



# Best intranet platforms for healthcare: **a buyer's guide.**

Healthcare enterprises are facing unique challenges trying to engage their diverse, dispersed, and time-poor workforces. This guide digs into how to evaluate and choose the best employee experience app to connect and support every employee.

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**EXECUTIVE SUMMARY**

Healthcare enterprises are facing unique challenges trying to engage their diverse, dispersed, and time-poor workforces. This guide digs into how to evaluate and choose the best employee experience app to connect and support every employee.

- ✓ The "best" healthcare intranet is the one that reliably reaches frontline staff, reduces tool-hopping, and proves compliance, not the one with the longest feature list.
- ✓ Treat your intranet as a digital front door: one personalized entry point to comms, knowledge, and everyday tools, with secure access and strong search.
- ✓ Integration perception matters in healthcare because adoption depends on healthcare professionals' trust and IT confidence. Don't settle for "integration theater" (links and iframes).
- ✓ Build your shortlist using a weighted scorecard and require vendors to demo workflows end to end (identity → targeting → search → audit trail → analytics).
- ✓ Prioritize governance, security, and auditability (identity and access controls, content lifecycle, versioning, and reporting) to support regulated environments.
- ✓ Frontline friction is real: research shows large-scale costs to patient care tied to miscommunication and time lost searching for info. Ease of use is non-negotiable.
- ✓ If you're evaluating Unily, validate integrations and governance in the ways that matter most to healthcare (SSO, permissions, M365, HRIS, ServiceNow, analytics), and use the checklist and scorecard below.

**What this guide covers:**

- What healthcare providers should expect from a modern intranet solution (clinical + corporate needs)
- Must-have capabilities vs nice-to-haves, with healthcare-specific watch-outs
- How to evaluate integration depth (and avoid integration theater)
- Comparison tables, decision framework, and a ready-to-use scorecard template
- A balanced recommended shortlist of common intranet options



# What an intranet platform is (and what it isn't)

A modern intranet platform is not just a document repository or a news page. The best intranet platforms for healthcare function as a single, personalized entry point to internal communications, knowledge, and tools, across devices and locations.

**Analyst definitions of intranet platforms generally include:**

- ✓ A central portal experience
- ✓ Communication tools that facilitate multichannel, real time publishing (web, mobile, sometimes signage)
- ✓ Identity, access controls, and governance
- ✓ Search and knowledge discovery
- ✓ Extensibility and integrations (not just links)

**What it isn't:**

- ✗ Only SharePoint pages with inconsistent ownership
- ✗ A comms app that can't connect people to tools and workflows
- ✗ A collection of deep links that pushes users into system sprawl



# What healthcare organizations need from an intranet

The healthcare industry has a unique mix of constraints: shift work, distributed sites, a large frontline population, and higher expectations for security and auditability. The intranet needs to work for clinicians, corporate teams, and support staff, without creating extra friction.



# Key challenges in frontline and deskless healthcare environments

The most common pain patterns look like this:

- ↘ **Hard-to-reach clinical staff:** critical updates don't land because people aren't at desks or checking email frequently.
- ↘ **Manual compliance tracking:** policy read receipts and training acknowledgements live in spreadsheets, with little audit readiness.
- ↘ **Too many systems to navigate:** employees switch between HR portals, collaboration tools, knowledge bases, and internal sites to reach critical information, with no unified entry point.
- ↘ **Recognition and culture are siloed:** the moments that build community don't scale across departments and locations.



