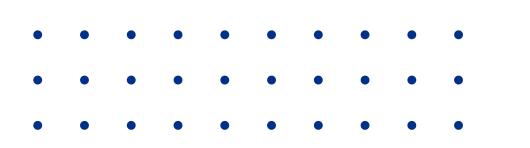


Maiya is a revolutionary software that automates and improves routine care in primary care. Using advanced AI/RPA technology, Maiya automates the management of long-term conditions and helps reduce health inequalities, which

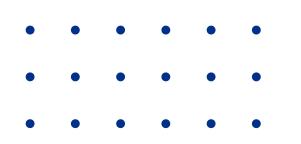
increases the efficiency of patient interactions, improves patient outcomes and frees up the GP healthcare team to focus on providing exceptional levels of care.





# This project was created by primary care for primary care.

Being on the frontline, Dr. Alex Rawlings contributed his knowledge and experience to create a software solution that will help overcome the major challenges currently facing primary care.



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INACCESSIBILITY LONG-TERM CONDITIONS INEQUALITY WORKFORCE AGEING POPULATION PRESSURE DEMAND FUNDING BENEFITS

# EFFICIENT LTC MANAGEMENT

Maiya streamlines the management of long-term conditions (LTC) in GP practices by using RPA/AI to optimise patient care. This reduces the number of visits and helps save approximately £8 per patient by offering comprehensive care in fewer appointments.

# IMPROVED PATIENT EXPERIENCE

By automating processes and streamlining appointments, Maiya provides a better and more in-depth patient experience. It supports multiple languages, which helps the doctor and patient understand each other, improving treatment outcomes and the safety of medication monitoring.



# OPERATIONAL OPTIMISATION

Maiya automates manual tasks, reducing the workload of healthcare teams. This increases clinic revenue through improved coding, adherence to clinical standards, and a more efficient patient recall process.



# **AVAILABILITY AND SUPPORT**

The software reduces the workload of medical staff, which increases access to healthcare services. By automating workflows, it frees up clinician time, allowing for better patient engagement and more efficient use of staff resources.



### **BENEFITS**

# A FUTURE-ORIENTED HEALTHCARE SOLUTION

Maiya represents a transformative operating model for general practice that addresses current challenges while aligning with long-term healthcare goals. By effectively monitoring and optimising the care of patients with long-term conditions, Maiya empowers GPs to improve the health of the population, which will reduce the number of patients in hospitals and A&E. This proactive approach not only reduces healthcare costs, but also paves the way for sustainable healthcare in the future.

# **STAFF EFFICIENCY**

Automation with Maiya reduces errors, maximises efficiency, and directs patient needs to the right clinicians, resulting in improved quality of care and staff efficiency. It optimises workflows, minimises administrative burdens and suggests appointment requirements to maximise the value of the consultation.

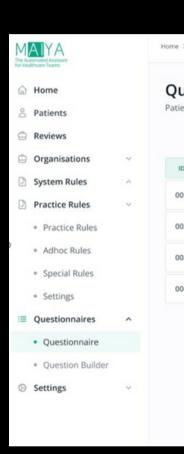




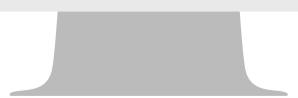
# HOW MAIYA WORKS

### **OUR PRODUCT**

- Integrated with EMIS, SystmOne and GP Connect
- Cloud-based solution
- Powered by RPA/AI
- Quick integration into practice
- User-friendly
- Flexible and customisable GP operation processes
- Multilingual system



ne > Que	estionnaires > Questionnaires			PM	Philip Millward 🖂
-	uestionnaires that can be assigned to a rule for	a recall		Search: Q	+ Add
ID	NAME	ТУРЕ	LAST UPDATED	DATE ADDED	ACTION
001	Methotrexate Review	Patient	12/01/2023	12/01/2023	C Ū
002	Bipolar Disorder Review	Clinician	12/01/2023	12/01/2023	6 0
003	Asthma Control Review	Clinician	12/01/2023	12/01/2023	6 0
004	Lithium Review	Patient	12/01/2023	12/01/2023	6 1





