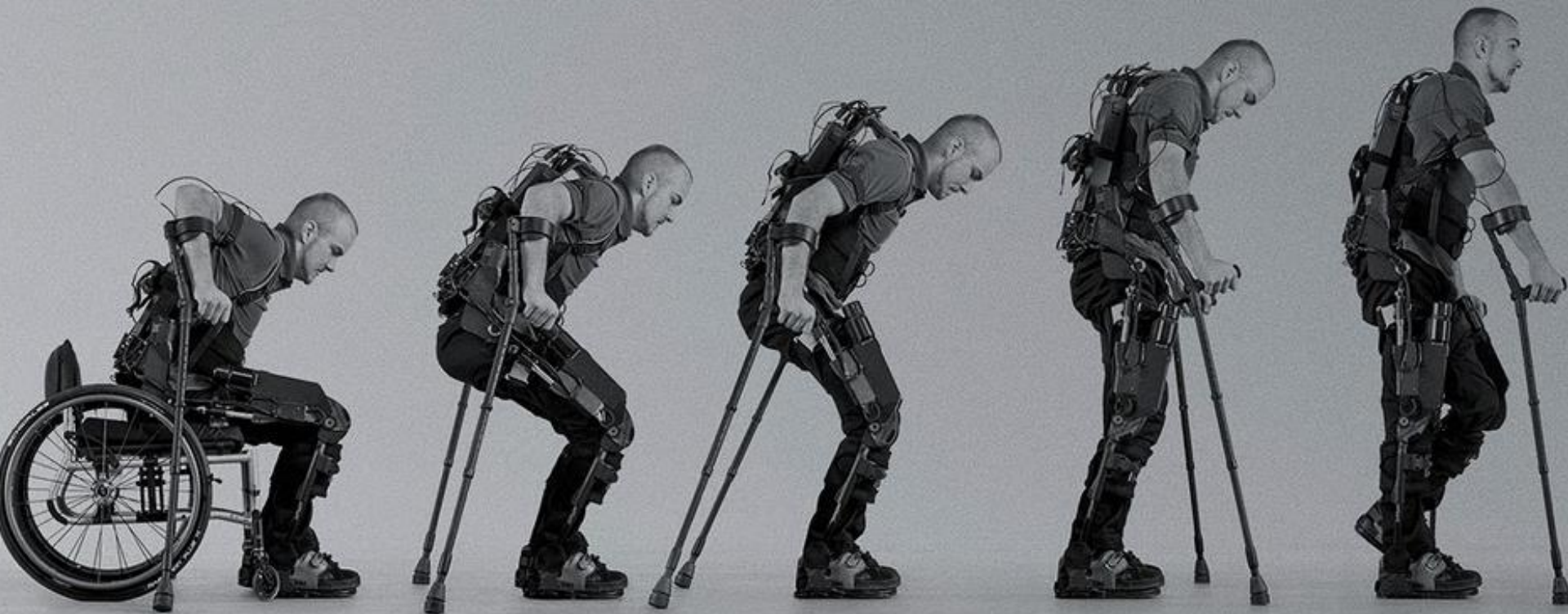


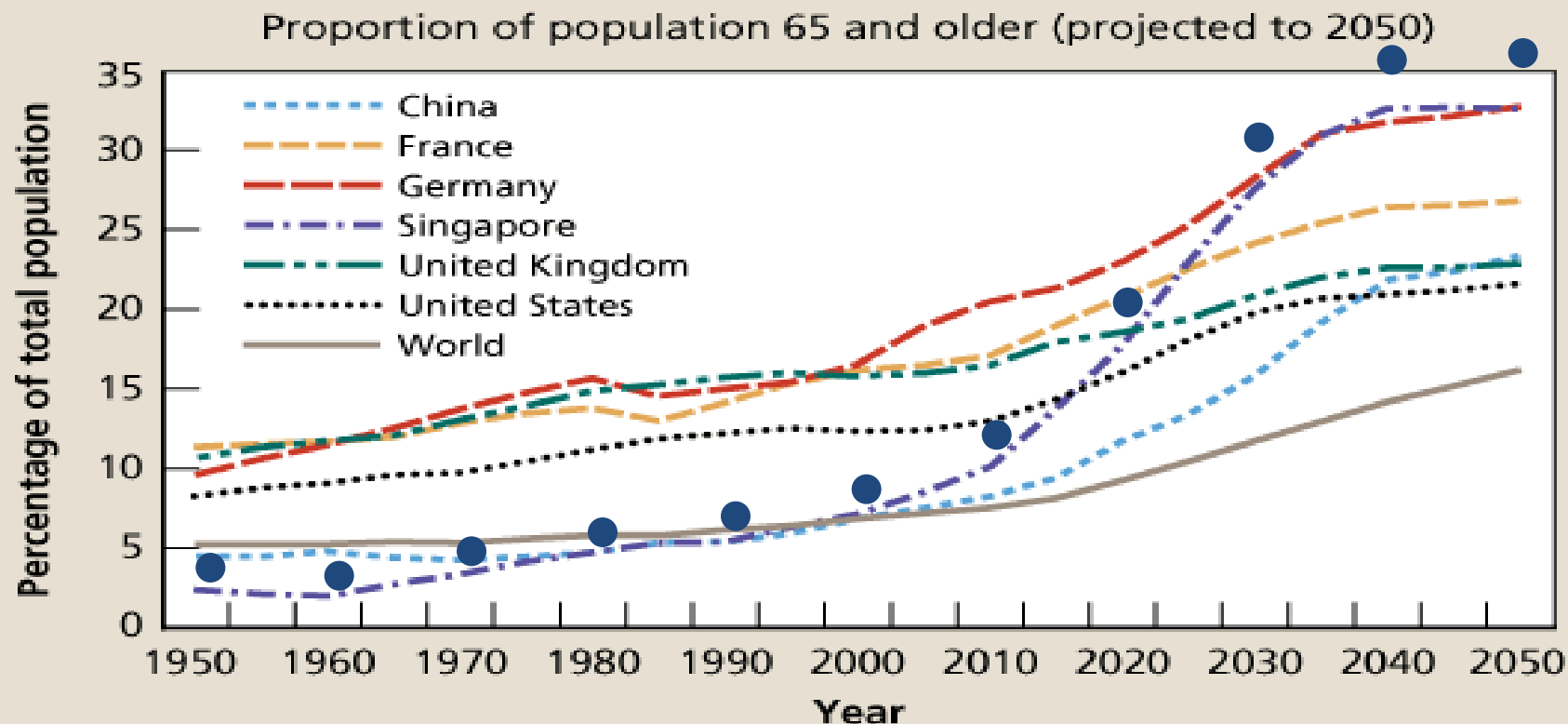
# Centre for Healthcare Assistive & Robotics Technology

## Charting Future Healthcare