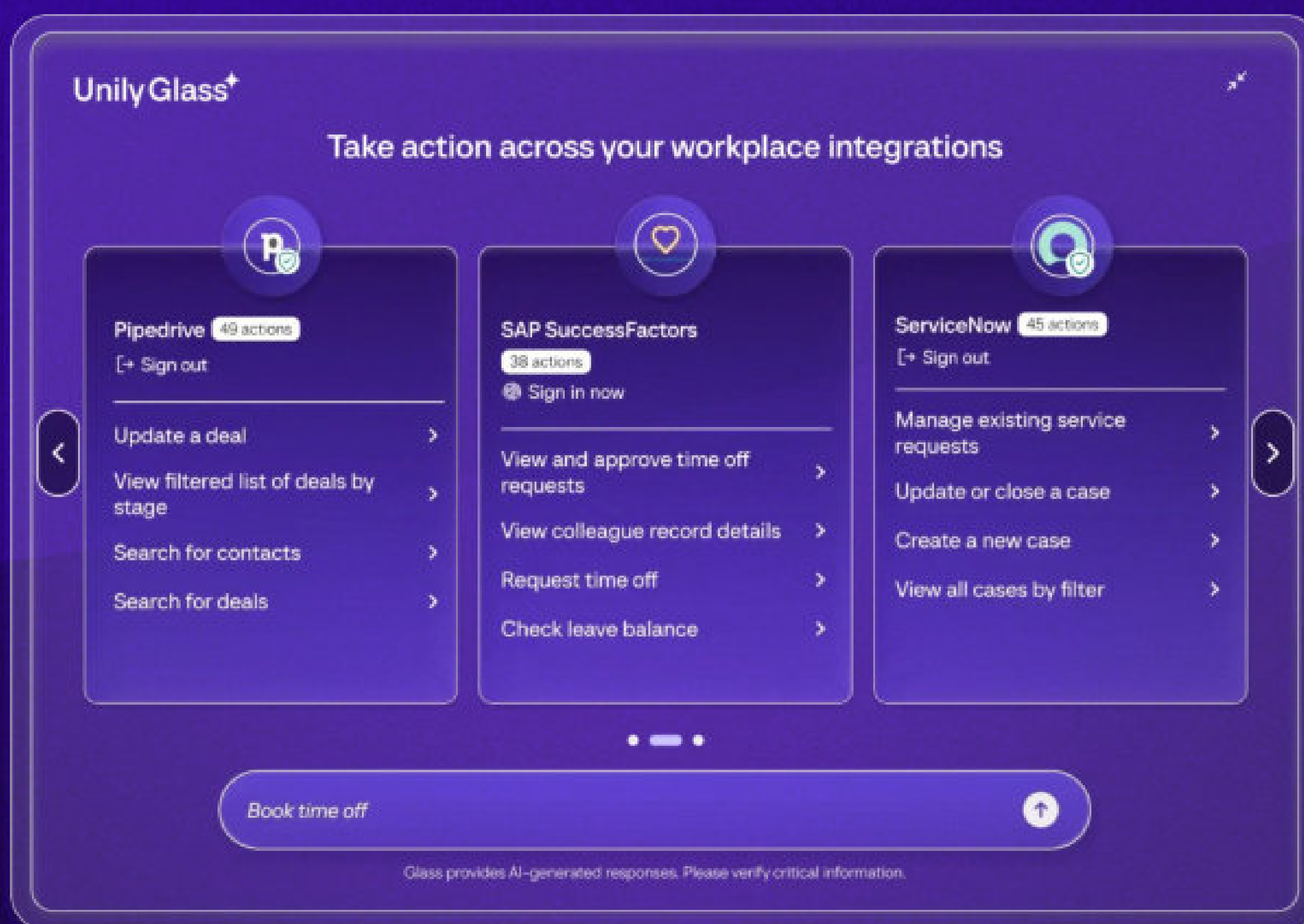


# The “digital front door” requirement

Healthcare workers should not have to remember where to go to do basic tasks like:

- ✓ Find the latest protocol or SOP
- ✓ Locate the right form
- ✓ Find the right person
- ✓ Get role-based updates
- ✓ Access core tools quickly

That’s why a “**digital front door**” design matters: one central hub that brings comms, knowledge, and systems together in a secure, personalized experience.



**Unily Glass** takes this one step further. This AI-powered execution layer sits across your entire enterprise stack. Employees get a unified conversational interface to ask questions, surface tools and information, and complete work, without switching between systems. HR requests, CRM updates, policy queries, all completed in seconds, from a single interface.



# The CIO productivity lens

For **IT leadership**, the value case typically lands in:

- ✓ Reduced time-to-information
- ✓ Fewer avoidable tickets and “where do I find...” requests
- ✓ Governance and audit readiness
- ✓ Standardization of access and permissions
- ✓ Integration and workflow efficiency

**IDC's** framing of modern digital workspaces emphasizes “orchestration” across tools, and an “architecture-first” approach including augmentation with AI.

