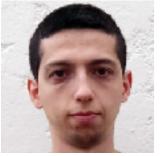
The Smart Hospital Living Lab

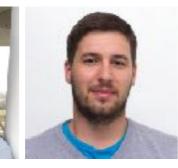
Prof. Vassilis Kostakos
School of Computing and Information Systems
University of Melbourne

Presented at University of Boston, 26 March 2021

















Jorge Goncalves

Eduardo Velloso

Gabriele Marini

Niels van Berkel

Chu Luo

Zhanna Sarsenbayeva

Jing Wei

Chaofan Wang



Tilman Dingler



Weiwei Jiang



Danula



Senuri Hettiachchi Wijenayake



Xiuge Chen



Simo Hosio



Simon Klakegg



Aku Visuri









Co-create with end-users

with stakeholders Ideas **Practical Application**

Evaluate & collect evidence

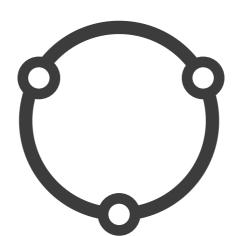
Develop & deploy prototypes

Explore

Smart Hospital Living Lab

Northern Health Royal Children's Royal Melbourne







University of Melbourne Computing Population Health



Department of Health and Human Services Government of Victoria

Expertise on Ubiquitous Computing & User-Centered Design



Interactive systems: hardware & software

Creating new technologies

Sensors, actuators, machine learning, user modelling, analytics

Real-world deployments

Smart Hospital Living Lab

Improve hospital operations

Safety: reduce errors

Efficiency: generate insights



Some ongoing projects



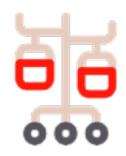
Smart pill box Identify pills using chemical signatures



Operating theatre tracking
Track patients/staff in & out
of operating theatres



Hand washing detection
Detect (and quantify) hand
washing in the hospital



IV line monitoring
Continuous identification of liquids/concentrations in IV line

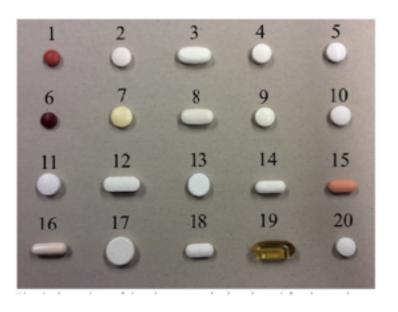


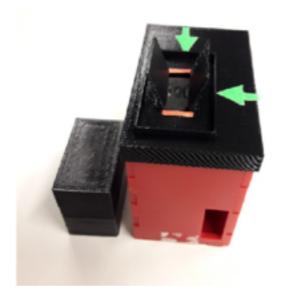
Smart pill box Identify pills using chemical signatures

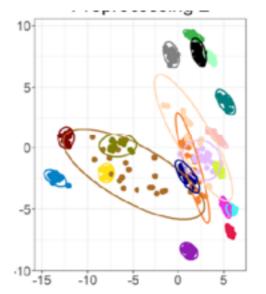


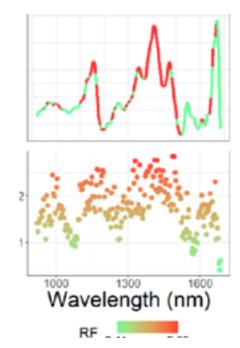


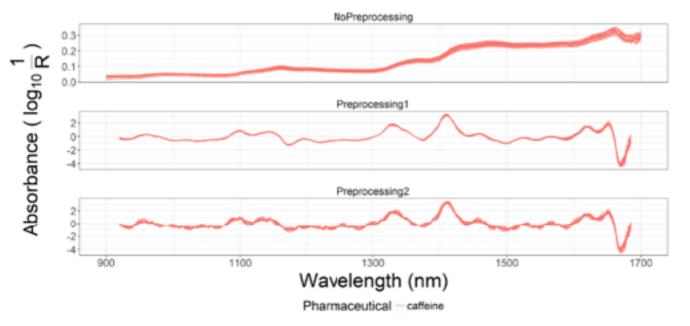


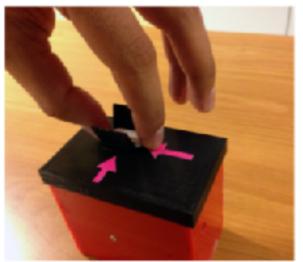








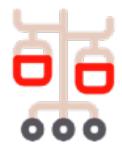




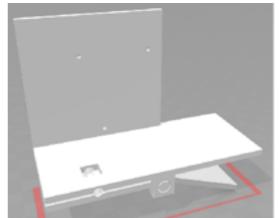








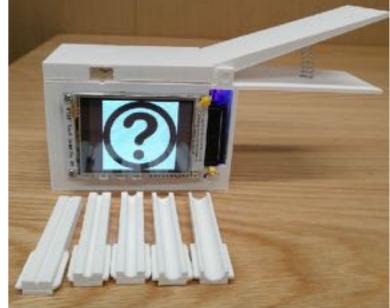
IV line monitoring Continuous identification of liquids/concentrations in IV line

