HIMSS *Analytics*

2014 Mobile Devices Study

HIMSS Analytics

December 2014

Introduction

The use of personal telecommunication mobile devices, such as smartphones and tablet computers, is pervasive in the United States. To illustrate, as of January 2014, 58 percent of American consumers reportedly

Smartphones and tablet computers have the potential to transform the way in which clinician's access patient information.

had a smartphone while 42 percent had a tablet computer[1]. Use of mobile devices has also increasingly become a staple tool for businesses, including those in the healthcare sector. This growing interest and importance of mobile device usage is reflected in HIMSS Analytics' new Continuity of Care Maturity Model™ (CCMM)[2].

However, concerns abound regarding the ability to use smartphones and other mobile devices for accessing patient information. The securing of information accessed on mobile devices is a key concern as healthcare

organizations grapple with when deciding how to deploy these types of tools to their clinicians for patient use[3].

Nevertheless, if implemented strategically, the value clinicians could derive from these tools is extensive, impacting everything from a clinician's ability to access patient information to improve the cost, quality and experience of healthcare provided to patients.

As smartphones and tablet computers are relatively new tools to healthcare organizations, it is necessary to establish a baseline understanding of the presence and impact these technologies have in U.S. hospitals. By doing so, the market will have a better way to adjudicate the potential these tools have for U.S. healthcare providers and relevant vendors.

To establish this baseline, data from the September 2014 HIMSS Analytics® Database was paired with data from a survey conducted with physicians, nurses and other clinicians during October/November 2014. A total of 139 clinicians participated in this study.

---

[1] Pew Research Mobile Technology Fact Sheet.." Accessed November 25, 2014http://www.pewinternet.org/fact-sheets/mobile-technology-fact-sheet/

[2] For more information see Appendix A or http://www.himssanalytics.org/emram/continuity.aspx

[3] 3rd Annual HIMSS Analytics Mobile Survey www.himssanalytics.org

Contents

Executive Summary

The 2014 HIMSS Analytics Mobile Devices Study indicates that use of smartphones and tablet computers continues to grow in the healthcare industry. Leveraging the insights of 139 clinicians in conjunction with data from the September edition of the HIMSS Analytics® Database, the findings revealed that the number of hospitals using smartphones and tablet computers has been growing steadily over the past several years, both in terms of number of hospitals using the technology and in the average number of devices deployed throughout the hospitals.

According to the HIMSS Analytics Database, approximately one-quarter of US hospitals (28 percent) reported that smartphones are in use at their organization. On average, 169 devices are deployed per hospital. In comparison, 24 percent of US hospitals reported that tablet computers are in use at their organization, with an average of 37 devices deployed per hospital.

Indeed, tablet computers and smartphones appear to be currently used to supplement access of information via another method such as a desktop and/or laptop computer. According to the 2014 HIMSS Analytics Mobile Devices Study, two-thirds of clinicians in the study (68.3 percent) reported using both a desktop/laptop computer and a smartphone/tablet computer to access information.

The use of smartphones/tablet computers is beginning to yield a number of benefits. Clinicians reported that smartphones/tablet computers greatly enhance their ability to communicate with other clinicians and healthcare providers. They also reported that the use of these devices is providing them with a more positive work experience, both in terms of satisfaction with their jobs and work/life balance.

However, while clinicians reported leveraging mobile technologies for a multiplicity of tasks, there is still room for growth. For instance, while 69 percent of respondents indicated that they used apps to access clinical information, only 33 percent of respondents reported they believe they can access most or all of the clinical systems technologies they need via smartphones/tablet computers.

Finally, clinicians were optimistic that use of smartphones/tablet computers will positively impact the delivery of patient care. For instance, one-third of clinicians indicated that use of smartphones/tablet computers would create overall efficiencies in care, such as eliminating redundancies in care. One-third of respondents also indicated that use of these devices could have a positive impact on overall quality of care and care coordination. However, here too, there is room for growth, as a large portion of the respondents indicated that they were presently unsure as to the impact that the use of smartphones/tablet computers could have on the delivery of healthcare.

These findings suggest that there are several key areas that must be addressed in order to enhance the use of smartphones/tablet computers in US healthcare organizations. Clinicians and IT professionals alike must be assured that devices will provide clinicians with secure access to patient information. Additionally, technological challenges must be overcome. Clinicians have indicated that one of the top reasons they do not use smartphones and/or tablet computers is because their infrastructure does not support use of these devices. Finally, healthcare organizations need to evaluate their policies to ensure that they are not overly restrictive.

Appendix

HiMSS Analytics Continuity of Care Maturity Model

STAGE	Description
STAGE 7	Knowledge Driven Engagement for a Dynamic, Multi-vendor, Multi-organizational Interconnected Healthcare Delivery Model
STAGE 6	Closed Loop Care Coordination Across Care Team Members
STAGE 5	Community Wide Patient Record using Applied Information with Patient Engagement Focus
STAGE 4	Care Coordination based on Actionable Data using a Semantic Interoperable Patient Record
STAGE 3	Normalized Patient Record with Share Care Plans using Structural Interoperability
STAGE 2	Patient Centered Clinical Data using Basic System-to-System Exchange
STAGE 1	Basic Peer-to-Peer Data Exchange
STAGE 0	Limited to No E-communication

About HIMSS Analytics

HIMSS Analytics collects, analyzes and distributes essential health IT data related to products, costs, metrics, trends and purchase decisions. It delivers quality data and analytical expertise to healthcare delivery organizations, IT companies, governmental entities, financial, pharmaceutical and consulting companies. Visit www.himssanalytics.org.

HIMSS Analytics is a part of HIMSS, a cause-based global enterprise that produces health IT thought leadership, education, events, market research and media services around the world. Founded in 1961, HIMSS encompasses more than 52,000 individuals, of which more than two-thirds work in healthcare provider, governmental and not-for-profit organizations across the globe, plus over 600 corporations and 250 not-for-profit partner organizations, that share the cause of transforming health and healthcare through the best use of IT. HIMSS, headquartered in Chicago, serves the global health IT community with additional offices in the United States, Europe, and Asia.