🔍 Share file

✓ Find Information

Ask anything... 🎤 ➔





# Essential intranet capabilities for healthcare: must-have vs nice-to-have

Below is a practical way to separate “table stakes” from “differentiators” for healthcare.

CAPABILITY COMPARISON TABLE (HEALTHCARE LENS)

| Capability area                  | Must-have for healthcare                                                                                                  | What to validate in demos                                              | Watch-outs                                               |
|----------------------------------|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------|
| Frontline reach (mobile, alerts) | Mobile-first UX, push notifications, offline/low connectivity options, and a secure mobile app                            | “Urgent policy update” workflow: targeting → delivery → acknowledgment | If mobile is a wrapper, adoption drops fast              |
| Audience targeting               | Role, location, shift, department segmentation                                                                            | Can you target clinicians without manual lists?                        | Over-reliance on static groups becomes unmanageable      |
| Governance + audit trail         | Version control, approvals, read tracking, audit logs                                                                     | Prove “who saw what, when”                                             | Spreadsheet-based tracking breaks under scrutiny         |
| Search + knowledge discovery     | Federated search and strong relevance controls, including advanced search                                                 | Find “SOP X” and “policy Y” in under 15 seconds                        | Search that only covers one repository creates distrust  |
| Integrations                     | Identity + SSO, M365, Google, HRIS, ITSM, key content repositories, plus instant messaging and task management ecosystems | End-to-end: SSO → permissions → search → deep action                   | “Integration theater” (links/iframes) is not integration |
| Content hubs                     | Role-based hubs (clinical, corporate, sites)                                                                              | New nurse onboarding hub in 10 minutes                                 | Overly rigid templates limit adoption                    |
| Analytics                        | Adoption, reach, search analytics, content performance                                                                    | Can you see what’s failing and fix it?                                 | Vanity metrics without actionability                     |
| Culture + recognition            | Peer recognition, social features and facilitating teamwork                                                               | Does it work for frontline team members?                               | Social features without governance can stall             |

Why this matters: **Gartner**’s IPS feature set commonly includes security and identity, targeted publishing, search, and extensibility, plus capabilities like multichannel support, and “employee engagement” features.



# Security, privacy, and compliance considerations in healthcare

To ensure security of sensitive data in a healthcare environment, your intranet must support well-governed document management, access control, and audit trails.

It is important to consider HIPAA compliance in your evaluations and whether any new tooling meets these strict parameters. Some platforms, like Unily, align with the **HIPAA security rules**, so it's important to check this early on in the evaluation process.

CONSIDERATIONS TABLE: SECURITY AND COMPLIANCE

| Area                   | What good looks like                                                      | Questions to ask                                                    | Proof to request                                 |
|------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------|
| Identity and access    | SSO, role-based access, conditional access support, strong authentication | Can we enforce least privilege by role and site?                    | SSO demo, permission model walkthrough           |
| Auditability           | Logs for content changes, approvals, access and reads                     | Can we prove distribution and acknowledgement?                      | Sample audit export, retention settings          |
| Content governance     | Approval workflows, versioning, expiry, reviews                           | How do we prevent outdated protocols?                               | Demo of content lifecycle + alerts               |
| Data handling          | Clear posture on security standards and controls                          | How do you separate internal content from any patient data systems? | Security documentation, third-party attestations |
| Mobile risk management | Secure mobile access and policy controls                                  | How do we support BYOD safely?                                      | MDM options, app security model                  |

Gartner’s definition of intranet packaged solutions explicitly includes security and identity, and access controls as core elements.

**Healthcare reality check:** frontline workers often rely on **personal devices** for work-related access in practice, which raises governance and risk questions around patient data you need to address through platform design and policy.