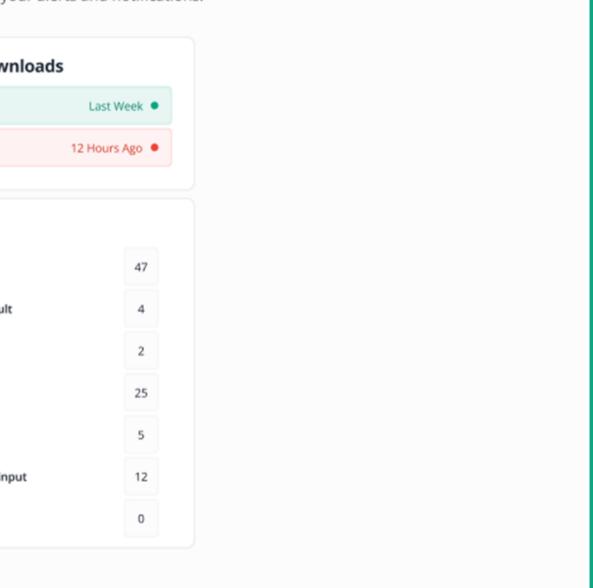
# **1.Maiya analyses patient database of the practice.**

The system is integrated with EMIS and SystmOne

MAIYA The Automated Assistant for Healthcare Teams	Home >			
Home		Welcome		
Patients	~	View and access ye		
System Rules	~	Failed Down		
≅ Questionnaires	~	EMIS		
☆ Skills Matrix	~	SystemOne		
Settings	~			
		Reviews		
		Abandoned		
		Awaiting test result		
		High Risk		
		No response		
		Unmonitored		
		Requires clinical inp		
		Requires review		

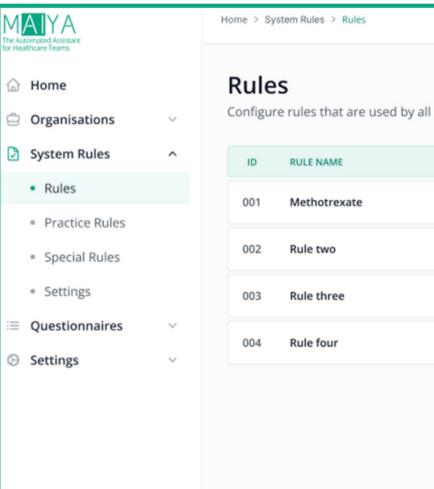
### , Philip

our alerts and notifications.



# 2. The system decides which patient and which specific questionnaire to send based on the condition and the rules.

The rules are set automatically and are based on the general rules of the NHS. The practice can change or add rules itself.





					PM Pł	nilip Mi	lward
lor	ganisations on the s	system			Upload	+	Add
	Level	ТҮРЕ	DATE ADDED	LAST UPDATED	LAST UPDATED BY	ACT	ION
	Global	Drug	12/01/2023	12/01/2023	Paul Smith	Ľ	Û
	Global	Condition	12/01/2023	12/01/2023	Paul Smith	Ľ	Û
	Practice	Drug	12/01/2023	12/01/2023	Paul Smith	Ľ	Ŵ
	ICB	Business	12/01/2023	12/01/2023	Paul Smith	Ľ	ŵ

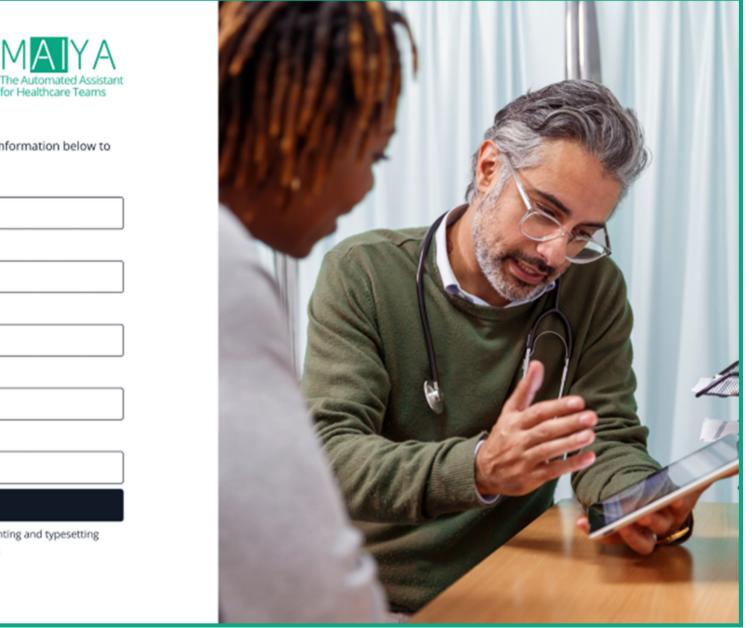


# 3. The patient receives the questionnaire via a unique link via SMS and email.

The patient can choose the language in which he/she wants to answer, as the questionnaire will be translated into several languages.