Delivery



# Rapidly aging population of Singapore

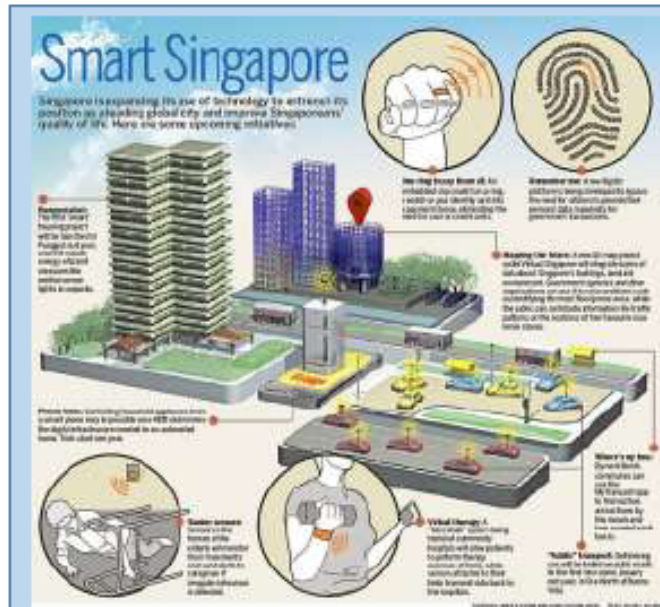
## Singapore and China Are Aging More Rapidly Than Other Countries Studied