# Integrations: why perception matters, and how to evaluate depth

In healthcare buying decisions, **integration** “feel” can decide the outcome:

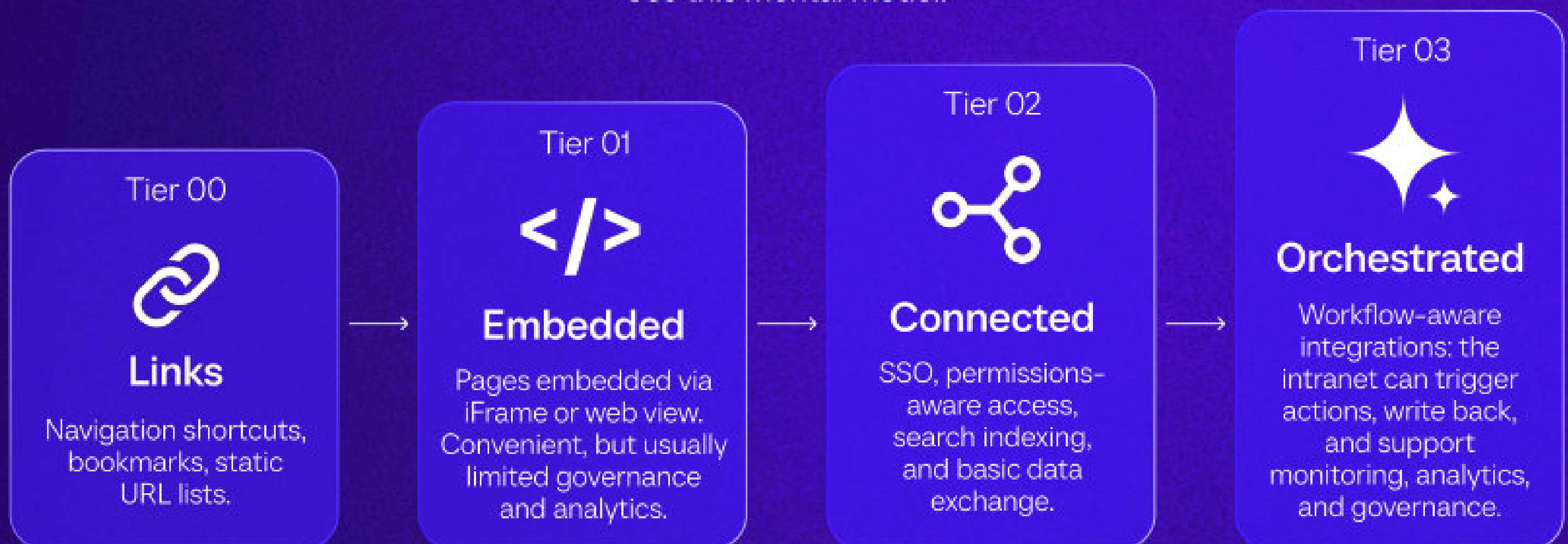
- ~ Clinicians won't adopt a hub that doesn't reliably surface the right tools and knowledge
- ~ IT won't champion a platform that can't be governed, monitored, or scaled
- ~ Procurement won't greenlight a solution that increases operational risk

## Integration Depth vs “Integration Theater”

A vendor can say “we integrate” and still deliver a glorified link list.

A useful analyst standard here is that simple deep links, iFrames, or embedded experiences do not count as true extensibility.

Use this mental model:



# Integration Readiness Checklist

Use this to assess any vendor, including Unily.

## Identity and Access

- ⌘ Supports your SSO standards (SAML/OIDC), MFA, conditional access
- ⌘ Role and location-based access controls, including external/contract staff if needed
- ⌘ User provisioning and deprovisioning via HRIS/identity source of truth

## Search and knowledge

- ⌘ Federated search across core repositories (at minimum: intranet, M365/SharePoint, key knowledge bases)
- ⌘ Permissions-aware search results (share information with no leaking restricted content)
- ⌘ Search analytics (zero result queries, failed queries, click-through)

## Core systems

- ⌘ Microsoft 365 and Google experience: content, search, and daily entry points
- ⌘ HRIS integrations (Workday, UKG, etc) for profiles and segmentation
- ⌘ ITSM (ServiceNow or equivalent) for service content and request workflows

## Governance and audit

- ⌘ Audit logs for content creation, updates, approvals
- ⌘ Read tracking / acknowledgement options for critical comms and policies
- ⌘ Content lifecycle automation (expiry, review cycles, versioning)

## Operations and monitoring

- ✓ Integration monitoring and error visibility (*what broke, who is impacted*)
- ✓ Clear integration roadmap and partner ecosystem
- ✓ API documentation and a supported extensibility model (*not bespoke one-offs*)

