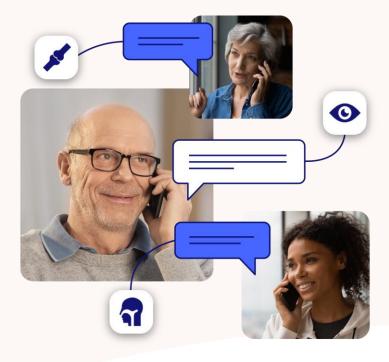


# Autonomous Telemedicine

### Dr Ernest Lim

Medical Director, Ufonia

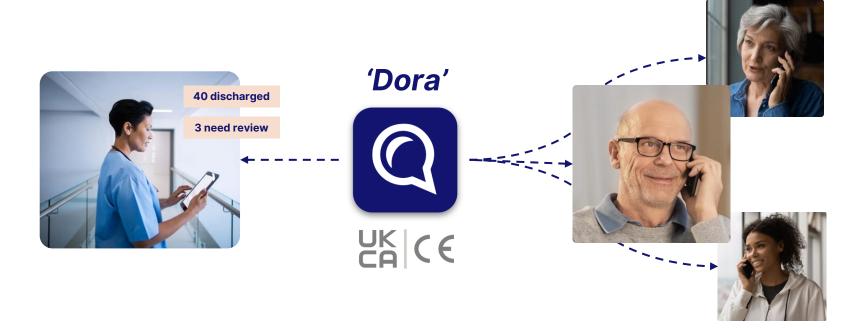
PhD Candidate, Computer Science, University of York





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### We use AI to automate routine clinical conversations...





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We aim to allow clinicians to work at the 'top of their licence'...



