



# The Computerworld Honors Program

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## Final Copy of Case Study

**Status:**

Laureate

**Year:**

2013

**Organization Name:**

GlobalMed

**Organization URL:**

[www.globalmed.com](http://www.globalmed.com)

**Project Name:**

Transportable Exam Station

**Please select the category in which you are submitting your entry:**

Health

**Please provide an overview of the nominated project. Describe the problem it was intended to solve, the technology or approach used, how it was innovative and any technical or other challenges that had to be overcome for successful implementation and adoption. (In 300 words or less.)**

In early 2012 GlobalMed launched a pilot program solution that represents a comprehensive approach to primary healthcare in the home with the single largest health provider across the United States, the Veterans Health Administration (VA). The system was placed at approximately 75 VA facilities and home settings in a project to prove the feasibility to a scaled implementation. This solution is anticipated to be widely distributed throughout the VA health delivery system as a critical component in the VA's drive to increase access to appropriate care to veterans who are unable to travel due to disabilities and chronic illnesses. This mobile health delivery system, called Transportable Exam Station, was designed to deliver care from a remote location while

communicating with the VA's electronics health system to support the concept of integrated care. TES integrates a comprehensive mobile solution, enabling audio and video communication between the patient, remote clinician, and specialist to allow for the most efficient access to the right care for the patient. With TES, veterans can now access the very best care while minimizing the amount of travel required. TES also integrates the functionality of a mobile, transportable all-in-one device to include a tablet PC with all the necessary software, and networking integration to be able to communicate within the VA's secure system and necessary peripherals. One of the biggest obstacles was to find a way for a highly integrated medical device with wireless technology to connect from the patient's home to the VA's secure network. The GlobalMed team worked for over 18 months with the clinical and technical constituents from the VA to overcome the specific technological and clinical hurdles to deliver a product that not only helped bring better care but also in a secure manner within the VA.

**When was this project implemented or last updated? (Please specify month and year.) Has it incorporated new technologies and/or other innovations since its initial deployment? (In 300 words or less.)**


The development of this project began in mid-June 2011, and prototypes were sent out by the end of 2011. During 2012 various product refinements were made as a result of feedback received from the VA, and units began shipping in quantity in the fourth quarter of 2012.

**Is implementation of the project complete? If no, please describe the project's phases and which phase the project is now in. (In 300 words or less.)**

Project implementation of Phase I is complete, and GlobalMed has shipped out approximately 100 units to the VA. The follow-on Phase II is currently underway and our teams are in full deployment of training and education of this product. During the first and second quarters of 2013 GlobalMed will visit over 115 VA facilities to drive the awareness, success stories and education about the TES. We expect the VA to deepen its investment in the TES in the 3rd and 4th quarter of 2013 as it scales its healthcare delivery solutions to veterans across the U.S.

**Please provide at least one example of how the technology project has benefited a specific individual or organization. Feel free to include personal quotes from individuals who have directly benefited from the work. (In 300 words or less.)**

In 2012 the VA dropped co-payments charged to veterans for telehealth consultations and set a goal of providing 200,000 remote consultations by the end 2012 (up from 140,000 in 2011). A recent study in the VA's Northwest Health



Network showed that home telehealth saved the division \$742,000 last year, including transportation costs. And a 2008 VA study found that the use of home telehealth reduced hospital bed days by 25% and cut hospital admissions by 19%.

**Would this project be considered an innovation, a best practice or other notable advancement that could be adopted by or tailored for other organizations and uses? If yes, please describe that here. (In 300 words or less.)**

Absolutely. TES has already begun additional deployment in various other clinical settings in the U.S. and around the world. In mid-2012 in an effort to provide much-needed healthcare to low-income Colombians living in a remote area of the country, GlobalMed participated in a Healthcare Brigade, organized by the San Jose Hospital and the Fundación Universitaria Ciencias de la Salud (FUCS) from Bogotá. The Brigade visited neighborhoods located in La Boquilla, a small town in the vicinity of Cartagena de Indias, where they provided assistance to dozens of Colombian families in the region. By using TES, GlobalMed was able to facilitate the transmission of medical data from this remote area. GlobalMed has deployed over 25 other units like this to similar remote environments, including oil platforms, ships, mining operations and other far remote underserved areas.

**If there are any other details that the judges should know about this project, please note them here. (In 300 words or less.)**

GlobalMed's telemedicine solutions are centralized around our CARE Program (CARE = Continuous, Accessible, Responsible, and Equitable Care), and address patients with high health needs, many in underserved rural areas across the United States by giving them greater access to life-saving care that they might not otherwise receive. Our innovative solutions are designed to bridge the consultation from the patient location with the necessary physician specialist connecting to the remote location, or even within the urban area to improve clinical workforce utilization.