SOURCE: United Nations Population Division, *World Population Prospects: The 2008 Revision*, database, 2008. As of February 22, 2010: <http://esa.un.org/UNPP/>

# There is National Interest to Drive Smart Technologies, Including thru Robotics

- Smart Nation initiative was launched in 2014 to coordinate national efforts in planning, developing and adopting smart technologies across sectors/settings
- National interest to plan and effect smart technologies through research and implementation
  - Research, Innovation and Enterprise (RIE) will be key in Singapore's transition. RIE 2020 will focus on areas where Singapore has a competitive advantage, strategic need and where we can best leverage R&D to support Singapore's future economic growth and build a resilient nation.
- National Robotics R&D Taskforce set up to propose Singapore's robotics strategy moving ahead; DS (D) is a member of the national taskforce
  - Recognise tremendous growth in the use of robots globally and potentially in Singapore
  - Address demographic shifts (e.g. ageing), shortages of skilled manpower (e.g. healthcare staff) and demands for better quality of life



PM launched the **Smart Nation** initiative in Nov 2014. PM explained that bringing the current piecemeal uses of technology into a cohesive, nationwide whole "will make our economy more productive, our lives better, and our society more responsive to people's needs and aspirations".

The Smart Nation plan is motivated by concern and opportunity. Pressures driving demand include increased urban density and ageing population. In turn, three priorities have been identified: smart health care, transport, and housing.

PMO's new Smart Nation Programme Office will drive the effort.<sup>5</sup>

# Meeting the Challenges

- i. **Enabling Productivity Gains and Supporting Aging Workforce**– Enabling manpower across care settings to discharge their clinical and operational duties more efficiently. Augmenting /substituting labour-intensive and occupational hazardous aspects of operations, allowing them to work longer. Also to help increase job value and thus able to attract more locals into the professions.
- ii. **Improving Health and Clinical Outcomes** – Assisting care teams to extend human capabilities and deliver improved health and clinical outcomes, indirectly increasing staff and patient/caregiver satisfaction.
- iii. **Smart health facilities** – Interoperability for machines, IOT and building management to decrease installation and operating costs
- iv. **Supporting our ageing population and facilitating care in the community**– Reducing the overall demand for our healthcare facilities like nursing homes. Aims to connect individuals at home with society and health services.

# Paving the Future for Healthcare

## *By co-developing technologies*

- The Centre for Healthcare Assistive and Robotics Technology (CHART) is designated to build prototypes of smart systems and the ecosystem for development of suitable technologies to enable “Hospitals of the future” and “Hospital to Home”.



### 1. Hospitals of Future

Robotics-enabled precision care and medicine, with smaller scales for Community Hospitals, Nursing Homes and Day residential care

#### Aim

Equip “smart healthcare institutions” that can deliver care with fewer manpower per bed



**Smart Ward integrated with  
Smart Logistics**



### 2. Hospital to Home

Robotics-enabled care and aging in place at home, with home grade equipment for consumer use

#### Aim

Enable seniors to age in place for longer at home, with the help of technology to support transitions in care and complement or replace the lack of full time caregivers



