





# Artificial Intelligence With a Purpose at Providence

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t Providence, our commitment to delivering high-quality, mission-driven care guides us in everything we do, including leveraging technology solutions. To help give time back for what matters most — patient care and human connection — we're investing in artificial intelligence (AI)-enabled tools designed to streamline workflows and simplify day-to-day processes.

In our 2030 strategic plan, we are focused on making Providence the best place to give and receive care, as we create a delivery model for the future supported by innovation and positive change. Our five-year road map is anchored in three strategic pillars: be the best place to give and receive care, create the delivery model of the future, and drive focused innovation for positive change.

Using technology as a tool to transform and improve the patient and caregiver experience enables all three strategic pillars. At Providence, all our employees are called caregivers, recognizing that each of us plays a part in caring for patients and each other.

# **ELEVATING CARE EXPERIENCES**

Pertaining to patient care, Providence is focused on patient experience and has established three focus areas to help our patients navigate their care: making it frictionless, personalized and navigable. Frictionless means making it easier for people to find and use our services. For example, we aim to ensure that all schedulable appointments have the option of being booked online. While that option is currently not exercised at each location, we know that, as a system, we seek to have everyone operating from the same data. Whether an appointment is made by phone or online, we help patients get the most information about where to get care.

We're also focused on the personalization of care. We serve 5 million patients annually in our seven-state footprint. Each patient is different, with different needs, motivations and expectations of the services they are using. We connect with patients in a way that keeps them engaged.

Finally, when it comes to navigation, patients want to be able to navigate getting and receiving health care the way they are used to doing things in real life, just as they do with online shopping and banking. We focus on web, mobile and call center experiences to make it easy for our patients to get care. Navigation means being able to easily get into the right care at the right time, find the information you need, and get the job done (for example, booking an appointment) as a patient with minimal effort.

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## Providence Considers Health Care Trends as It Determines How Best To Use Al



Ongoing uncertainty and volatility in government



Consolidating ambulatory environments



Changing supply and demand/ economic trends



The rise of the "payvider"



Distribution, decentralization and emergence of ecosystems



A new flavor of health system mergers and acquisitions



Ongoing workforce challenges and competition for workforce



Growing focus on diversification



Digital enablement of consumer experience



Artificial intelligence adoption and data emerging as differentiators

Providence leaders gather data and forecasts as they plan for the future. They begin with a foundational understanding of the provision of health care as a public good, and examine the impact of the overall geopolitical landscape, the nature of supply and demand, workforce concerns, anticipated changes in reimbursement, and shifting market dynamics, such as the rise of the payvider, which is an entity that provides both insurance and care delivery services.



On the clinical side, we are focused on using AI technology to give our providers more quality time with our patients through what we call "sacred encounters." For instance, an overwhelming number of messages that patients submit through their patient portal take a lot of clinician time away from direct patient interaction because care teams must respond to messages. Providence clinicians receive about 7 million patient-generated messages annually, and responding to these messages is a source of clinician burnout and fatigue.

We are taking a multipronged approach to this problem: by reducing the number of patientgenerated messages by providing direct patient access to the information they need or the task they're trying to complete; by triaging messages to the right member of the care team; and by helping clinicians efficiently respond to messages.

### **KEEPING GUARDRAILS IN PLACE**

All this said, AI within the health care realm is complicated and requires oversight, governance and guardrails. We've put in place key initiatives to ensure that we keep patients and caregivers safe and set ourselves up for success.

There are two key bodies of work happening at Providence, each composed of multiple initiatives. The first is our internal AI work groups. The Clinical AI Work Group is a dedicated multidisciplinary team led by clinicians who provide oversight, feedback and guidance around priority work areas for clinically oriented AI. The second work group is our Enterprise AI Guardrails Work Group. With so many AI-based solution implementations in flight, Providence leaders need visibility into these projects to provide guidance. This group evaluates AI solutions for safety, equity, risk, legal, compliance,

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ethics and privacy guardrails. The team implements a governance structure to prioritize, safeguard patient data, prevent bias and ensure access to innovations for all, including underserved populations.

The other body of work is the Office of Transformation. The office aims to create a multidisciplinary and cross-functional approach that brings together technology, operations, clinical and financial aspects to drive large-scale changes throughout our system. There are two workstreams built into the Office of Transformation: current initiatives and future initiatives.

Current efforts this year are focused on reducing clinical administrative burden through clinician-facing documentation and charting support with ambient solutions, and supporting the reduction and response to in-basket messages. These tools can save clinicians time during and after care. The tools also allow providers to spend more meaningful time with patients and still wrap up their day at a reasonable hour.

One guiding principle is that we are not going to automate what isn't working — it is not substitutive. We will do things better and think about these issues more materially. Our future initiatives include workflow automation and new models of care delivery through virtual and asynchronous care. All will incorporate AI solutions as part of the process. When done right, AI is going to help our patients and caregivers.

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# **OUESTIONS FOR DISCUSSION**

- 1. As you think about how Providence St. Joseph is working to ensure patient experiences that are frictionless, personalized and navigable, what struck you about the way the system is involving technology and artificial intelligence (AI) in their processes? What interested you most about the approach?
- 2. Does your organization have internal work groups similar to those this system is using? What aspects of creating groups like a Clinical Al Work Group and an Enterprise Al Guardrails Work Group appealed to you?
- 3. In Catholic health care, keeping humanity at the center of care is foundational to the work. What can you contribute to your organization's understanding of the use of AI, whether it's a perspective on mission, ethics, clinical, all of these, or your own distinct perspective? What are some ways to discuss these evolving issues and how they are implemented where you provide care?
- 4. How might Catholic social teaching, organizational ethics and bioethics inform the appropriate design, implementation and use of AI in health care?

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