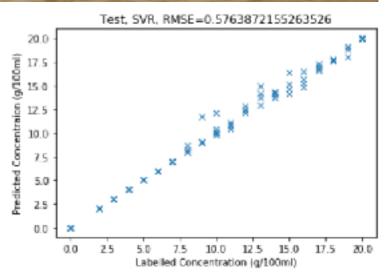


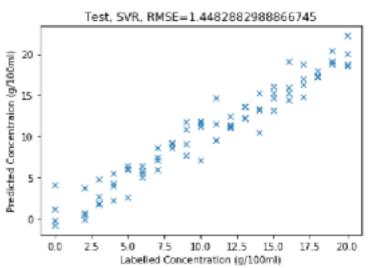






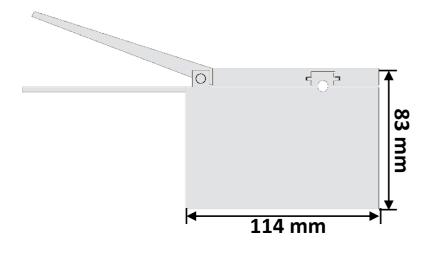




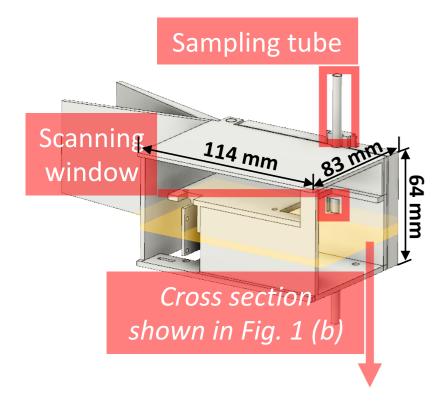


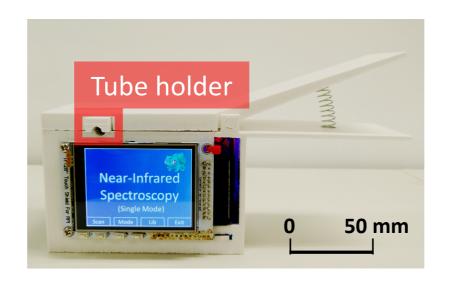


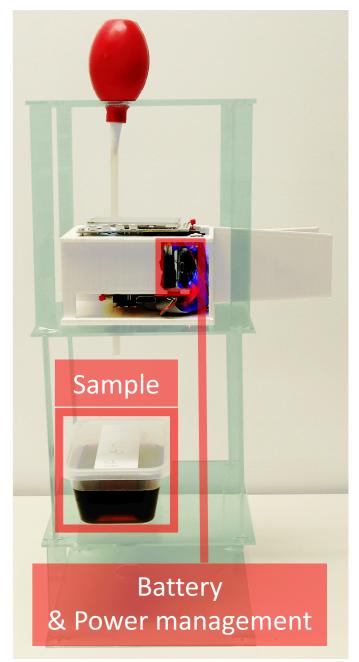


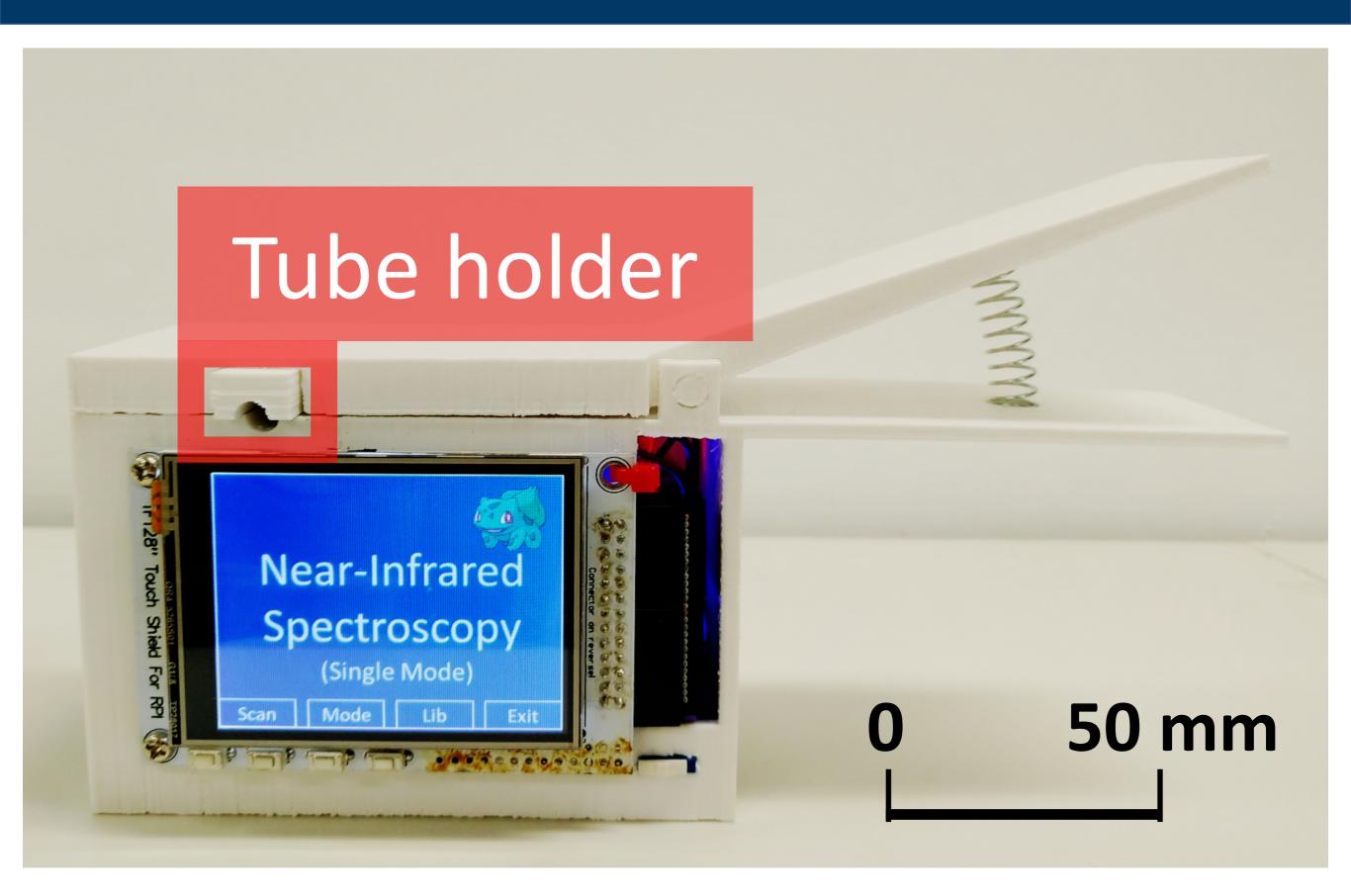




