KYNDRYL VITAL · THE BLANK CANVAS WORKSHOP

Connected Care 2031

Nobody falls through the cracks.

A five-year vision for a network of 14 hospitals and 200 clinics

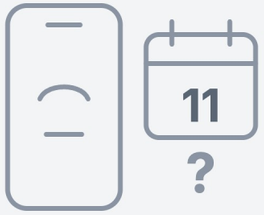
Furkan Sindar · Kyndryl

TODAY · MEET LINDA AND DANIEL

Two people, falling through the same cracks

Linda, 61

Patient · needs a heart specialist



Leaves the clinic with only a phone number

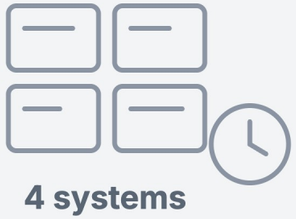
Calls 4 times and waits **11 days**

Gets confused and gives up

1 in 5 patients never complete their referral (22%)

Daniel

Nurse · thinking about quitting



Opens 4 systems to understand one patient

Types notes for **2+ hours** a day

Goes home late and exhausted

18% of nurses leave every year

FOUR PROBLEMS · ONE ROOT CAUSE

Your systems don’t talk to each other, so people fall through the cracks

9 disconnected systems, several from acquisitions

Hospital records	Clinic records	Scheduling
Labs	Imaging	Referrals
Billing	Acquired system A	Acquired system B

System names are illustrative

What leadership sees

11 days average wait for a specialist

22% of referrals never completed

2+ hrs a day on documentation

18% nursing turnover every year

As Kyndryl, we can solve this for you.

IN 2031 · SAME PEOPLE, CONNECTED CARE

Nobody falls through the cracks

Linda, 61

Same doctor, same referral



Appointment booked before she leaves the clinic

Ride and simple instructions on her phone

Her specialist already has her history

3 days to see the specialist, instead of 11

Daniel

Same nurse, same shift



One screen with the full patient history

AI drafts his notes, he checks and signs

Goes home on time, and stays

<1 hr of documentation a day, instead of 2+

CONNECTED CARE · FUTURE-STATE JOURNEY

A Day in 2031: Linda and Daniel

	Morning	Midday	Evening	Result
Linda, 61 Patient	AI books her heart specialist before she leaves the clinic	Gets a reminder. Her doctor already has her history	Feels taken care of	**3 days** to see the specialist Today: 11 days
Daniel Nurse	Sees his patients' full history on one screen	AI drafts his notes. He only checks and signs	Goes home on time	**Less burnout. He stays in his job** Today: 2+ hrs of notes a day

Nobody falls through the cracks — not the patient, not the nurse.

CONNECTED CARE · HOW IT WORKS

What happens behind the scenes

Linda’s referral, before she leaves the clinic

1 The doctor enters the referral during the visit →

2 AI checks every specialist’s calendar in the network, plus her insurance →

3 Linda gets 2–3 options on her phone, close to home →

4 She taps one. Ride, prep steps and reminders are sent

Daniel’s notes, without the typing

1 With the patient’s consent, AI listens during care →

2 It drafts the note straight into the patient record →

3 Daniel reviews, fixes anything wrong and signs →

4 The signed note is visible across all 14 hospitals

THE FOUNDATION UNDER BOTH

One data layer: 9 systems, one patient record

Kyndryl connects complex systems so they work as one

Humans decide · HIPAA and consent · Pilot first

Why 3 days? Booking becomes instant, so the only wait left is the first open specialist slot across the whole network.

CONNECTED CARE · SO WHAT?

What changes, and what has to be true

Business outcomes

2031 targets, to validate in pilot

Referral wait	11 days → **3 days**
Referrals never completed	22% → **<5%**
Documentation per day	2+ hrs → **<1 hr**
Nursing turnover	18% → **~10%**
Data systems	9 → **1 view**

What has to be true

1. **One data layer** connects all nine systems first. Everything else depends on it.
2. **Clinicians decide.** AI suggests and drafts; a human signs off.
3. **Privacy built in:** HIPAA, patient consent and clear data governance.
4. **Enough specialists.** AI speeds up booking, it doesn't add doctors.
5. **Staff trust it.** Nurses help design it and get trained early.

Start with the data layer and one pilot hospital, then scale.

Not four new AI tools.
One connected network.

1 Connect the data → 2 Pilot one hospital → 3 Scale across the network

Your systems don’t talk to each other today. With Kyndryl, they will.

Thank you. Questions?