MATA
The Automated Assista for Healthcare Teams
Login
Velcome to the LTS, please input your information below to tart your questionnaire.
irst name:*
/iddle name(s):
ast name:*
irst Line of Address:*
Date of birth:*
//
Sign in
even because is should dear whether of the excitation and a second time.

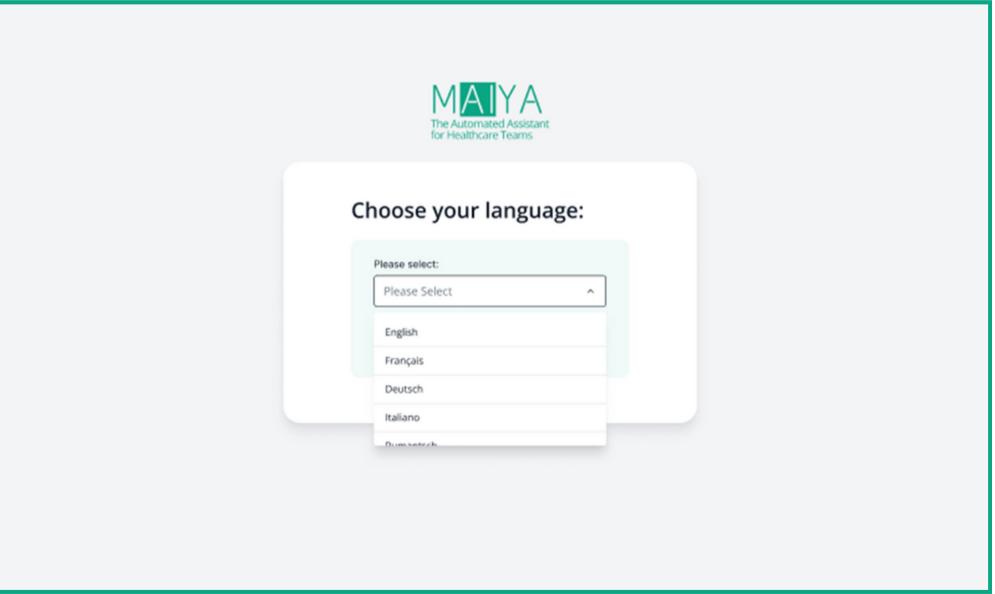
Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry.







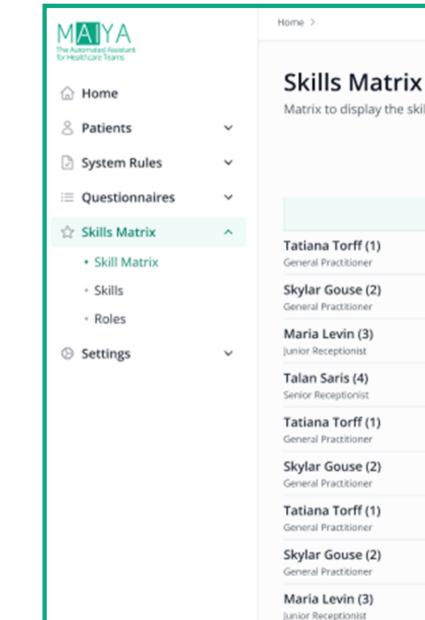
# 4. Based on the answers, Maiya offers the patient the next steps.



5. If the patient needs to visit the GP, the system offers to book an appointment with a specialist.

Maiya is integrated with GP Connect and has a matrix of the skills for individuals at the practice. The system will automatically determine the most cost effective combination of clinicians needed for this patient, especially if an appointment is needed for several conditions, and books the appointments, using not only the practice team, but making full use of the ARRS

roles.



Matrix to display the skill level of all staff.

							Search:	Enter Name
	Skill One	Skill Two	Skill Three	Skill Four	Skill Five	Skill Six	Skill Seven	Skill Eight
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<b>1 (3)</b> nist	0				0		٢	0

PM



6. Maiya has a dashboard with a list of patients being reviewed and the next steps to be taken, based on the answers provided by the patient.