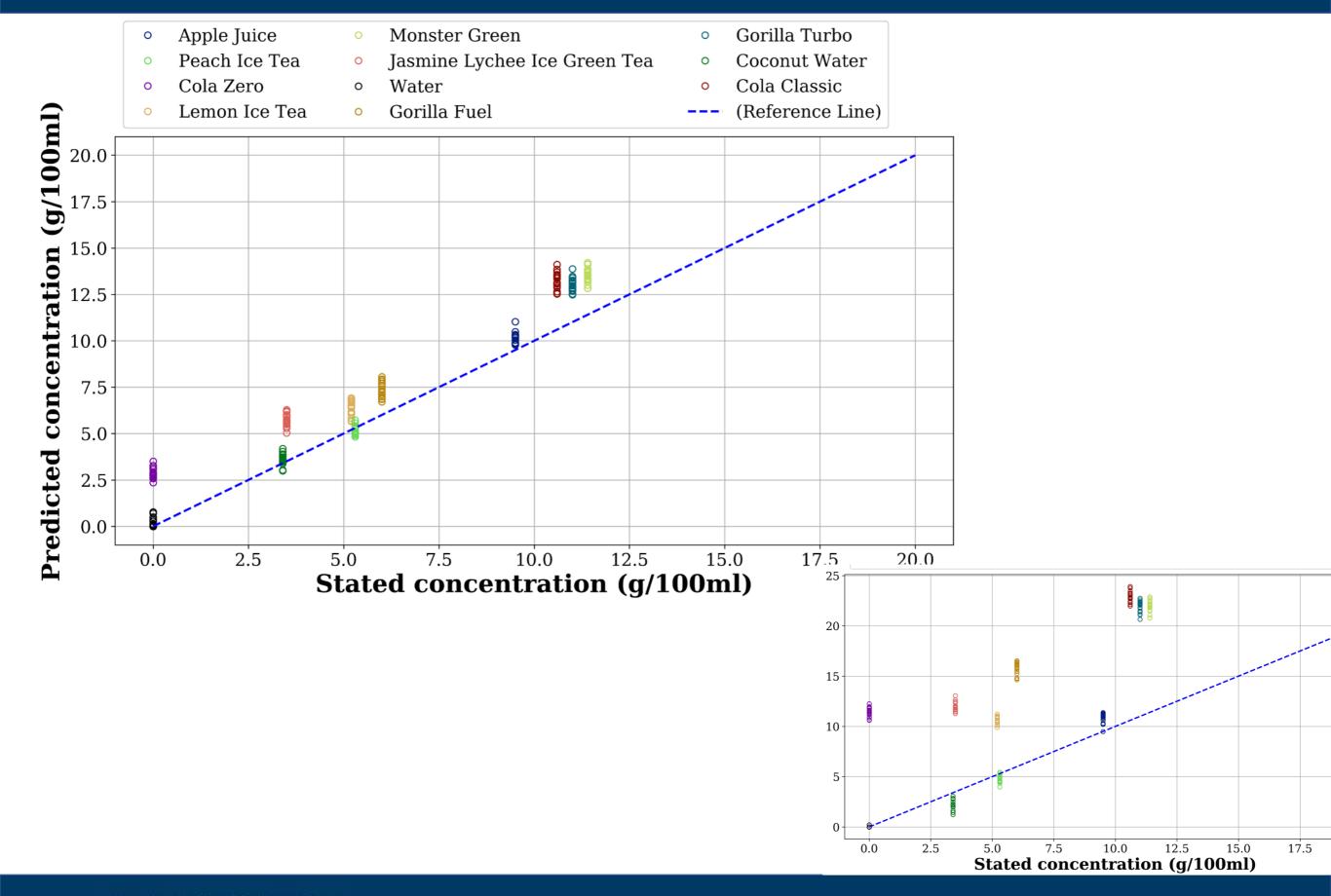


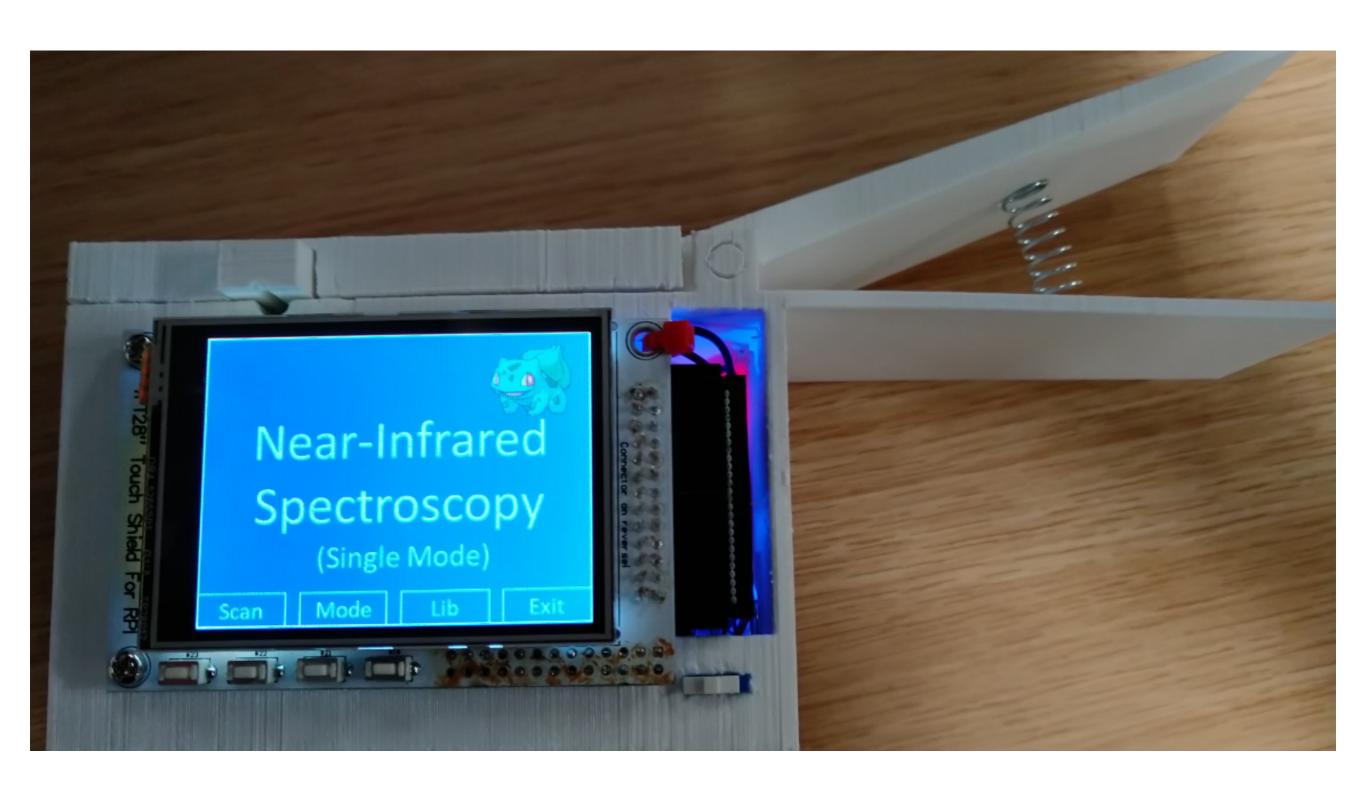










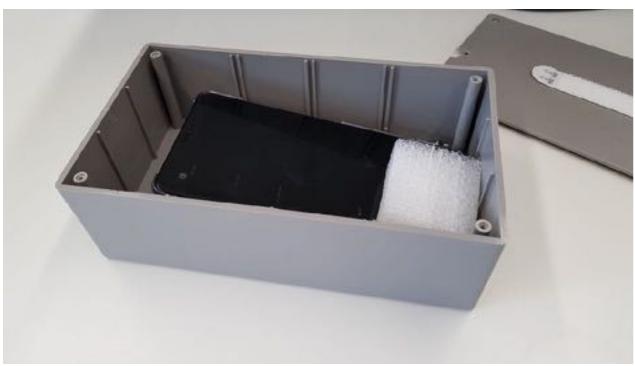


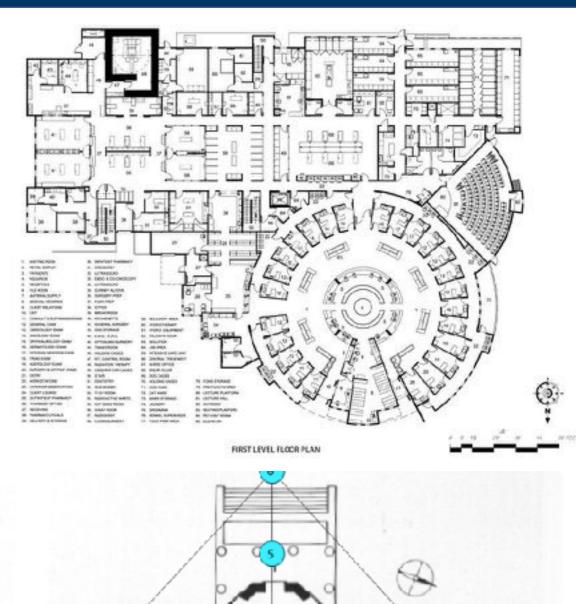


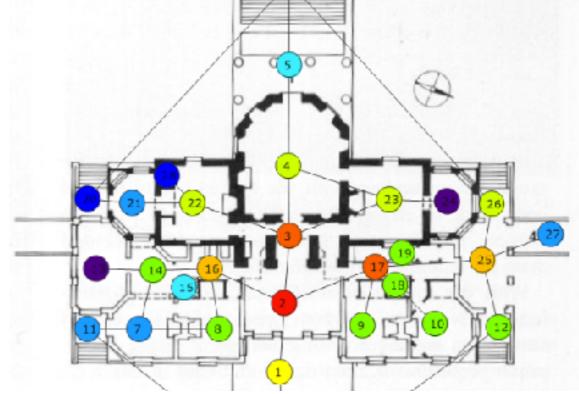


Operating theatre tracking Track patients/staff in & out of operating theatres