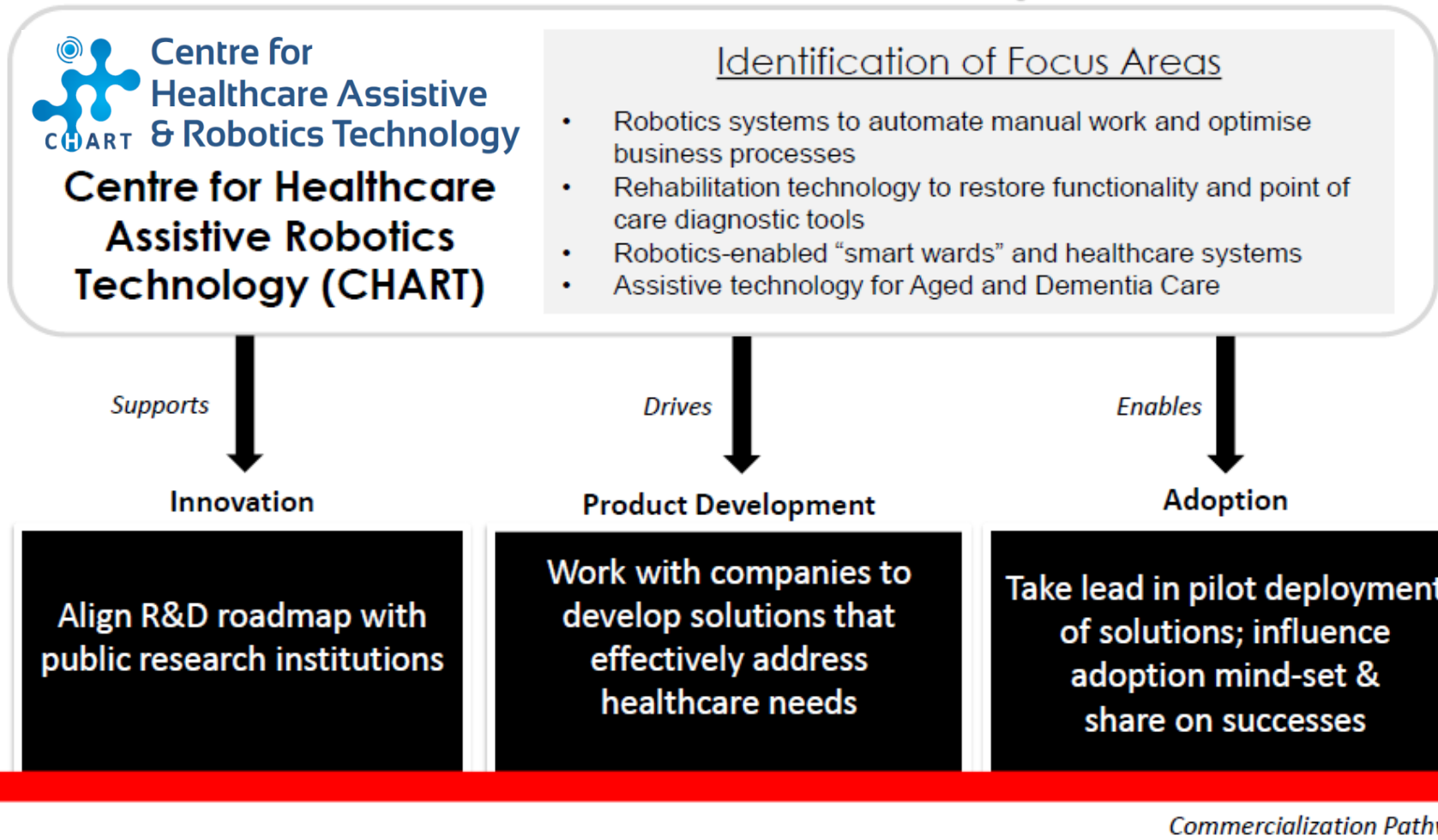
**Robotics Assisted  
Community Enabled Support**

