

Centium Software's unique selling proposition

BY Karamjit Singh

G Saravanan, CEO of Centium Software Sdn Bhd, has learnt much from running a software company, including how important it is to be customer-centric and to have a mentor.

His MSC Malaysia-status company had started out by writing software for call centres, but it eventually found a sweet spot in the healthcare sector with its hospital information system (HIS) solutions, or what it calls an enterprise resource planning (ERP) solution for hospitals.

The self-confessed geek turned entrepreneur has learnt other things as well, such as how fate can sometimes deal you a kind hand. This happened during his university days at UTM when Sara, as he prefers to be called, was persuaded by friends to check out a recruitment fair that was being held at the time.

"I was actually quite reluctant, especially since I was wearing torn jeans, but my friends persuaded me to at least just walk through it. That's what I was doing when a hand tapped me on the shoulder as I was on my way out. I turned around to see a tall guy from Motorola. He introduced himself and asked me what I was studying, and after a short conversation persuaded me to apply for a job," recalls Sara.

The next thing he knew he was flying off to Motorola's research centre in Bangalore to be part of a five-country team working on a mobile browser in December 1999.

"I was just a fresh graduate, but was so lucky to be part of that exciting project and really have to thank Thillai Raj, the current CTO of Mimos Bhd, for the opportunity and exposure as he had wanted some fresh grads thrown into the team of experienced engineers. He was the Motorola executive at the recruitment fair."

Sara may have caught a break, but after that it was his performance that kept him at the cutting edge of the research work Motorola was doing. His stint, which was supposed to be for six months, lasted 18 months. In the meantime, the team was whittled down every six months. Those who remained on it worked on improved versions of the browser.

"It was a high-pressure environment because a few months before I joined Motorola, Nokia shocked the mobile world by coming up with a phone browser. It was still known as a tyre company back then, and here you had Motorola, which owned so many patents on the mobile phone,

being put in the shadow of Nokia," says Sara.

Upon his return to Malaysia, Motorola sent the young man to the US in early 2001, to the factory where its next generation of mobile phones that come with built-in browsers were being made. There Sara worked with the hardware engineers to ensure that there were no problems with the browsers.

When he came back home, Sara met his lecturers at UTM to tell them that they had to change the curriculum of the computer science faculty. "They say that you typically only use 30% of what you learn in university, but for me it was 10% as things change so fast in computer science, and I felt I had to share that with my teachers," he says.

Sara then took a sabbatical from Motorola to embark on a master's degree, which he never finished. "I started working part-time, writing call-centre software for a company called Asiankom and ended up getting too involved with that."

He resigned from Motorola and started Centium Software in 2004 with Asiankom Sdn Bhd founder Ravishanker VThambias as the majority shareholder and chairman. It was a smart move by Ravishanker who clearly saw the potential in Sara, who was able to write software for PABX systems.

This was significant because at the time, the hardware cost RM100,000 whereas the software cost RM200,000. By writing the software himself, Sara saved Asiankom 70% of the cost, which allowed the company to price its PABX systems more competitively.

So, Centium started out as a software house focusing on contact centre solutions and customer relationship management, but it was a saturated market. Its first steps into healthcare came in early 2005 when Columbia Asia Hospital, a PABX customer of Centium, asked whether Sara could help it with its hospital information system, which was not working well. "When a customer asks for help, even if it is in an area you are not familiar with, you need to at least try to help them out. Plus, it was a software problem, so we had to give it a go."

The team was able to fix the problem that the original vendor, a software company from India, could not. Grateful that the HIS was finally working as advertised, Apollo Hos-

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pitals quickly asked Sara to fix the same problem at its hospitals in Ho Chi Minh City in Vietnam and Bangalore in India. It was during this time that Sara started to learn about hospital culture and how things work and do not work. "It was my first step in learning about this business," he says.

What Sara learnt was that hospitals operated with unique aspects even if they were within the same group and this required a degree of customisation. For software companies, though, this is not a big deal.

In 2005, Sara met the man he describes as his mentor — Solutions Protocol CTO Dr Jai Mohan (now Datuk), who was looking for someone who could develop a radiology solution that could be delivered over the mobile phone. Bear in mind, this was before the advent of smartphones. The solution was for a hospital project in Pakistan that Solutions Protocol was bidding for.

Jai Mohan and Sara spent a week in Pakistan during the submission of the bid. It was an eye-opening trip for Sara: "It was a crash course for me in healthcare and it started on our flight when I asked Jai Mohan what EMR (electronic medical record) was.



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Since then he has become a mentor to me as he is one of those rare people with both medical expertise and technical know-how."

That said, the Rawalpindi earthquake in 2005 meant that the funds allocated to the hospital went to reconstruction efforts instead. Still, the time spent on the proposal and being on the ground in Pakistan was not wasted as Columbia Asia approached Sara later that year to ask if he could build it a HIS, which is an umbrella

term for the comprehensive and integrated information systems designed to manage the medical, administrative, financial and legal aspects of a hospital. For instance, an EMR is a sub-set of a HIS.

This marked Centium's entry into the world of healthcare as an integrated, no longer piecemeal, service provider. The first solution for Columbia Asia was ready in 2006, which it deployed in Jakarta

at a hospital for women and children. The project was a success and "the rest is history", smiles Sara.

Centium subsequently rolled out its HIS at all seven Columbia Asia hospitals in Malaysia and is looking to make inroads into Vietnam and Indonesia, besides keeping an eye on the Philippines.

Interestingly, while Sara is looking at Malaysia too, he is sticking to the private sector. "The public healthcare sector is too political," he observes.

In Vietnam, Centium already has a hospital under Fortis Group as his customer. It took a year to deploy the HIS and to customise it to the

client's needs. "As I said earlier, you cannot use a McDonald's model in healthcare as each country has its own regulations and regulations can change too. Each hospital also has its own needs."

Centium has responded to this situation by coming up with a solution that Sara says is special to the market and is the company's unique selling proposition.

"From 2008 onwards, we started calling our HIS an ERP solution for hospitals. The name aside, what is really unique is that we have made the forms and reports in our ERP solution fully editable.

"This is significant because typically software companies love it when their customers ask them to make changes to the software they have bought. In industry lingo, this is called variation orders and of course, the vendor will charge the client for any changes it wants — after the system is installed."

However, with Centium's ERP, its clients can make the changes themselves, well at least the people in their IT department can.

This is another change that Sara has noticed. "Clients are smarter today and many have their own IT teams so what we have done with

our ERP for healthcare is to let their IT people change the forms and reports as the hospital users want. This affords them a lot of flexibility and saves them money too."

Saving money and standardisation is something Sara would like to see in Malaysia too, but there has been no regulation to standardise the protocol on which the public sector HIS solutions should be based. As a result, the various vendors which have implemented HIS in public hospitals use different platforms, meaning that currently information cannot be sent from one hospital to another.

Sara is a member of the Malaysian Informatics Healthcare Association, which has been trying to push for a standard protocol to be used, but so far its efforts to get the government to do so have not been successful, which frustrates Sara.

He believes lives can be saved and doctors' time better utilised if patients' information can be shared by public hospitals.

Nonetheless, Sara is intent on growing Centium to a stage where he can list it and has taken steps to apply for a patent on his ERP solution. The company's revenue for 2011 was about RM5 million, he says. ■