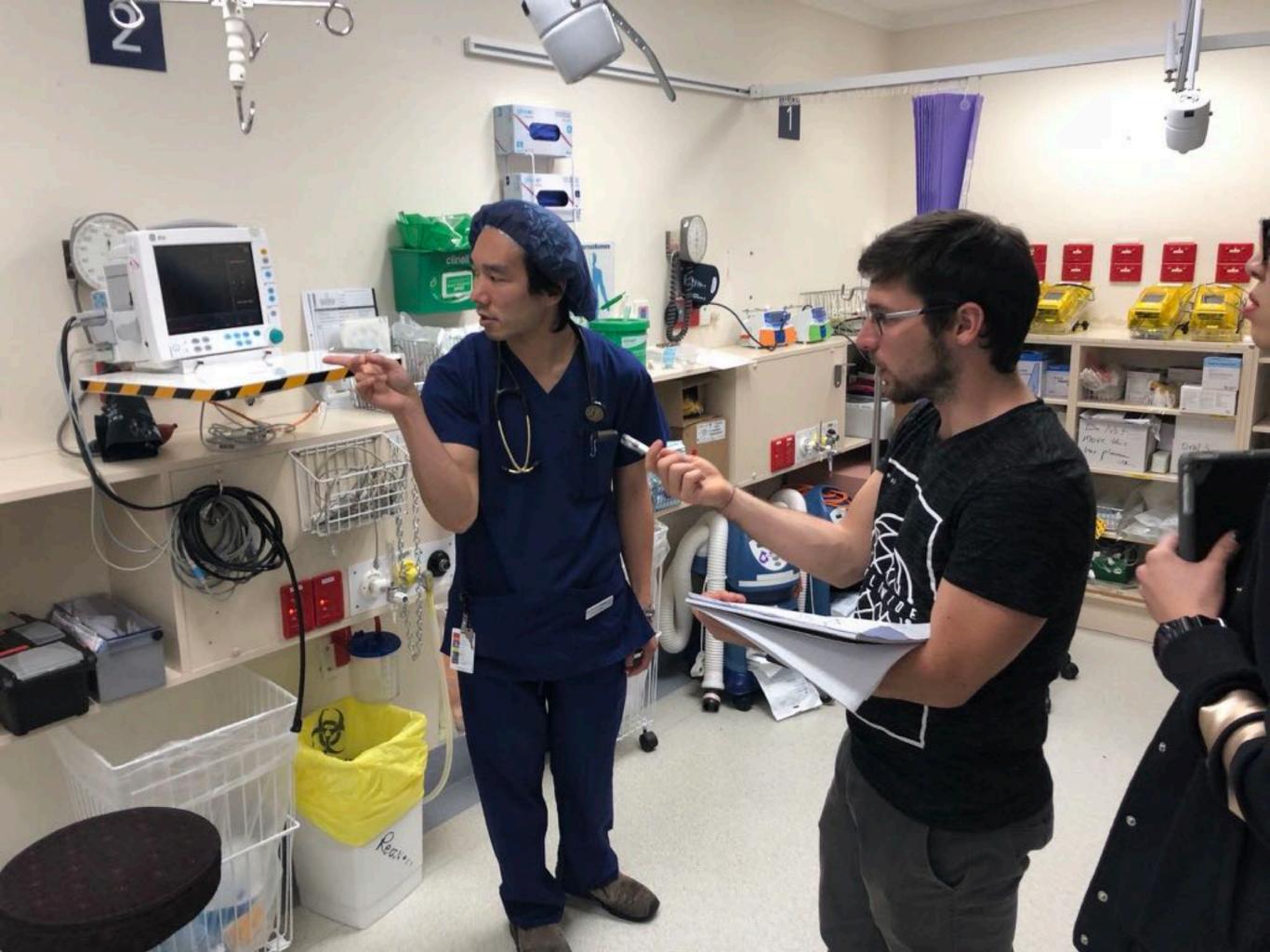












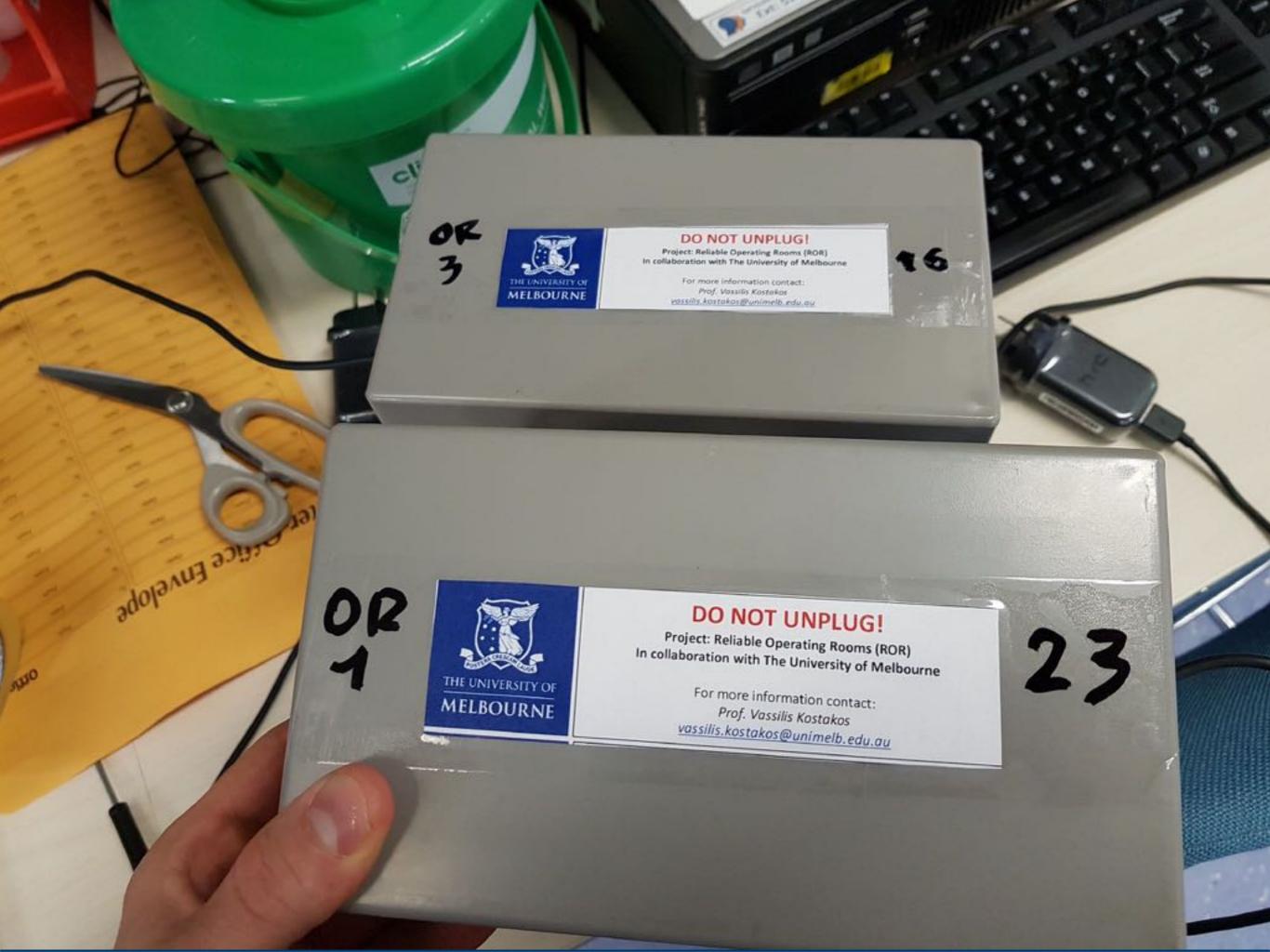


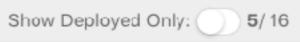




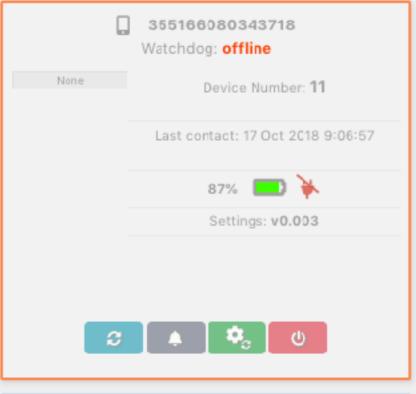


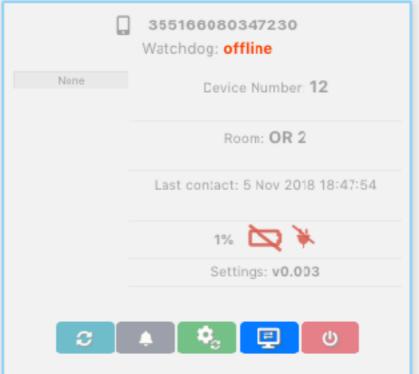


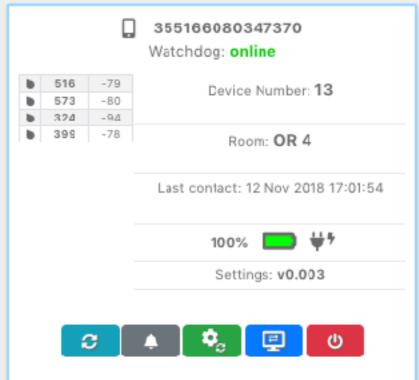


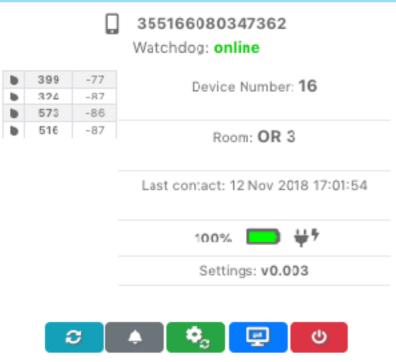