**Robotics Middleware Framework | Decision support Algorithms | Artificial Intelligence**

**Standards and Conformance for accreditation and testing of technology developed**

# Collaborative Platforms - Healthcare

## Healthcare robotics collaboration platform



# Robotics in Healthcare

## Areas for Application

1. Assistive technology for independent living and dementia care



2. Rehabilitation technology to restore functionality



5. Medical Procedures & Training



3. Virtual hospital



4. Automation of process and manual labour



# Robotics in Healthcare - Rehabilitation

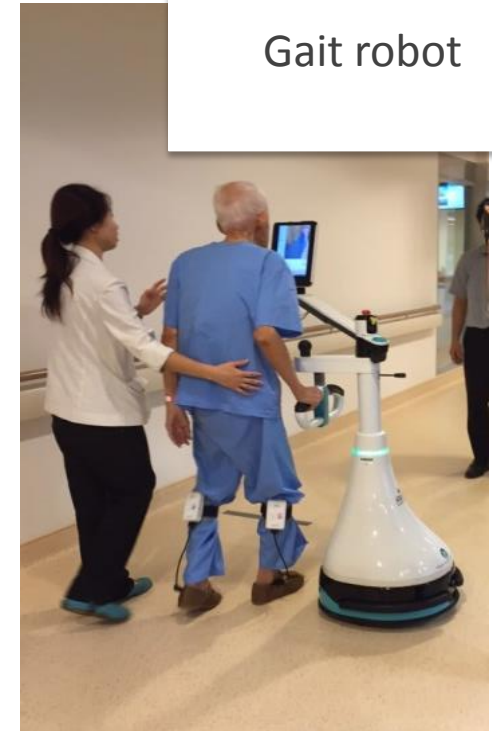
- Rehabilitative technologies to empower patients to train and re-gain functional independence.
- Suitability for Asia population & cultural context.



Rehab games



Braces



Gait robot



# Smart technologies coupled with healthcare process innovation



## Standalone technologies

Physical process of nurse measuring and recording patient's physiological parameters



Manual rounding & documentation with standalone medical technology

## Integrated Systems

Captured parameters automatically sent to centralised dashboard; no nurse in data capture process



Digitalising collection of health & medical data to Electronic Medical Records (EMR)

## IoT

Use of robotics and assistive technology to reduce time spent on manual and repetitive tasks for more direct patient care



Process transformation coupled with IoT technology to drive automation through electronic ordering

## Artificial Intelligence Robotics

Predictive analytics supporting autonomous activation of care and logistics based on prescribed clinical pathway



Care transformation by integrating clinical pathways with predictive analytics to deliver personalised & precision medicine

**SMART WARD**

# CLMM – Closed Loop Medication Management

**1** Doctor orders medication



*Places medication order in Electronic Medical Record System*

**2** Pharmacist verifies orders



*Verifies orders using Electronic Medical Record System*

**5** Nurse administers medication



Identify Patient

*Using wireless/RFID with Electronic Medical Record System to meet 5 rights*

**Closed Loop Medication Management (CLMM)**

**3** Robot packs medication



*Verified orders are packed and dispensed to Ward (IPAS / Robot)*

**4** Nurse prepares medication



Automated Medication Cabinet



Automated Medication Cart

*Takes medication from Automated Medication Cabinet (AMC) and prepare medication into Automated Medication Cart*

# Robotics in Healthcare – Logistics

## **HOSPI – Autonomous Mobile Robot**

Ad-hoc delivery of medication, documents and blood samples independently throughout the hospital.



# Reducing non-core work through technology and job redesign



- Allow nurses to perform at top of license
- More time to provide direct patient care
- Expanded nursing roles

- Pharmacists have more time for medication reconciliation and patient education at frontline
- Reduction in rework rates
- Improvement in patient safety and waiting time



# Our robots highway

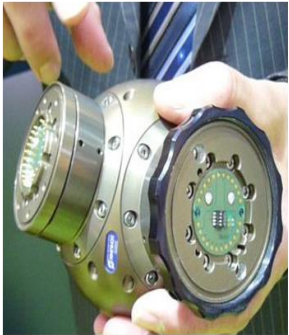


# Integration needs

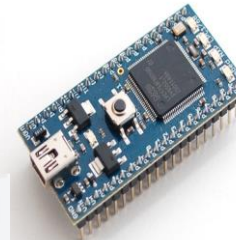
- Enormous Diversity of Robotics Platforms.
- Most of them proprietary.
- Challenging to integrate.
  - Robot to Robot.
  - Robot to Infra.
  - Robot to Medical Devices and Systems.



