

Headline Sponsors:





Paul Johnson

CEO & Co-Founder, Radar Healthcare

James Davis

Founder, CEO Inicio Health



USING AITO DELIVER BETTER OUTCOMES





AIIS ALREADY PART OF EVERYDAY LIFE



Spotify and Poe suggest a playlist based on my mood to start my day off right



Mem and ChatGPT help me turn meeting notes into insights and actions



ChatGPT creates a personalised day plan for me



Siri and Otter AI make it easy for me to dictate texts and transcribe big thought pieces



Google recommends the perfect cafe for me to work from



Google Maps guides me around the city



HyperWrite assists me with editing my writing and responding to emails



End the day with some Netflix suggestions





AIIS ALREADY PART OF CLINICAL LIFE

- Al supports medical imaging analysis
- Al is decreasing the cost to develop medicines
- Al analyses unstructured data
- Al can forecast kidney disease
- Al contributes to cancer research and treatment
- Al uses data collected for predictive analytics
- Al supports health equity
- Al within Radar Healthcare supports better patient outcomes





VENDORS

Vendors approach individuals directly across the organisation, creating a risk of implementing AI technology without appropriate governance and checks.



SILO APPROACH

It can be difficult to have a consensus on challenges being experienced across the pathway, creating a silo approach.



PATIENT AND PUBLIC PERCEPTION

All is a complex area and one that needs careful communication with the public when implementing into patient pathways.



CHALLENGES TO INTRODUCING AI INTO THE NHS



AISKILL GAP

A lack of knowledge and understanding to challenge vendors on a solution's design creates a risk. Al is implemented without clear benefits or objectives and the solution only answers part of the problem.



CAPABILITY AND CAPACITY

Capability and capacity within an organisation, including both systems (infrastructure and data), and processes (changes in ways of working) is limited or already stretched.



CURATED DATA SETS

The NHS collects a large amount of data but it is often siloed, of varying quality, fragmented and unstructured limiting the benefits that come form implementing Al.





WHAT ARE THE BIG CHALLENGES WITHIN A!?

REGULATIONS STRUGGLING TO KEEP PACE

There are a number of regulations and frameworks that look to ensure approved AI technologies are safe and ethically robust, but policies and strategies are not moving at same pace as technology leading to gaps in auditing and accountability.

STUDIES DO NOT REFLECT CLINICAL SETTINGS

A large percentage of studies have been retrospective rather than prospective limiting the availability of data on the performance of real-world data and data on the practical use of Al systems.



GAPS & ERRORS IN DATA RAISES CONCERNS

A key concern is the lack of ethnicity, skin type and location of lesions in training datasets. BAD hopes to develop a dataset to tackle this but there remains a concern in the implications when using on your local population.

CONCERNS RE: ADOPTING TOO QUICKLY

There may be products on the market which make unsubstantiated or misleading claims about the power of Al in its use for skin cancer triage and implied diagnostics.





- Al IS PART OF LIFE, AND PART OF CLINICAL LIFE
 - BUT THERE ARE STILL CHALLENGES
 - WE CAN'T USE AI TO DELIVER BETTER OUTCOMES...
- UNLESS WE CAN MEASURE IT





YESTERDAY'S TOMMORROW ISNOW

WHAT DO PEOPLE NEED FROM GOING DIGITAL?





HOW WE WORK

HOW RADAR HEALTHCARE TRANSFORMS DATA



INTEROPERABILTY, DATA SETS

> MACHINE LEARNING & AI

AUTOMATION
OVERSIGHT
(POSITIVE/NEGATIVE)

DRIVING AUTOMATED RESPONSES





WHAT DO DIGITAL SYSTEMS NEED TO DO?

PATIENT
HARM
TRIGGERS
(IHI Triggers)

RPA (Robotic processing automation) FLIGHT DECK

NLP (natural language processing) 'HEY RADAR'









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COME AND SAYHELLO







@iniciohealth







Helping you to make a difference