			Home > Reviews					
<ul><li>Home</li><li>Patients</li></ul>			<b>Reviews</b> View all reviews under your practice					
	😑 Reviews		DOB Search:/					
	Practice Rules	~						
	<ul> <li>Practice Rules</li> </ul>		ID PATIENT					
	Adhoc Rules		001 Laurene Dawson					
	<ul> <li>Special Rules</li> </ul>		002 Guy Hampton					
	<ul> <li>Settings</li> </ul>		003 Lewis Wilton					
	🗉 Questionnaires	~	003 Lewis Wilton					
	<ul> <li>Questionnaires</li> </ul>		003 Lewis Wilton					
	<ul> <li>Question Builder</li> </ul>		004 Priscilla Freeman					
	Settings	~						
	<ul> <li>Audit Log</li> </ul>		004 Priscilla Freeman					
	Communications							
	General Settings							
	Skills Matrix							

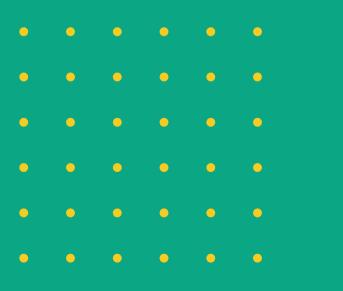
					РМ	Philip Millward	×
//		Name Search:	Enter Name	Filter Name:	A - Z	~	
	DOB	NHS NUMBER	REVIEW STATUS		DATE ADDED	NOTES	
	17/10/197	9 123 456 7890	Requires Urgent Clinica	l Input	12/01/2023	đ	
	17/10/197	9 123 456 7890	Requires Review		12/01/2023	đ	
	17/10/197	123 456 7890	Awaiting Sign-off		12/01/2023		
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	17/10/197	79 123 456 7890	Awaiting Test Result		12/01/2023	đ	
	17/10/197	123 456 7890	Manual Recall		12/01/2023	Î	



## 7.The system RAG rates the responses and automatically highlights anything that requires additional intervention and prompts the clinicians to resolve them.

This directs clinicians to those item requiring a response rather than worrying about information that won't affect their deicison making

MA mated Assistant name Teams	Home > Reviews > Patients	PM Philip Millward 🗡
Home	← Go back Status Requires clinician input	Complete Patient Questionnaire
Patients	Laurene Dawson	
Reviews	NHS Number: 123 456 7890       DOB: 17/10/1979       Address: 53 Ryecroft St, Ossett, Wakefield       Post Code: WF5 9EN	
Practice Rules ~	March 2023 Review	
<ul> <li>Practice Rules</li> <li>Adhoc Rules</li> </ul>	Patient Record Information +	
Special Rules	Results +	
Settings		
Questionnaires 🗸 🗸	Patient Questionnaire - Asthma Review WARNING +	
Questionnaires	Patient Questionnaire - Bipolar Review WARNING +	
• Question Builder Settings ~	Clinician Questionnaire - Asthma Review	
Audit Log	Clinician Questionnaire - Bipolar Review (ALERT) Complete	
Communications		
<ul> <li>General Settings</li> </ul>	Notes:	
<ul> <li>Skills Matrix</li> </ul>		
	Ad-hoc Recall Complete review Save	



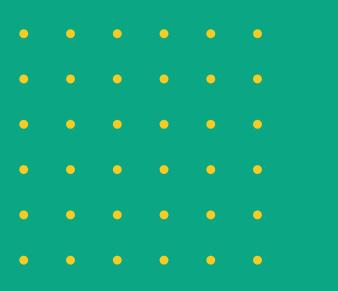
Mrs G is a **45 year old lady** with **diabetes, hypothyroidism, rheumatoid arthritis** and **chronic depression** for which she takes **metformin, thyroxine, methotrexate** and **sertraline**.

Her GP practice operate a **QOF based annual review system based** on her birthday, which is in March. The admin team run this and separate to this also **run the high risk drug monitoring** reports (methotrexate).

In **April** she has **blood tests for methotrexate** monitoring. She contacts the practice for some more. The GP reauthorises another 3 months.

In **May her thyroxine prescriptions run out** and she phones to practice for some more, who check with a GP and call her back to arrange some **blood tests** which take place in **June**. In **June and July** she has to contact the practice for some more, it is checked each time by a GP but only after the bloods are taken can the GP authorise **another year of prescriptions**.