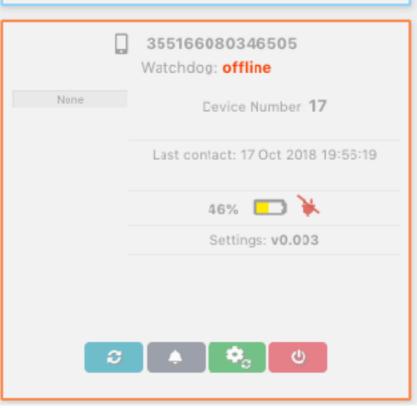
Devices

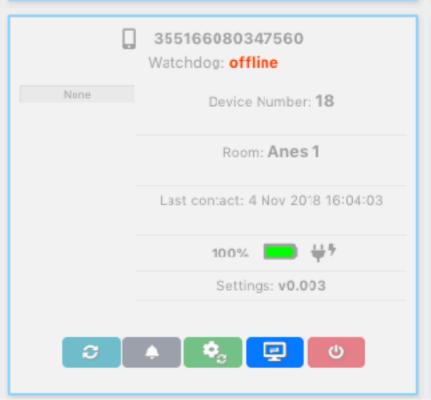


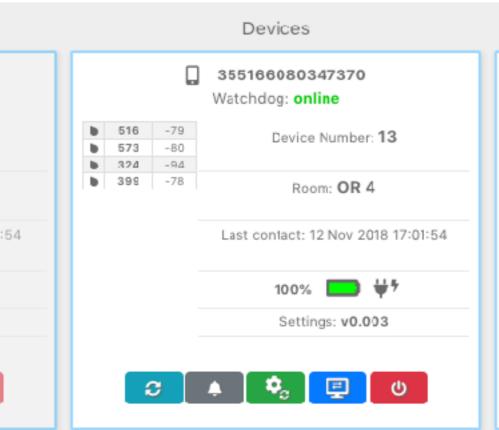


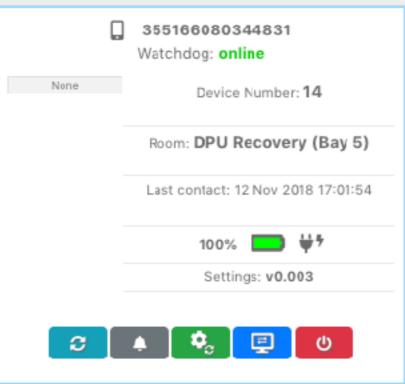


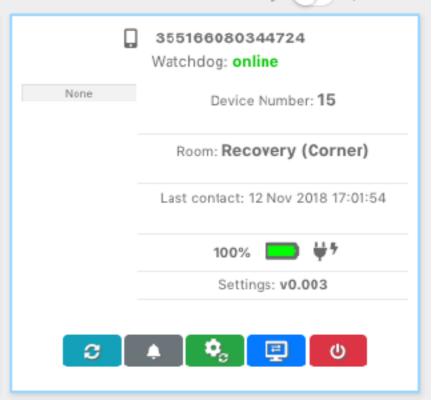






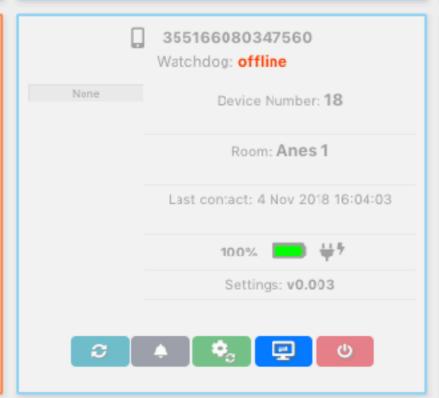






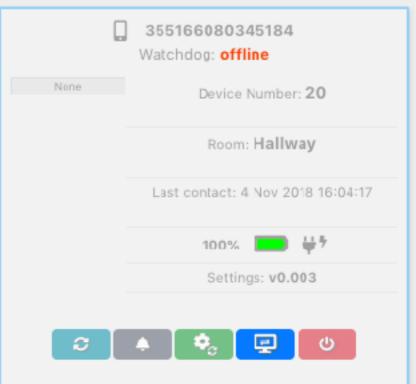
Show Avail. Only:

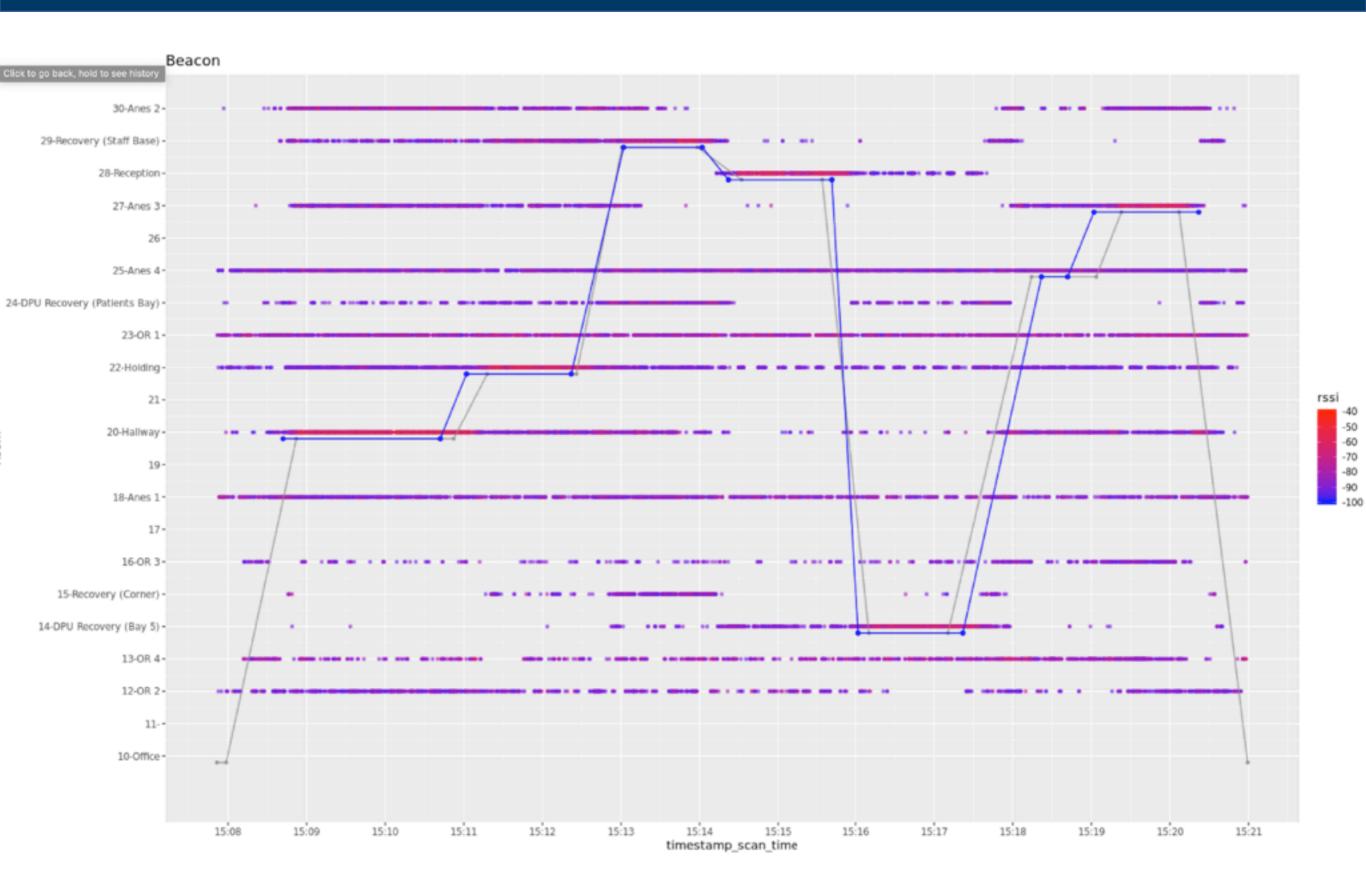
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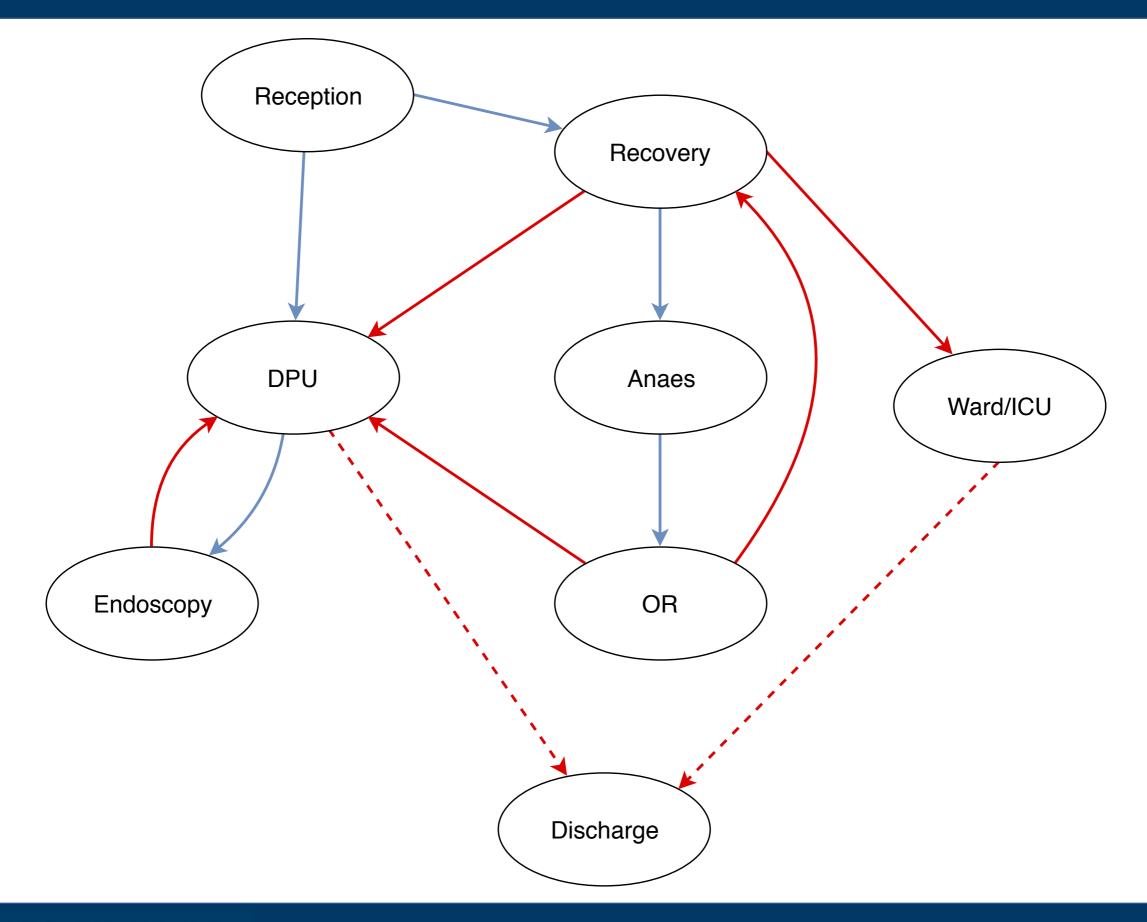
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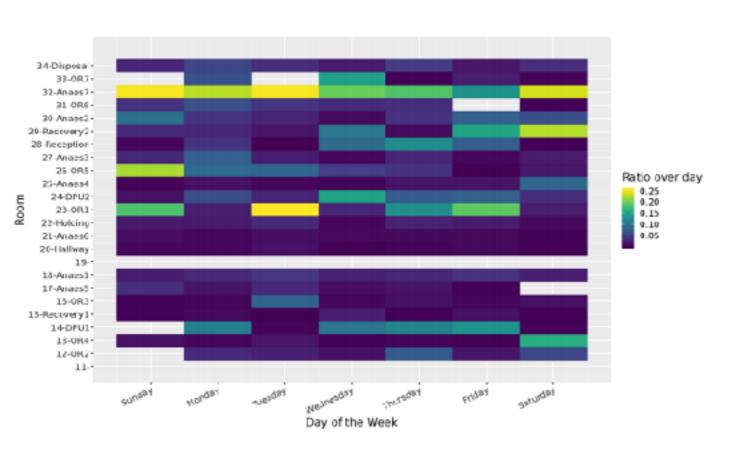