## INTEGRATION SCORECARD TEMPLATE (0–5 PER ROW)

| Integration criterion                      | Weight | Vendor score (0–5) | Evidence provided | Notes |
|--------------------------------------------|--------|--------------------|-------------------|-------|
| SSO + lifecycle provisioning               | 15%    |                    |                   |       |
| Permissions-aware federated search         | 15%    |                    |                   |       |
| M365/Teams depth (not just links)          | 10%    |                    |                   |       |
| HRIS-driven targeting and profiles         | 10%    |                    |                   |       |
| ITSM/service content integration           | 10%    |                    |                   |       |
| Auditability (logs, exports, retention)    | 15%    |                    |                   |       |
| Content lifecycle automation               | 10%    |                    |                   |       |
| Extensibility (APIs, SDK, supported model) | 10%    |                    |                   |       |
| Monitoring + support model                 | 5%     |                    |                   |       |
| Partner ecosystem + roadmap clarity        | 0–5%   |                    |                   |       |



# Use-case fit: map your healthcare problems to platform requirements

USE-CASE FIT TABLE

| Healthcare problem           | What “good” looks like                                             | Capabilities to prioritize                                        | Proof to request                         |
|------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------|------------------------------------------|
| Hard-to-reach clinical staff | Urgent updates reach the right roles fast, on the devices they use | Mobile parity, offline access, push notifications, targeting      | Targeted alert demo + delivery reporting |
| Manual compliance tracking   | Proof of delivery and acknowledgements without spreadsheets        | <b>Read tracking</b> , audit logs, version control, review cycles | Audit export + content lifecycle demo    |
| Too many systems             | One personalized entry point to tools and knowledge                | Federated search, SSO, M365 + HRIS integrations                   | “Start of shift” workflow demo           |
| Recognition is siloed        | <b>Recognition</b> and culture scale across departments            | Social + recognition features, mobile feeds                       | Frontline recognition scenario demo      |



# Evaluation criteria: how to compare intranet platforms objectively

Questions to ask (by stakeholder)

## CIO / IT Leadership

- ✎ How do you handle identity, provisioning, and deprovisioning at scale?
- ✎ How do you prove integration depth beyond deep links and embeds?
- ✎ What controls exist for audit logs, retention, and exportability?

## Internal Comms

- ✎ **Can we target** by role, site, and shift without manual lists?
- ✎ Can we measure reach and understanding, not just page views?

## Clinical Operations

- ✎ Can we reliably surface the right SOPs and forms for each unit?
- ✎ How does the **mobile app** support effective decision making for improved patient outcomes?
- ✎ How does mobile work under real connectivity constraints?

## Security / compliance

- ✎ What governance exists for content lifecycle, approvals, and access controls?
- ✎ Can we produce audit-ready evidence of distribution and acknowledgements?

## Procurement

- ✎ What is the true cost of ownership (*licenses, services, integrations, admin time*)?
- ✎ What does “implementation” include, and what is required from our team?

# DECISION FRAMEWORK: WEIGHTED SCORECARD TEMPLATE

| Category                            | Weight | What to measure                                  | Score (0–5) |
|-------------------------------------|--------|--------------------------------------------------|-------------|
| Frontline reach and UX              | 15%    | Mobile, targeting, alerts, offline options       |             |
| Search and knowledge                | 15%    | Federated search, relevance controls, analytics  |             |
| Integration depth                   | 20%    | SSO, M365, HRIS, ITSM, APIs, monitoring          |             |
| Governance and audit                | 20%    | Versioning, approvals, read tracking, logs       |             |
| Admin and content operations        | 10%    | Templates, ownership model, lifecycle automation |             |
| Analytics and optimization          | 5%     | Reporting that drives action                     |             |
| Vendor viability and roadmap        | 5%     | Healthcare fit, support, referenceability        |             |
| Implementation and adoption support | 10%    | Change mgmt, training, enablement                |             |



# Platform approaches: pros and cons

1

## **SaaS intranet platforms** (intranet packaged solutions)

**Best for:** organizations that want a dedicated intranet with fast time to value, strong governance, and a unified experience across devices.

- ✔ Purpose-built **intranet** capabilities, governance, and publishing controls
- ✔ Often stronger out-of-the-box mobile experience
- ✔ Clear platform ownership model
- ✘ Requires integration diligence with M365 and core systems
- ✘ Vendor selection matters for long-term extensibility

2

## **Microsoft 365 / SharePoint-led approaches**

**Best for:** organizations deeply standardized on Microsoft who want to assemble an intranet experience using SharePoint, Viva, and partner add-ons.