Her 3 monthly **methotrexate blood tests** are taken again in **July, November** and **February** with a 6-month **diabetes review** in **October**. On each ocassion she calls the practice for some more, it is checked by a GP before reauthorising some more. Quite often she has to do this more than once.



In **January** her **sertraline supply runs out** and she phones to practice for some more, who check with a GP and call her back to arrange GP appointment.

The practice invites her for a **review of her diabetes in March** for her **birthday review**. She has an appointment with a healthcare assistant (HCA) and nurse.

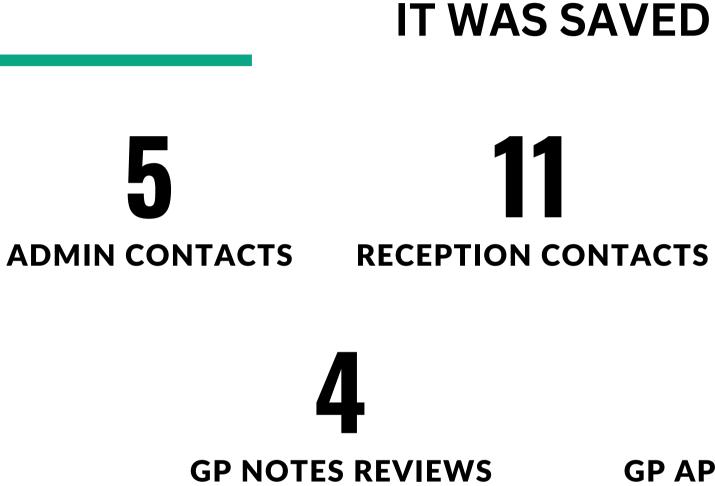
In April the practice swaps and uses <u>Maiya</u> to organise their long-term condition and medication management.

In **May** Mrs G is recalled for **methotrexate monitoring and** because she is coming anyway Maiya organises her thyroxine monitoring at the same time.

Using the rules set by the practice, **Maiya has identified** her as someone whose **diabetes** could be better controlled so in August when she comes for her methotrexate bloods she also has a diabetes review, including foot check.

She has her methotrexate bloods in November. She attends again in February and her Birthday review is done at the same time which includes a review of her blood pressure and diabetes. Maiya has established her PHQ 9 score shows low risk stable mild-moderate depression and she prefers to stay on her current treatment.

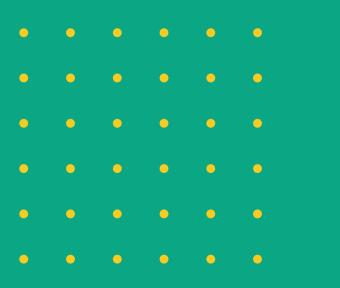
By swapping to Maiya the practice has drastically reduced the amount of work required to achieve the same results.



## THE PATIENT HAS HAD 6 RATHER THAN 16 **INTERACTIONS WITH THE PRACTICE.**

# **HCA APPOINTMENTS**

**GP APPOINTMENT** 

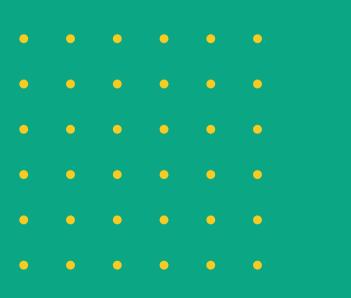


Mr T is a 54-year-old man with hypertension, gout, epilepsy and chronic depression. He takes ramipril, Keppra, allopurinol and sertraline. His birthday is in June and he is called by the practice for a blood pressure check and blood tests. In September he runs out of his sertraline and is called for a GP review. In December his Keppra runs out and he has an epilepsy review with his GP. The GP realises his allopurinol hasn't been monitored, as the HCA in the summer wasn't aware that he needed this, so in January he has some more blood tests. His sertraline is reviewed again by a GP in February.

With Maiya's help the following year Mr T is invited in August and has blood tests for ramipril and allopurinol. He indicates that his epilepsy is well controlled, and his depression score (PHQ9) also shows he is well controlled. The GP who signs off the review wishes him to be reviewed in 6 months. In February is depression score shows moderate depression and Maiya arranges for him to have an appointment with a mental health practitioner (or PA).

Maiya has reduced the number of HCA appointments by 1 (2->1), eliminated the need for a GP appointment at all saving 3 at the cost of an ARRS role.