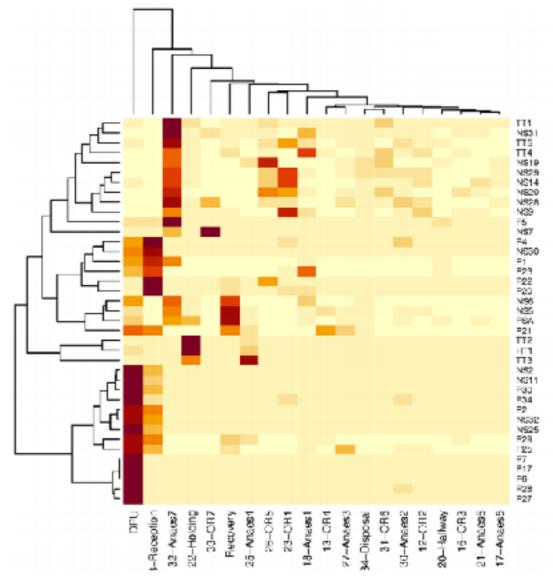
















Hand washing detection Detect (and quantify) hand washing in the hospital



apply enough stap to-cover all hand surfaces.





paim to pain with fingers



backs of fingers to opcosing pains with fingers interlocked



right paim over left dorsum

with interlaced fingers







rotational nutbing of left thumb clasped in right paint and vice versa.



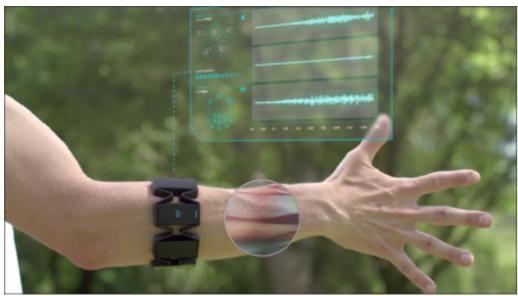


dry thoroughly with a single use towel use towel to tim off faucet

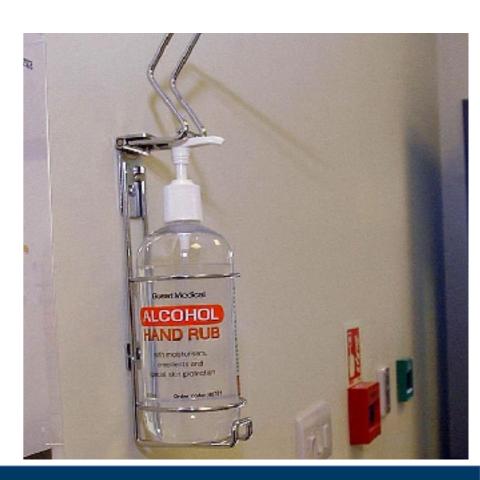


TOUGHING TOUGHING A PATIENT TOUCHING PATIENT SUHHOUNDINGS







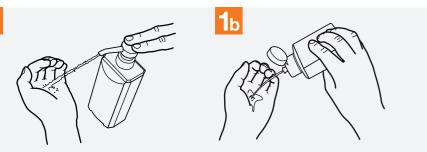




How to Handrub How to Handwash?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOIL WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUE





Apply a palmful of the product in a cupped hand, covering all surfaces;





Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Apply enough soap to cover

all hand surfaces:

Duration of the handwash (steps 2-7): 15-20 seconds

Duration of the entire procedure: 40-60 seconds

Palm to palm with fingers interlaced;



Rub hands palm to palm;

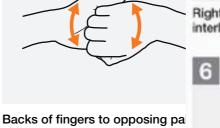
Backs of fingers to opposing palms with fingers interlocked;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Rinse hands with water;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



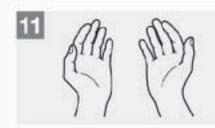
Once dry, your hands are safe.



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



Patient Safety A World Alliance for Safer Health Care

SAVE LIVES Clean **Your** Hands



Patient Safety

Clean Your Hands

How to handrub?

WITH ALCOHOL-BASED FORMULATION

How to handwash?

WITH SOAP AND WATER



Apply a palmful of the product in a cupped hand and cover all surfaces.



Wet hands with water



apply enough soap to cover all hand surfaces.



Rub hands palm to palm

backs of fingers to opposing

palms with fingers interlocked



right palm over left dorsum with interlaced fingers and vice versa



palm to palm with fingers interlaced



rotational rubbing of left thumb clasped in right palm and vice versa



rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa



rinse hands with water



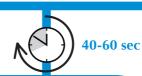
dry thoroughly with a single use towel



use towel to turn off faucet









...and your hands are safe.





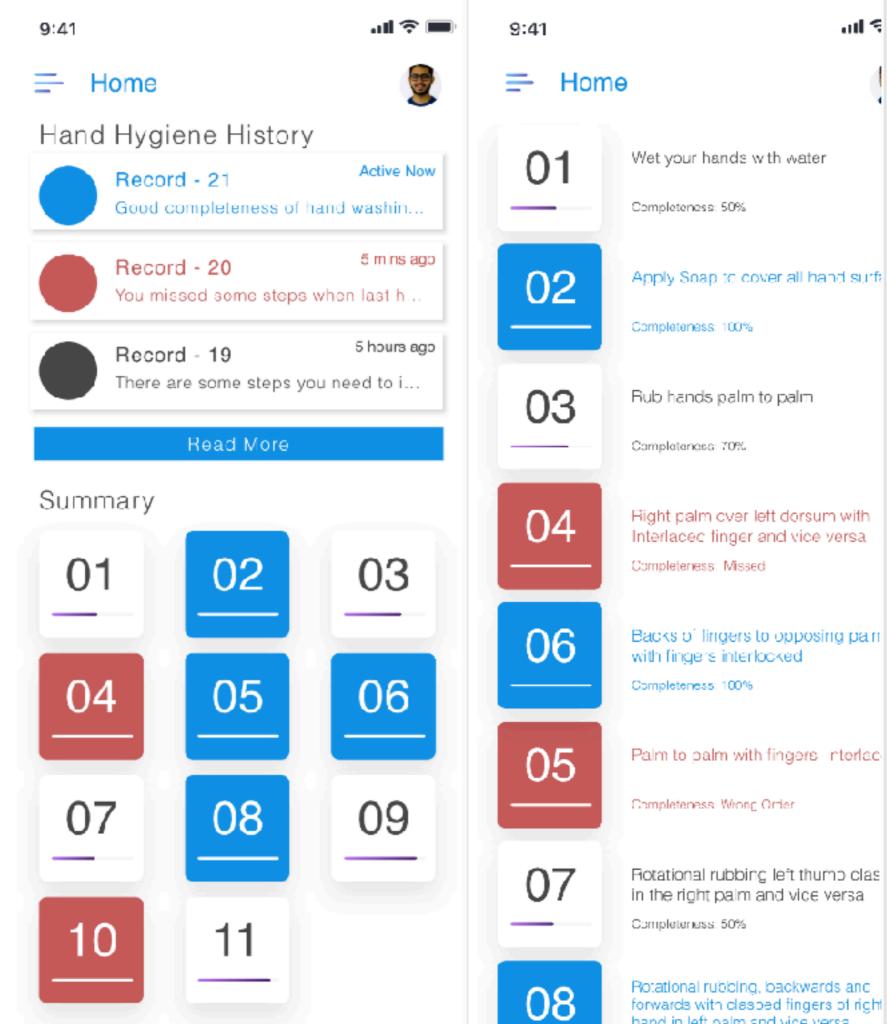






Upper Arm with Both Hands(smoothed with ecp)





9:41





교 중 📠

01

Wet your hands with water

Completeness: 50%

Description

This is the first step from the stancard hand washing process from WHO; however, it seems like you may need to prolong the curation of hand washing.

