



5 Myths About Hospital RTLS That Cost Time, Resources, and Money

Why Facilities Should
Take a Fresh Look
at Real-Time
Asset Intelligence

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A decade ago, equipment tracking promised to become the next big thing for healthcare systems. By tagging assets like retailers and other sectors had been doing, real-time location systems (RTLS) offered significant potential as healthcare facilities grew more complex, crowded, and teeming with portable innovations.

But then: realization struck. First-generation location systems were clunky, cumbersome, and wholly disruptive on the care continuum.

Location accuracy was costly to deliver and the promised outcome of an effective asset management platform with a clearly provable ROI was rarely achieved. The inability to demonstrate a financial return following a difficult and costly infrastructure commitment delivered a negative message about RTLS, and the appeal of asset tracking lost its luster. Citing these poor results, healthcare leaders found it difficult to justify investing in asset tracking systems and adoption lagged.

Those early failures have stuck around in the minds of hospital leadership. Today, most facilities have no RTLS platform at all, in part because of these lingering concerns. But here's the thing: Much has changed in 10 years.

The bulky, problematic systems that once dominated the market are not the same as the lightweight, wireless versions in service today.

Indeed, hospital RTLS has evolved while perceptions have not. Many myths remain about tracking systems that simply aren't true any longer — and believing these misconceptions comes at the cost of time, resources, and money.

So what are those myths? And how can modern-day RTLS prove its worth despite lingering skepticism? Here's what hospital leaders should know:

MYTH 1: Hospital RTLS is too much of an IT commitment.

The backlog of a typical hospital IT department is unthinkable long — and if you've got a behemoth undertaking like transitioning to a new EHR system, good luck finding time for other things like RTLS. After all, installing RTLS is highly complex and requires too much training and labor to manage, right?

Not true. In reality, **RTLS setup doesn't have to be an IT project at all**, which means hospital leaders don't have to squeeze out time from resource-strapped teams. IT plays a central role in all aspects of the day-to-day operations within a hospital, so it's understandable that hospital leadership would want to be selective about which projects their technology teams take on. Newer systems take the onus off of IT because of the lean, wireless nature of Bluetooth-enabled tracking.

Only a fraction of the technical resources and time are required to set up today's real-time location systems. Each floor requires only a couple of cabled devices that require power and an internet connection while still providing room-level asset tracking capabilities. No longer needed are the typical 10 to 15 cable drops over every floor, with management support on top of that. Thanks to these advanced, cloud-based technologies, what was once a months-long project to install has since evolved into getting up, running, and online within weeks. By saving all that time, there's also the obvious benefit of costs saved.

MYTH 2: You can't quantify a dollar-value ROI for Hospital RTLS.

"Value" is thought to be a squishy term when it comes to RTLS — and the myth goes something like this: You can only quantify the impact of a tracking system by anecdotal or secondary indicators like the amount of time saved or burnout averted, but not in actual dollars and cents.

On the contrary, the idea that you can't measure the financial ROI of RTLS is not grounded in fact. Instead of building the value-story around less search time, it can and should be built around asset purchasing, management practices, loss prevention, and reduced rental expenditure. RTLS provides increased visibility into all these areas, contributing to the "hard-dollar" ROI.

When properly implemented (room level, facility-wide) location data and historical movement patterns provide a wealth of information that informs procurement, process, and management decisions.

Ultimately, **proving a true and justifiable ROI on RTLS depends on much more than just staff productivity and nurse satisfaction**, but it requires that you have the right data. Ensuring you get the right data, however, is another story — and as it happens, it's also the next myth.

MYTH 3: The value of hospital asset tracking is in tracking assets.



It's a seemingly simple idea — that the main benefit of RTLS is to locate what's lost. But in reality, next-gen asset intelligence offers so much more. From rightsizing inventory to asset acquisition and workflow improvement, there are myriad ways that RTLS proves its value.

Of course, with a robust RTLS system there is benefit in always being able to find equipment when you need it. But a bigger benefit is the ability to automate processes so equipment is always where it's supposed to be.