Unlimited Scale

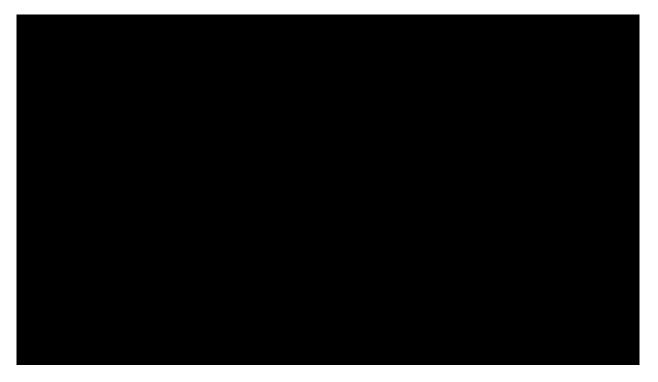


Clinically Validated



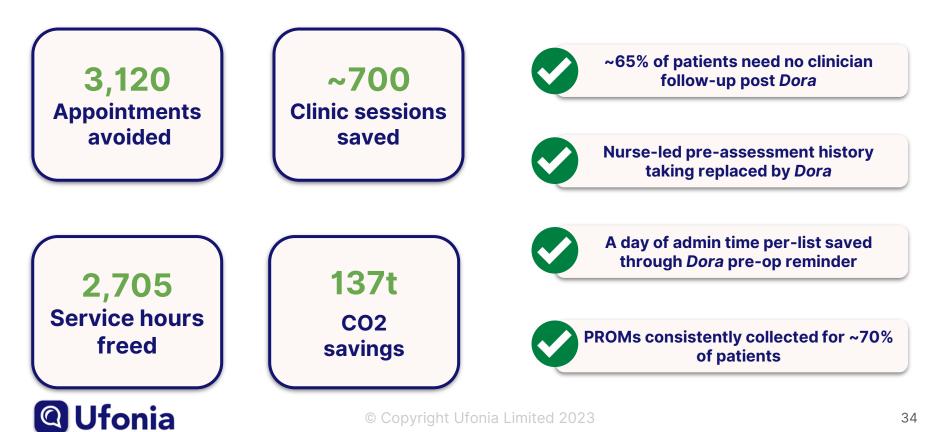


### Dora demo...

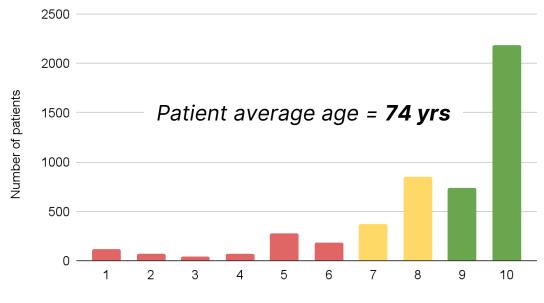




### Dora is already making a tangible impact on high-volume pathways...



### Most importantly patients give excellent feedback...



Net-Promotor Score

#### "Well it was unbelievably efficient"

"The questions are **simple questions**... everything's easier to answer"

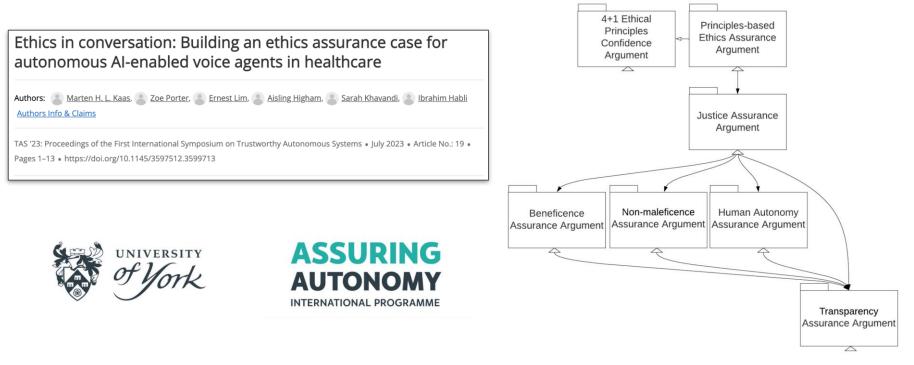
"Very clear, very easy, very straightforward"

*"It was much much easier than I thought it would be"* 

"I was quite satisfied... **everything was explained** to me and I knew what to expect when you called"

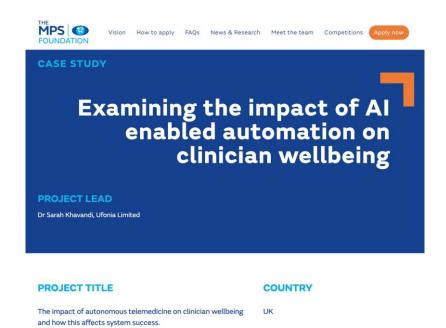


# Using conversational AI for healthcare presents safety and new ethical challenges...





### And the impacts it may have on professionals' activities...



https://www.thempsfoundation.org/case-studies/examining-the-impact-of-automation-on-clinician-wellbeing



### Thank you to our amazing collaborators...



#### NHS University Hospitals **Buckinghamshire Healthcare** Bristol and Weston NHS Trust NHS Foundation Trust

NHS Imperial College Healthcare NHS Trust

NHS **Oxford University Hospitals** NHS Foundation Trust

U P T 🔿 W N

EYE SPECIALISTS

NHS **Frimley Health NHS Foundation Trust** 









University of Southampton



Imperial College London





































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for further information please contact:

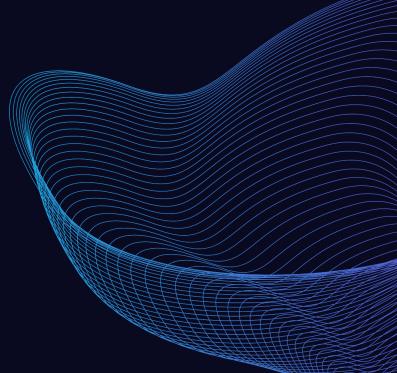
Dr Ernest Lim, Medical Director

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Using AI to increase clinic utilisation and drive equitable access to healthcare



# Patient Experience in England Today

Dr Mark Lomax- CEO- PEP Health

# Are patients listened to today?

Today, the standard for capturing and reporting on patient feedback are **surveys** and **patient forums**.

