

“Alexa, turn on nursing efficiency.”

Voice-activated devices have become a ubiquitous part of western society. Albeit Siri on a smartphone or Google Assist device at home, millions of consumers are acquainted with (and perhaps even dependent upon) leveraging voice commands for both practical tasks and fun skills. But the use of voice-activated devices is not restricted to an individual’s private world. As healthcare workers are consumers too, it’s not unreasonable to think clinicians want these voice-activated technologies to support their work roles.

Indeed, a quick search of the internet uncovers a myriad of companies offering an array of voice-activated products targeted to healthcare providers. Referred to by some as the Internet of Medical Things (IoMT), these products are generally positioned to enhance *workflow efficiencies* (e.g., hands-free dictation of notes; obtaining answers to questions about a particular drug usage or procedure without typing on a computer keyboard), support *patient safety* (e.g., reminders to complete personal tasks such as repositioning patients with bed sores) and improve *infection control* (e.g., eliminate multiple care workers touching same keyboard to enter information into the EHR).

The potential benefits of voice-activated devices have piqued the interest of NHS England. This past Fall for example, it was widely [reported](#) that the NHS’ The Health Informatics Service (THIS) was actively pioneering voice-activated technology in the musculoskeletal and physiotherapy services of the Calderdale and Huddersfield NHS Foundation Trust (CHFT).

While THIS’ efforts admirably reflect a controlled attempt to introduce voice-activated technologies into the clinical setting, there is no reason to believe clinicians are not already leveraging their own **personal** voice-activated tools in the care of patients. With most smart phones/watches now offering some-type of voice-activated capability, clinicians can readily access these devices to dictate reminders/notes to themselves about a patient in their care (e.g., “Siri, set reminder to give Ms. Jones in 5A Lexapro at 2 pm”; “Hey Google, set reminder to chart ‘gave Lexapro to Ms. Jones at 2 pm’”). This is especially pertinent given the demands on many clinicians to enter information into the EHR in a timely manner despite challenges from significant workforce shortages. The unregulated/unauthorized use of employee-owned devices in the care of patients obviously presents a patient privacy/security concern for healthcare leaders.

To get a sense of how healthcare leaders are addressing the ubiquitous nature of employee-owned voice-activated tools, we can leverage insights from the 2022 CHIME Digital Health Most Wired (DHMW) survey. Reflecting the digital health capabilities and usage of 38,800+ hospitals and health system worldwide, evidence from the 2022 survey reveals growing support for these tools. More specifically, when asked if the infrastructure of their care site supports the use of four select employee-owned devices and functionalities in the care of patients, 42% of both U.S. and Internationally based respondents answered affirmatively regarding voice-activated devices (Chart 1). Though registering as the least supported device of the four devices considered, the year-over-year increase in organizations supporting employee voice-activated devices was a remarkable 12.5%.

Whether they like it or not, an increasing number of healthcare leaders are conceding the ubiquitous nature of employee-owned voice-activated tools and working to integrate their use into their operations. While the support of these tools brings with it a whole host of security and governance

issues healthcare leaders must address, the growing consensus seems to be that it is better to control rather than ignore their presence and use.

Which of the following types of employee-owned devices used in the care of your patients, does your organization support?