# Hardware modularity



- Compatible Robotic Arm
- Sensors
- Mobile Base
- Standardised controllers

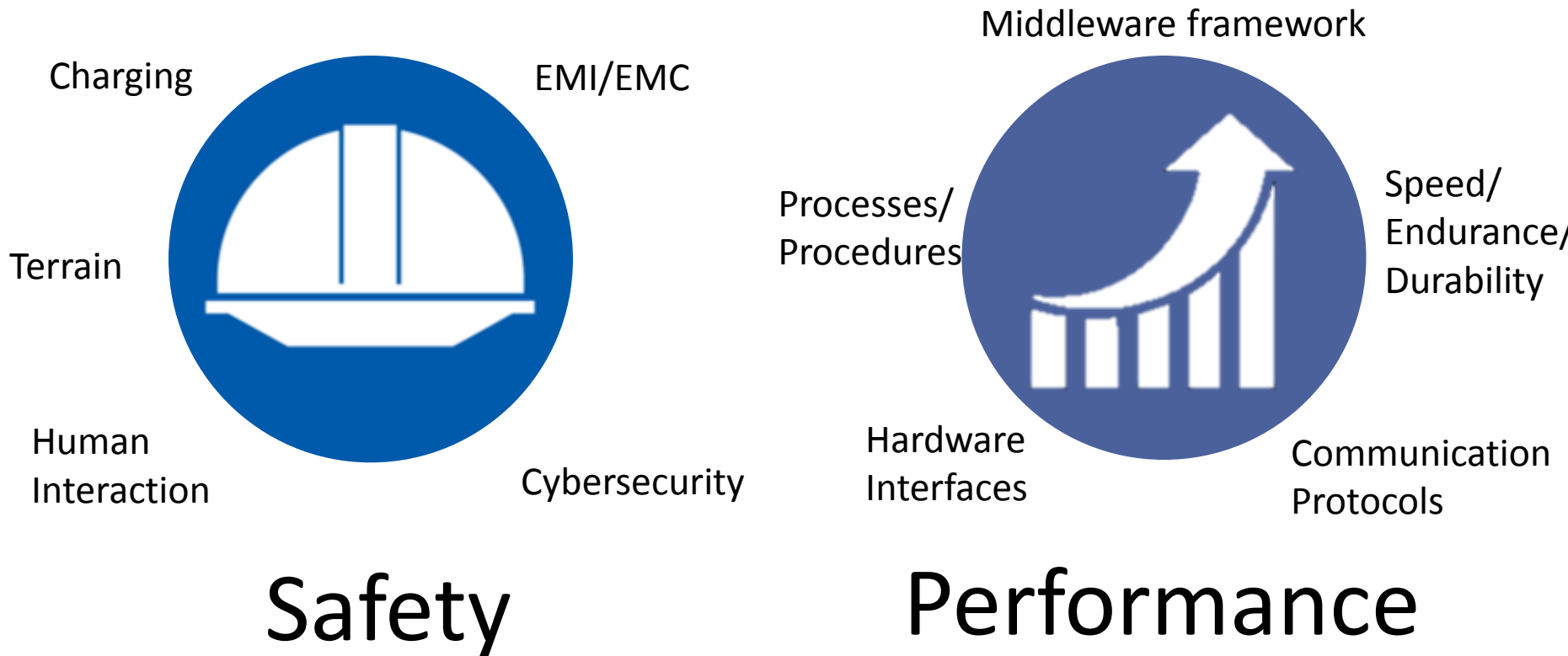


**ARMmbed™**  
IoT Device Platform



The end-to-end software ecosystem for the Internet of Things

# What can be standardised?





# Work ahead

- Robots moving out of cages and working beside humans – how do we ensure adequate standards and risk assessments, safety through testing (eg. Human contact force limits) and insurance?
- Continuous efforts to provide evidence-based cost-effective care, driving both personalised and population health management. Can machines learn wrongly?
- More elderly patients are living alone, and with caregivers getting older. Many countries envisage a robot in every home. Do we need new laws for privacy and cyber-security?
- Need to prepare our population to work productively longer in their lives both in healthcare and in the general population. Need for process re-designs, infrastructure upgrades and workforce transformation to happen in tandem.
- Need for open-source codes to drive innovation, balanced with clinical validation/certification for proven care



Thank You