- ✔ Familiar ecosystem and content storage patterns
- ✔ Potentially lower incremental platform cost (depending on licensing)
- ✘ Can become fragmented across sites and owners
- ✘ Mobile and frontline experience quality varies significantly
- ✘ Governance and search can be inconsistent without strong design and ownership

### 3

## Comms-first employee communication platforms

**Best for:** urgent comms reach and campaigns, especially where frontline access is the top priority.

- ✔ Strong broadcast, segmentation, and campaign tooling
- ✔ Often quick to deploy for comms use cases
- ✗ Might not function as a full digital front door
- ✗ Knowledge, search, and workflow depth can be limited

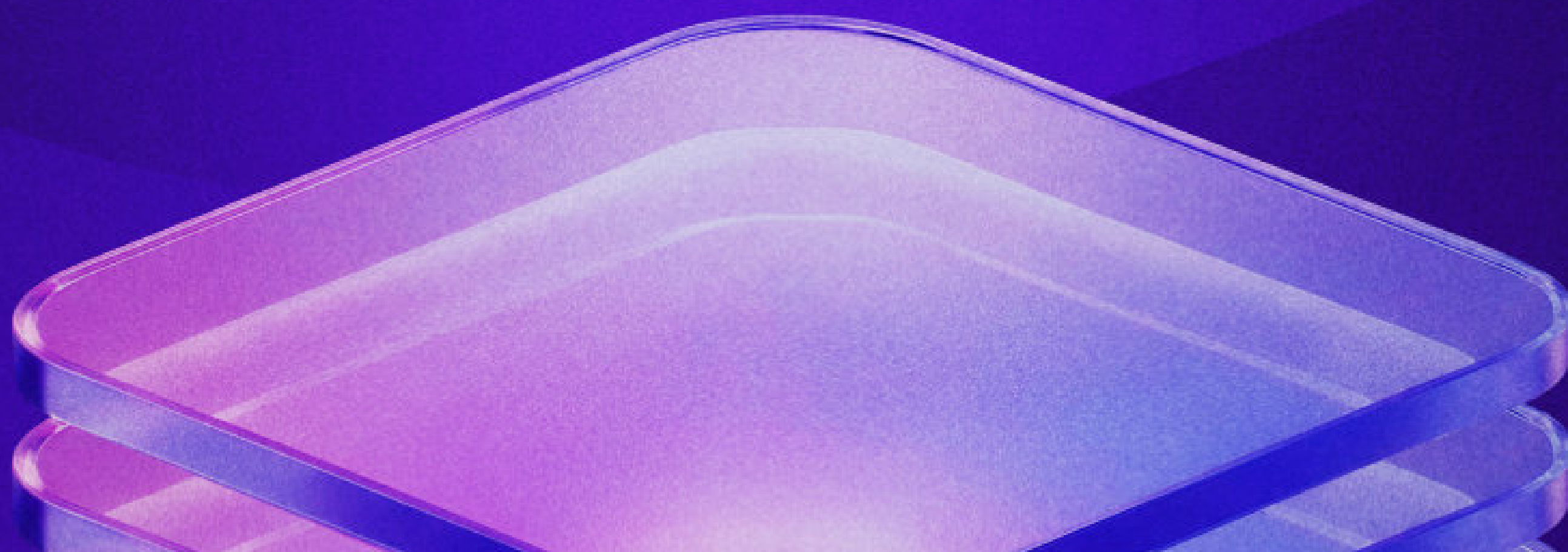
### 4

## Composable experience stacks

**Best for:** health systems with mature digital workplace teams that want to stitch together best-of-breed tools with strong internal engineering support.

- ✔ Maximum flexibility
- ✔ Can align tightly to enterprise architecture goals
- ✗ Higher build and maintenance burden
- ✗ Governance and consistency depend on internal maturity

IDC's guidance emphasizes an architecture-first approach and "orchestration" to reduce siloed experiences.





# Comparison: leading intranet platforms for healthcare

There is no single “winner” across every healthcare environment. A practical shortlist should include options that match your platform strategy:

**How to use this table:** pick 3–6 vendors, then force a standardized demo script and score them using the weighted framework above.