Considering [equipment utilization in the U.S.](#) hovers around 42 percent, a \$10 million equipment pool conservatively includes \$2.5 million of idle and excess inventory even accounting for surges in demand. And additional costs are being incurred for maintenance, software, and upgrade fees on unused machines. Consider also that there is staff repairing, and managing this unneeded equipment, and it becomes clear that these metrics matter.

By knowing where things are all the time — both in real-time and historically — healthcare leaders can make better decisions about true equipment needs. RTLS solutions can provide the right insights not just with details on room-level location, but operational intelligence, too.

A real-time location system that helps your hospital comprehensively track assets throughout their lifecycle, capturing important metrics including asset utilization, should give you the full picture of how things are being used. That would include where equipment lives, how it moves through the facility, or how long it spends in a particular patient room or a hallway.

With the right data, RTLS platforms enable facility managers to engage in evidence-based equipment planning — reducing inventory by putting unneeded assets in storage, transferring them to a different facility, downsizing lease agreements, or not replacing equipment when it breaks. These actions create more value than anecdote-based purchasing, so when it comes time to buy new equipment, decisions can be made using evidence-based procurement that is aligned with the true needs of the hospital.

MYTH 4: Hospital floors become construction zones that impact patient care.



With previous tracking systems, installing RTLS would amount to a disruptive construction project — closing down patient rooms and impacting clinical workflows as installers move ceiling tiles or drill into walls. In addition to being disruptive to operations, they require dust abatement and other OSHA considerations, adding extra costs atop already expensive contracts.

The installation of a cable drop turns a revenue-generating room into a construction site, and even if only for a day, negatively impacts the true financial implications of installing an RTLS system.

With the right Bluetooth-enabled RTLS, no devices need to be placed in patient rooms, and no cables need to be dropped — anywhere. This means that patient care remains unaffected and ceiling tiles stay put.

The difference in the level of disruption and overall benefits that wireless RTLS technologies bring to hospital operations is huge — and can ultimately save the organization time and money.

MYTH 5: You can't get room-level accuracy without room- level infrastructure.



It used to be the case that hospitals had to add a device to each room to get the specificity of room-level location. Without devices in every single room, the best they could hope for was zone-level accuracy, which provided no accurate data on use patterns.

If you can't determine whether something is in a patient room versus the hallway, you can't determine whether it's in use — which means you can't accurately track utilization to help right-size the asset fleet. What's more, it also becomes almost impossible to truly quantify the financial value that your tracking system is providing.

Hospitals balked at the notion of disruptive and costly construction projects necessary for location tracking in the past, and that's understandable. Not only did those installations add more infrastructure to patient rooms, they impacted room utilization during setup.

The solution? Long-range wireless networks combined with centralized Bluetooth beacons and AI models to digitally map healthcare facilities without the clutter or cost of disparate devices.

With these AI-models running in cloud-sized "brains," Bluetooth beacons placed infrequently along the hallways can track mobile medical equipment anywhere in the facility, including in patient rooms. **The goal is to have a minimal amount of infrastructure, with minimal IT lift, and minimum disruption to drive the maximum amount of accuracy and coverage for financial return.**

Technology Evolves, So Perceptions Should, Too

Ultimately, RTLS has come a long way in a short amount of time — but the myths attached to older systems remain. In reality, the real-time asset tracking of today offers so much more than locating equipment. With real-time asset intelligence, hospitals can bolster equipment utilization, reduce operating costs, and deliver measurable returns.

But to get there, you have to be willing to look past the underperforming, legacy solutions and set your sights on what's possible with next-generation RTLS. Room-level accuracy at a reasonable cost is now the standard, and it is achievable quickly and with minimal disruption.

Learn more about how hospital RTLS can help your organization with asset tracking that not only saves time but can also show real value in a few short months — with virtually no disruption to patient care or workflows. [Get in touch.](#)

ABOUT COGNOSOS, INC. Cognosos equips enterprises with the real-time asset intelligence needed to unlock insights and drive decision-making. Its lightweight platform deploys quickly and offers hospitals room-level accuracy with minimal disruption of operations.

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