Standard Procedure



Explore Publish Funding Co-create Prototype **Evaluate Trials**





How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;

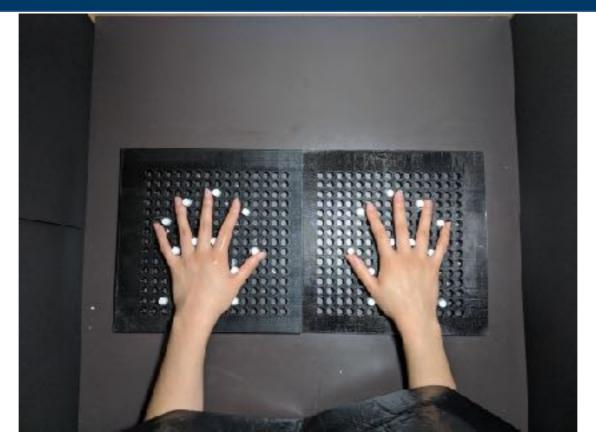


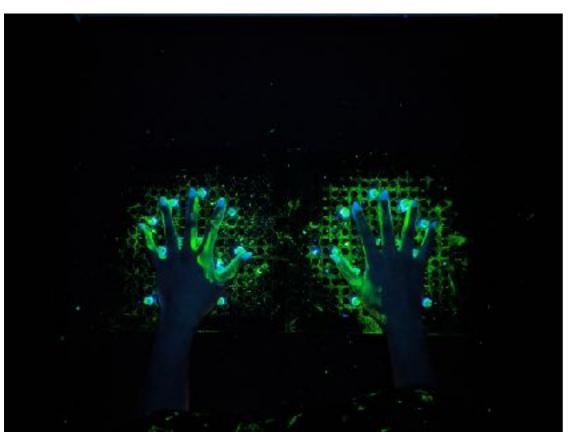
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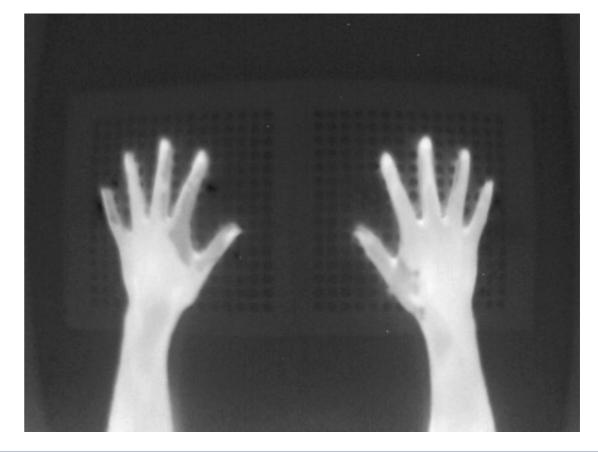


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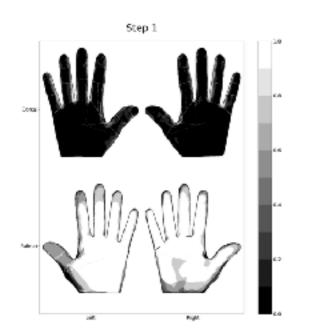


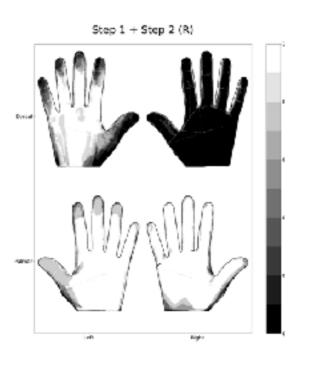


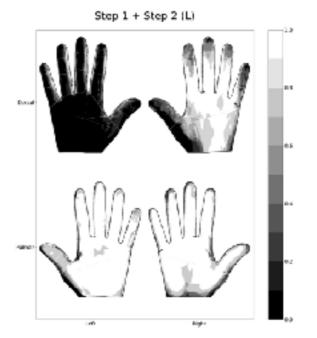


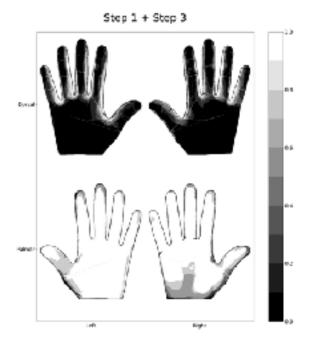




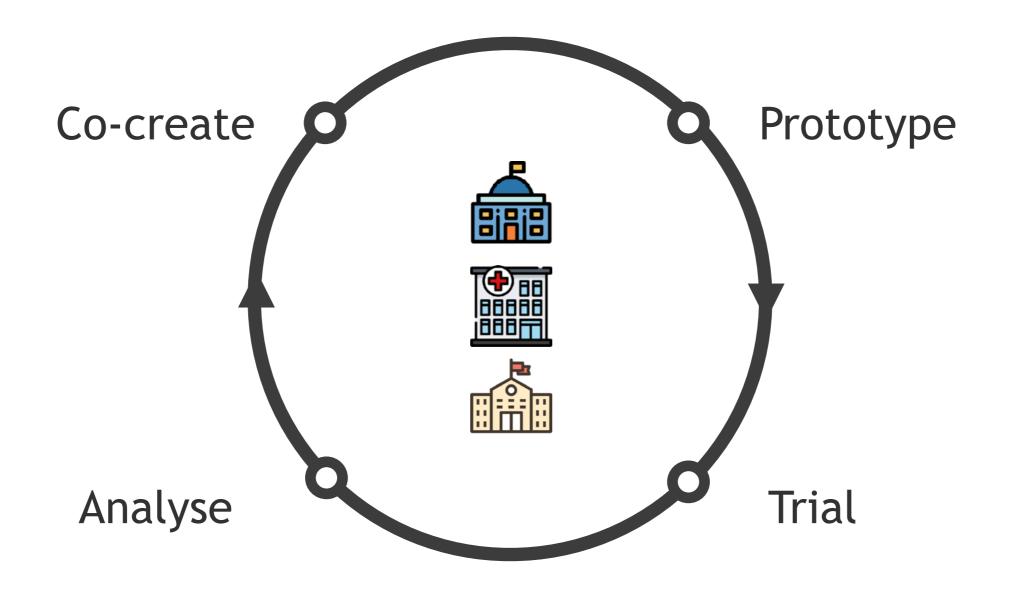








Living Lab: Continuous Innovation



Outcomes and benefits



Improved operations



Generalisable solutions



Pathway to funding



Establish critical mass



Innovation beyond hospitals

Lessons learned

- The focus of our work is not "owned" by medical experts
 - Good: we do not become "programers"
 - Bad: who drives this? Need support from higher management.
- This is a highly regulated space
 - Linking our work to a regulation makes it highly attractive
- Health funding can be very different from "science"
 - Attending dinner balls to attract donations
- Path to commercialisation?
 - After funding & trials
- Small seed funding is CRUCIAL to enable this work
 - You don't need millions to get things done
- How to make a contribution when solving others' problems?
 - Be selective about which problems you solve!
 - Strong grounding of work, compelling motivation.









The end beginning!

Prof. <u>Vassilis Kostakos</u> vassilis.kostakos@unimelb.edu.au

School of Computing and Information Systems
University of Melbourne