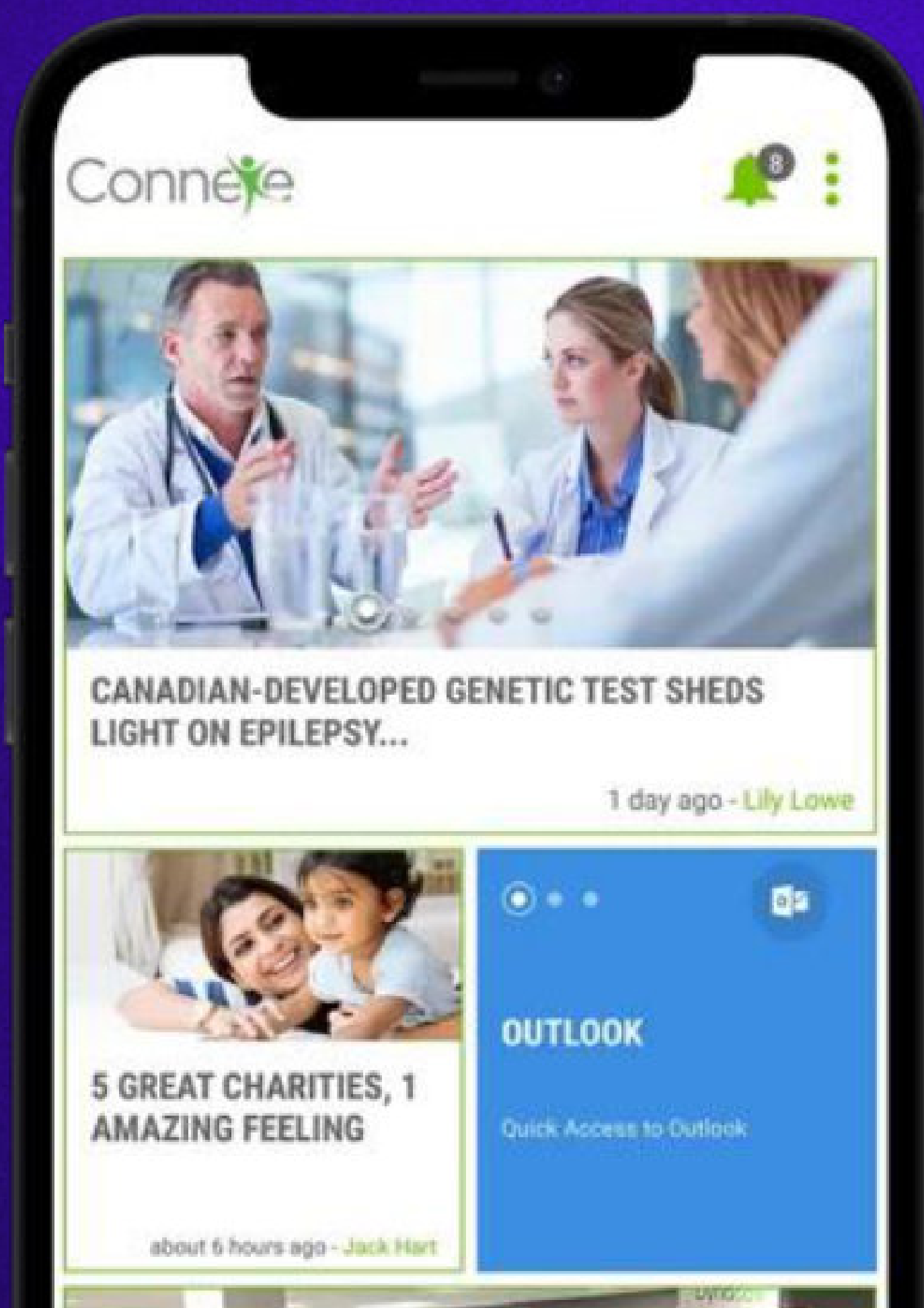
RECOMMENDED SHORTLIST TABLE (HIGH-LEVEL POSITIONING)