 $\bullet \bullet \bullet \bullet \bullet \bullet \bullet \bullet \bullet$ 



Mrs P is a 26-year old working single mum with Asthma. She takes salbutamol and steroid inhaler. Her birthday is in August so she is invited for an asthma review with the nurse in July, she is well controlled. In February she consults the practice and is started on a a contreptive pill by a GP with a plan for nurse follow up in May.

When she asks for a repeat pill in May the GP asks Maiya to undertake a pill check. Maiya does this and reports a normal blood pressure with no other problems. In August she is invited for Asthma review by Maiya and because her ACT is 23, she has had no exacerbations this year and uses very little reliever no clinician review is required. The pill check is repeated and reports no issues again.

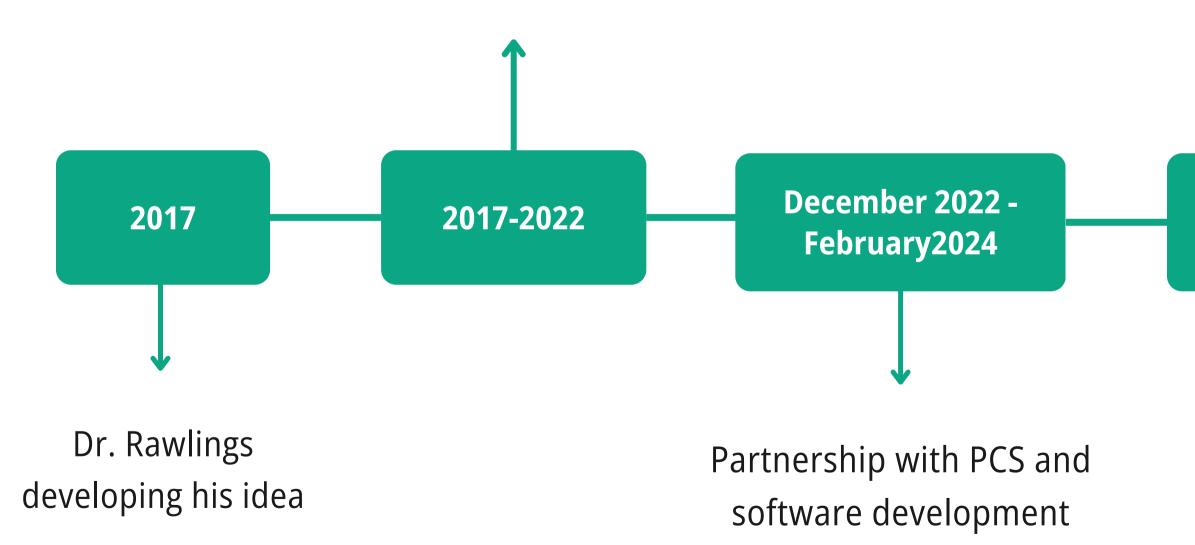
Maiya has been able to fully remote monitor Mrs P, which helps her and also saves the practice 2 nurse appointments.



# DEVELOPMENT

## **DEVELOPMENT MAP**

Research, development and implementation of the algorithm in Dr. Rawlings' GP Practice





## Technical pilot in 3 practices

April 2024 -

May 2024

June 2024

## Full market launch

## **COST-EFFECTIVE**



### **SAVINGS**



### **PER PATIENT PER ANNUM**

## By automating manual processes, reducing the work needed to achieve QOF and optimising appointment times, each practice saves the healthcare team time, which translates into cost savings.

This data was obtained in cooperation with the Medipex medical innovation hub, which has developed a model for calculating the time saved by medical staff. Depending on the organisation of the practice, Maiya's effectiveness can range from £4 to £11 per patient per year.



\*This price is discounted by 20% for practices that sign up to the contact during the summer. The full price of the product is £1.25 per patient per annum.

The data is based on an average general practice with a patient population of 10,000. Calculation was based on a study by the Medipex healthcare innovation hub, which has developed a model to measure the time saved by medical staff. Depending on the practice's organisation, Maiya's efficiency can range from £4 to £11 per patient per year.

## **2 days** of receptionist/week

## **1.5 days** of NURSE/WEEK

## **0.5 session** of gp/week





# WE ARE BUILDING THE FUTURE OF OUR NHS

Have any question? hello@maiya.org.uk https://maiya.org.uk/