Why are these no longer effective?

### Inadequate

### Unrepresentative

#### **Poor VFM**

Surveys are top-down Often miss the essence of what matters most. Many voices do not engage with surveys Declining response rates Inconsistent methodologies Costly and timeconsuming to run effectively Limited insights



## PEP Health uses AI to provide deep insights into what patients think in real time across 400M lives

Our dashboards transforms millions of patient comments into measurable and comparable data that can be used to:

- Benchmark variation in care
- Improve quality
- Provide transparency to unmet needs
- Drive better outcomes
- Identify safety issues
- Listen to the entire population





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# How the Patient Experience Platform Works

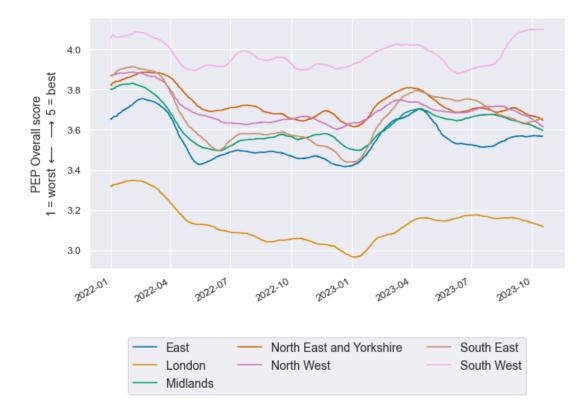
Through a rigorous application of data science and healthcarebased NLP, PEP Health generates actionable insights in real time.



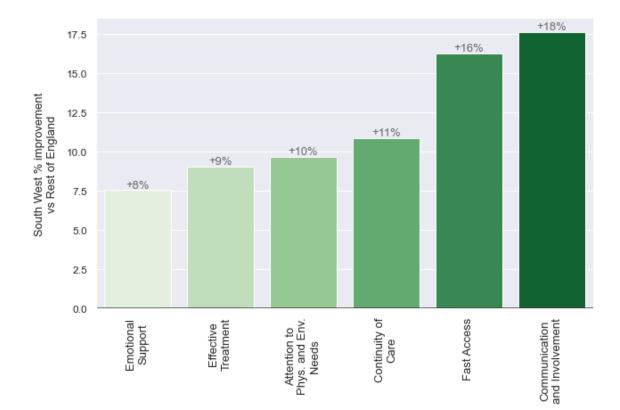


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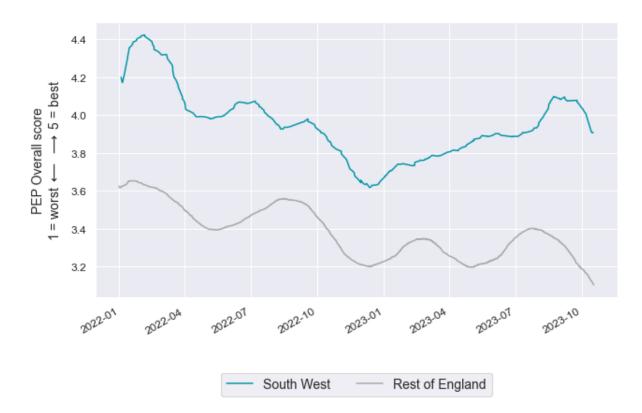
## National overview of Patient Experience, every NHS Acute Service, Jan 2022 – Oct 2023



## South West Acute Trusts deliver for patients across Access and Communication



# Spotlight on Maternity Services- South-West bucking the trend



Real-time listening to patients can support improved care delivery, understand what patient's value, drive transparency and hear more diverse voices

### **PEP Health insights can be used to target improvement**

- Identifies relative risks
- Provides actionable areas to target improvement
- Allows performance to be understood in multiple ways
- Enables benchmarking at multiple levels: between regions, trusts, locations and wards
- Standardises the performance of specialties across the country

# Thank you

enquiries@pephealth.ai

### Mark.lomax@pephealth.ai



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