

Many health systems do not have a mobile or device strategy because use of smart devices started organically – clinicians using their own phones for communicating about patient care. Health systems have had to quickly and chaotically adopt HIPAA-compliant rules and regulations with various software and devices, and as a result, have no real way of managing upgrades for multiple operating systems and corresponding clinical applications. Physicians want to use their own smartphones while nurses use hospital-issued devices – sometimes with devices even differing by department or facility. It seems almost insurmountable to go back and develop a strategy for hundreds if not thousands of clinicians at this point.

The challenge is how health systems can create a strategy in reverse and in what ways can it consolidate to save money and time in terms of managing hardware and software? Buying smart devices at reduced costs can be accomplished by purchasing in bulk, yes, but controlling the costs and maintenance of said devices is much more difficult, especially when clinicians are working at different locations.

See [Smart Devices in a 24/7/365 Work Environment](#) for information on how to choose the right device for your health system.

Health systems are now turning to technology partners who are experts in developing mobile device strategies. By working with a partner, health systems can insure that applications will always operate correctly on the chosen devices, that clinical workflows will not be broken, and that the apps consistently work not only on devices but on desktop computers or laptops as well. Partners can also help health systems migrate their current processes to more streamlined, strategically aligned practices.

Here are some questions to consider when developing your mobile strategy with a partner:

- What information needs to be mobilized?
- Who needs information and when?
- What is the device policy? BYOD (Bring Your Own Device – which most physicians prefer), health system-provided devices, or a combination of both?
- What network will these devices run on, does the network need updating, and how will the updating be managed?
- What are the mobile device management and security policies, especially if there is a BYOD policy?

Rebuilding a mobile strategy takes time and requires that health systems identify the correct partners to work with them. The application must work with multiple operating systems (iOS and Android) and it must be pre-tested and certified with the devices chosen to ensure no workflows are broken during use. The application must be easy to use, with everything a clinician needs contained in one platform, to avoid having to toggle from one application to the next while caring for a patient.

While resetting your system’s mobile strategy may seem like a daunting undertaking, the cost of *not* taking action is much greater. Doing it sooner than later will result in reduced fragmentation of both hardware and software, ease of use and streamlined collaboration among clinicians, which means better patient care and reduced clinician burnout.

See [Collaboration Starts with the Executive Team](#) to learn how to put the best steering committee together for an implementation.

