

Sharing Economy and Healthcare Today: ICT, Knowledge, Skills, Projects, Practical Experience in Improving Clinical and Economic Outcomes

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Abstract

The aim of this work was to analyze the relationship between professional social media use and the healthcare in sharing economy time when used in healthcare field and specifically in pharmaceutical settings. The innovation introduced with biomedical databases has improved research works with rapid steps in all kind of scientific researches areas tools as Internet, search engines and professional social media in sharing economy time have brought a great development in the way of rapidly connecting with the professionals. The researchers and professionals all over the world in last two decades has been great possibility to sharing their experience more than past with improving in their results. So it is very interesting to see how they are playing a crucial role today healthcare through this rapid development. For example, LinkedIn, Slide share, Research gate, PubMed, YouTube, NCBI, Facebook, Skype etc. This has really brought a revolutionary change in the field. The possibility to bridge researchers and professionals; for example, with similar interests, discipline with more rapid development, never seen in last two decades. We think that using sharing economy instruments we can reduce healthcare costs about 30-40%.

Keywords: Sharing economy; Healthcare; Knowledge; Economic outcome; Social media

Introduction

Even if while some elements of health-care delivery cannot be shared due to safety (dose of a drug and other data), many opportunities for sharing exist in this settings. Technology has the ability to heavy transform the way we works with more efficiency and effectiveness, reducing time and improving also clinical outcomes [1-5]. The results we can have are interesting at different levels such as government, institutions, Insurance, patients and professional [6-9].

Communications between professionals in different hospitals, sharing practical experience and clinical cases, way to improve clinical outcomes or to reduce healthcare costs represent real facts in sharing economy time [10-16]. At the same time patients are extremely interested to be under the hands of Clinical really updates with the best practice or to be treated with the best technologies (the same insurance corporations) [17,18].

Patients like to have the right information in order to choose the best clinical options using also sure web healthcare information database (and in example second opinion in example sharing imaging data or other) [19-21]. An example can be considered the benchmarking management systems never before health care has been as open-minded to new technology as today [22-26].

In example in hospital pharmacy field:

“The development of clinical pharmacy in 1960-70s and pharmaceutical care in 1990 has represented an interesting innovation in pharmacy field [27-31]. However clinical pharmacy and Pharmaceutical care showed some practice critical limits: (a) clinical pharmacy approach is more oriented to clinical population needs or pathology but is not strictly request to manage at the level of every single clinical case. (b) In hospital setting Pharmaceutical care can not to be applied to the entire patient for economic reason (limited number of pharmacist applied). In order to give more rationale priority of actions and to select the patient to be seen in priority way we think a good solution to apply the principle of pharmaceutical care with the

instrument of clinical pharmacy into a new management systems” [32,33].

Materials and Methods

We observed relevant literature in PubMed and other database involved in

- Professional social media
- Sharing economy
- Management
- Pharmaceutical care and clinical pharmacy
- Healthcare Costs management
- ICT in healthcare

Results

We have find in literature analyzed a general improvement in some clinical outcomes when clinical pharmacist are stabile part of medical team using the instruments today available (ICT, MANAGEMENT, PROFESSIONAL SOCIAL MEDIA, SHARING ECONOMY) improving in clinical outcomes but also reducing therapy errors or reducing recovery days improving patient quality of life [34-36].

In example in healthcare field using ph. Care and clinical pharmacy added in medical team in stabile way added to modern communication

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instruments as professional social media and sharing economy tools we have observed more than 30% reduction in drugs or medical devices use in hospital setting and we think 10% due to reduction in recovery days or due by therapy errors [37].

Discussion

The results obtained, even if in qualitative ways indicate a general improves in some clinical outcomes or economic that implies a more rapid application of this systems to share information. The reduction of 30-40% in healthcare cost we can obtain using sharing economy instruments is a great economic outcome to obtain in actual economic cycle.

Conclusion

In literature analyzed in this work, there is the need to improve the healthcare systems introducing management and ICT instruments starting from clinical pharmacist university course. All these management instruments must be added to EBM criteria in clinical pharmacy and pharmaceutical care working activities (OSAMA ET AL) [13].

Few ICT instruments can give relevant contribute in management systems and in the same way Professional social media can be considered today as a useful tool to meet between researcher and healthcare professional and a base for a new kind of biomedical database. In professional social media we can find researcher curriculum, professional interest and other relevant information and efficient systems to meet themselves (Luisetto et al. 2016 clinicians teamwork bulletin) Psychological behavior skills for team working [38].

Theory and practical applications to be added to the classic clinical pharmacy programs we submit to the scientific community. We request to introduce this management instruments in the current clinical pharmacist postgraduate course, at the same time we ask public institution to strongly apply this new approach. Management and ICT instruments must be more used in today's healthcare working setting. This will give improvement in health care level.

For example, also use single hospital setting to link all the professionals involved in a single patient or in patient that has been transferred into different hospitals (Acute but also chronic) [37,38].

Undoubtedly, social media will play a crucial role in healthcare. Social media as ICT has brought a great spectrum of efficacy in healthcare as in other working field. It is very simple to say but is interesting at the same time and interesting the economics results we can obtain in more rapid way.

There is a need to have new tools and instruments as scientific social network that add the different characteristics of the social media, biomedical database and other technologies existing today in to have a more useful instrument. In example we think that a new scientific social media that could make easy to find researchers, and professionals and their research activity (related to patients and the society needs) excluding the non-relevant literature.

We submit to the business world "Clinical Pharmaceutical Care" as a new healthcare management discipline. Discipline intended to improve economic and clinical endpoint in pharmacological therapy reducing therapy errors. A more rational application of ECONOMICA resource in medical EQUIPE (clinical pharmacist).

This new approach takes advantages using the Management and ICT principles as well as sharing economy principles.

We also ask International and Business administration schools and organization involved in hospitals accreditation and University to recognize the advantages we can have by using this kind of new health care professional activity. We think that core training must include Management, ICT, Professional social media, sharing economy principles, psychological behavior skills for team working, philosophy, theory and practical applications.

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