

SAP Customer Success Story Healthcare



Albert Schweitzer Hospital (ASZ) in the Netherlands is convinced that the healthcare sector will only be able to meet the growing needs of patients by redefining and restructuring the entire care process. This was one of the main reasons why the hospital opted to implement software from the SAP® for Healthcare portfolio, which offered an integrated environment for all business, care, and medical processes associated with the provision of healthcare.



ALBERT SCHWEITZER HOSPITAL (ASZ)

ASZ PIONEERS WITH PROCESS-DIRECTED ELECTRONIC PATIENT RECORDS BASED ON SOFTWARE FROM THE SAP® FOR HEALTHCARE PORTFOLIO

ALL HOSPITAL PROCESSES SUPPORTED

Albert Schweitzer Hospital (ASZ) was created in 1999 as a result of a merger between the Drechtsteden and Merwede Hospitals. The merger saw the establishment of a large regional hospital with four locations in Dordrecht, Zwijndrecht, and Sliedrecht, employing more than 3,300 staff (2,400 full time) tending to 1,085 hospital beds. ASZ ranks as one of the top clinical hospitals in the Netherlands in a number of professional disciplines. It is also credited for pioneering the reorganization of Dutch healthcare, which is a political hot item in a sector increasingly under pressure from rising healthcare costs and growing investment requirements as the population grows older and medical technology continues to advance.

To curb the cost spiral, ASZ chose to implement solutions from the SAP for Healthcare portfolio of software and services for integrated process support. In fact, before the merger, the Merwede and Drechtsteden facilities were already using SAP® software – which in part influenced the hospital's decision to go with SAP. “We were – and still are – convinced that information is only valuable if it can be related to other information,” explains Ton Modderman, head of IT at ASZ. “This is why the new system not only had to support the business processes but also the primary healthcare administrative processes and the actual care processes. This immediately reduced our short list, as only one vendor offered a specific solution for the healthcare sector: SAP. Our decision to opt for applications from SAP for

Healthcare clearly had a strategic dimension, especially in light of the developments that challenge us: more demand, a government that wants to change the structure and financing of the sector, private financing, and so on. We're confident that these challenges can only be tackled successfully by developing an integrated, overall vision."

MERGING AND AUTOMATING ALL AT ONCE

Modderman explains that at the same time the hospital was implementing SAP, it realized it had to prepare the new automated system for the future. And, in the wake of the merger, this presented some challenges, both on a technical and organizational

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Ton Modderman, Head of IT at ASZ

level. However, the project was ultimately successful and users eventually adjusted to the new processes. The implementation included SAP Patient Management, IS-H[®]MED (an SAP partner solution), and mySAP[™] ERP for financials and controlling, cash management, sales and distribution, and materials management.

AN AMBITIOUS TRIAL PROJECT

As a result of its success with SAP — and in spite of challenges brought about by the merger, the changeover to the euro, and the introduction of a sophisticated IT system — in 2002, ASZ embarked on an ambitious pilot project, also based on SAP: the electronic patient record (EPR). "We'd been talking about it in our sector for a long time, yet an integrated approach to patient treatment had never gotten off the ground in the Netherlands," says Modderman. "The pilot was designed to explore the EPR concept from the perspective of so-called clinical pathways." This means that a patient is treated following a set protocol. On a practical level, it means that you enable a patient's clinical

treatment path to be rolled out over the entire organization at once: requests for lab work, dietetics, or social work can be automatically generated and scheduled, and the results are reported back electronically. "Other IT systems tended to focus on the reporting routines, rather than the actual processes," says Modderman. "By approaching the patient record as a clinical pathway — SAP workflow capabilities are excellent for this — you can plan the patient's treatment much more efficiently and relieve the specialist of relatively simple decisions, which are built into the system. Of course, the EPR also helps create a clear and transparent system of accounting for all hospital activities and services rendered. This is considered progressive in the Netherlands, but we feel it is absolutely necessary to achieve the level of transparency that the government and healthcare insurers demand from us."

The pilot project at ASZ was limited to the cardiology department at one hospital, concentrating on three main clinical pathways. This included all processes involved in care provision, as well as the ensuing medical and paramedical services. The project goal included a six-month implementation. "That proved a bit ambitious, but remember that we're still in a pioneering phase," says Modderman. "So even though we did not manage within that short space of time to fully integrate the system into the daily working environment, the project did teach us a great deal. We were able to map all technical, functional, and organizational preconditions in detail. This showed us that the technology is not an impediment. What really matters is how healthcare professionals can fit the EPR in with their daily routines in the most simple and effective way. Should they use a mobile solution? What emergency procedures do you follow if a system fails? All this requires a professional approach and a mind set that most hospital staff are not accustomed to. Our specialists would have preferred to have a working system right from the word go, but they understood their pioneering role and they are still very cooperative. So clearly it is now time to take the next step."

LINKING CARE AND COSTS

According to Modderman, the hospital will continue to reap benefits from the SAP solution over time. "SAP can help us reduce the administrative workload. And that's crucial in a time when there are not enough 'hands around the beds.' The effects will be keenly felt once our new organizational structure has been fully established. And if we want to have an EPR structure – which we do and must – we're going to need a system that sup-

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ports the EPR in a cohesive manner. SAP is such a system. We've now mastered the principles of electronic application filing and reporting. We have created the building blocks, which will benefit other hospitals. All it takes is the will and commitment of the sector to work together. After all, with a government that mandates diagnosis-based treatments and costs, and if we're to be in a position to negotiate competitively with the insurers, we must have a system that records everything, and which can establish the connections between services rendered and financials. There is simply no other way to expose real costs and demonstrate that we're committed to reducing the waiting lists. SAP helps us organize our entire care system better and effectively cut back treatment time. It's a complex mission, and it may involve a learning process over many years, but that's exactly why, as hospitals, we have to cooperate with each other. Rome wasn't built in a day, you know."

AT A GLANCE

Software	mySAP™ ERP (financials and controlling, cash management, sales and distribution, materials management), SAP® Patient Management, IS-H* MED
Hardware platform	Siemens
Operating system	Xenix UNIX
Database	Oracle 8
Number of users	1, 450
Implementation time	SAP Patient Management/IS-H* MED: 1 year, mySAP ERP: 4 months

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