

Allm Inc.



Development and introduction of solutions for contribution

to the DX of dialysis clinics in Singapore and Malaysia

Object of the project

■ Allm develops and installs DX solution for dialysis clinics in Singapore and Malaysia with agendas such as

- (1) Streamlining information sharing and administration work in clinics/hospitals among nurses and doctors (Join);
- (2) Catalyzing communication between doctors and patients (Team); and,
- (3) Introducing personal health record (PHR) and dialysis historical record/review functions (MySOS).

Cooperation with local companies/governments

■ Allm has chosen DaVita Care Pte. Ltd. (DaVita), a joint venture owned by DaVita Inc. (an American dialysis clinic group across 11 countries) and Mitsui & Co., Ltd. DaVita operates dialysis clinics through Singapore and Malaysian entities.

■ Allm and DaVita undertook development and installation of Join (a communication platform Allm provides), employees' survey (nurses, doctors and staff at HQ) and system optimization.

Targeted economic/social issues

■ Dialysis market has been expanding globally over the past years as the number of the kidney dysfunction cases caused by diabetes and hypertension is increasing. These are usually triggered by smoking, unhealthy diets, lack of exercise and excessive drinking when average income increases. Besides, more patients prefer dialysis to kidney transplantation these days due to fewer complications.

■ Singapore's primary causes of death (2021) are cancer (26.4%), ischemic heart disease (20.1%), and pneumonia (18.4%). Malaysia's primary reasons are Covid-19 related disease (19.8%), ischemic heart disease (13.7%) and pneumonia (11.1%). In both Singapore and Malaysia, ischemic heart disease primarily caused by lifestyle-related factors is the leading cause of death.

■ In both countries, there has been an increasing demand for dialysis due to 1) the number of diabetes patients in the countries is much larger than global average and 2) the proportion of patients who go through dialysis (resulting from diabetes) is also the largest in the world.

■ However, there are also bottlenecks to improving service quality, such as 1) administration burden on those involved in dialysis and their high turnover rate, 2) lack of patient management system to keep their diet, exercise and historical clinic visit and 3) low engagement/satisfaction between medical staff and patients; there is no information sharing platform yet.

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Details of demonstration

■ Allm has installed Join in DaVita Singapore and DaVita Malaysia to work on agenda (1) (Streamlining information sharing and administration work in clinics/hospitals among nurses and doctors (Join). In order to understand user experience, it has also undertaken a survey with doctors, nurses and staff at HQ. It is remarkable that more than 80% of nurses are satisfied with Join and they also gave 4.2 scores (out of 5 scale) when it comes to usefulness and functionality. The results proved Join has streamlined information sharing and operation.

■ As per agenda (2) (Catalyzing communication between doctors and patients (Team)) and (3) (Introducing personal health record (PHR) and dialysis historical record/review functions (MySOS)), Allm prepared a project plan and worked on English version of Team. It also proposed to optimize administration work with Join Forms (Allm's service). We analyzed gap between partners' requests and MySOS functions when it comes to PHR.

Project outcome / Future plans

■ Allm installed Join at 20 clinics (out of 40 clinics in Malaysia) and at its headquarters in Malaysia. It has also installed Join in 3 clinics (out of 4 clinics in Singapore) and at its headquarters in Singapore. As explained, Join has been remarkably evaluated when it comes to satisfaction, usefulness and functionality.

■ DaVita complained about notification errors, login failures and Join user interface when we undertook the survey. In order to deal with these issues, Allm optimized the network setting (Allm has shortened time of login and loading new messages), reminded notification setting, software updating and security robustness during this project period.

■ Allm will mobilize the expertise we have accumulated during this project again when marketing to other clinics and hospitals in future.

■ Allm also aims to propose Team and MySOS (the solutions Allm was supposed to provide) again after we undertake a revision of this project and revisit market needs in Southeast Asia.