| Option                                      | Approach                                    | Best for                                                                        | Watch-outs                                                    | Bottom line                                                                     |
|---------------------------------------------|---------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------------------------------------------|
| Unily                                       | AI-native enterprise intranet + EX platform | Complex, multi-site healthcare with frontline needs and governance requirements | Validate integrations with your systems using the scorecard   | Strong fit when you need a unified digital front door and measurable governance |
| Microsoft SharePoint + Viva (plus partners) | Microsoft ecosystem build                   | Microsoft-standardized orgs with strong internal ownership                      | Fragmentation risk, uneven frontline UX                       | Works when you have governance maturity and a clear operating model             |
| Staffbase                                   | Comms-first platform                        | Broad reach, campaigns, frontline communications                                | Validate knowledge/search depth if you need a true front door | Great for comms-led objectives, may need add-ons for intranet depth             |
| Interact                                    | Enterprise intranet platform                | Structured comms + intranet with governance priorities                          | Validate integration depth and mobile needs                   | Strong contender for enterprise intranet programs                               |
| LumApps                                     | Employee hub with integrations              | Organizations seeking a modern employee portal experience                       | Validate governance and regulated workflows                   | Often shortlisted for hub experiences in large orgs                             |
| Simpplr                                     | Modern intranet                             | Organizations prioritizing simplicity and fast rollout                          | Validate complex segmentation and governance                  | Good for streamlined intranet programs                                          |
| ThoughtFarmer / Igloo / MangoApps (varies)  | Intranet and collaboration options          | Specific intranet + collaboration needs                                         | Validate enterprise governance and integrations               | Can fit well depending on requirements and scale                                |
| Frontline-focused apps (varies)             | Frontline comms and enablement              | Deskless-first comms needs                                                      | Often not a full intranet replacement                         | Useful as part of a broader digital workplace strategy                          |

# Why Unily shows up in healthcare shortlists *(evidence-based, not hype)*

Unily's own public healthcare stories highlight the easy access "digital front door" and adoption outcomes that healthcare buyers typically care about:

- ✓ **Dynacare:** achieved 100% adoption, and recognition among "best intranet design" lists, with the platform positioned as a daily destination for tools and information.
- ✓ **Cardinal Health:** Unily partnership reached 50k employees across desktop, mobile, and tablet to streamline comms and modernize the employee experience.



If you're evaluating Unily specifically, the most important thing is to validate integration depth and governance in your environment, not to rely on generic integration claims. Use the Integration Readiness Checklist and Scorecard to make it concrete.



# Implementation and adoption: what success looks like in healthcare

## Step-by-step approach (practical)

- 1** **Define your “start of shift” journeys**  
What does a nurse, clinician, lab tech, and manager need in the first 2 minutes?
- 2** **Build a minimum lovable front door**
  - A - targeted news and alerts
  - B - role-based resource hubs
  - C - federated search across your top repositories
  - D - SSO and permission model
- 3** **Set governance early**
  - A - content owners per domain (clinical policies, HR, IT, site operations)
  - B - approval workflows and review cycles
  - C - templates for consistency
- 4** **Pilot in one clinical area and one corporate area**
  - A - measure time-to-info
  - B - reduce “where is...” tickets
  - C - tune targeting and search relevance
- 5** **Scale with champions**
  - A - unit-based champions
  - B - train content owners, not just end users
  - C - publish “what changed” updates with proof of value

## Common pitfalls (and how to avoid them)

**Pitfall:** launching a homepage before solving “find the thing”

**Fix:** prioritize search + role-based hubs first.

**Pitfall:** “We’ll integrate later”

**Fix:** make 2–3 critical integrations part of phase 1, and score vendors on depth.

**Pitfall:** governance as an afterthought

**Fix:** define content lifecycle (owner, review, expiry) before launch.



# Cost and ROI: where value shows up

Healthcare intranet ROI often comes from a mix of:

- ✓ faster access to policies and resources
- ✓ reduced duplication and rework
- ✓ better comms reach to frontline workers
- ✓ fewer avoidable support tickets
- ✓ improved onboarding efficiency

Frontline research highlights the scale of losses from miscommunication and information friction, and the time burden of searching for needed information.

| Value driver          | What to measure               | Example metric             |
|-----------------------|-------------------------------|----------------------------|
| Time-to-information   | Avg time to find SOP/form     | Minutes saved per shift    |
| Comms effectiveness   | Reach + acknowledgement rates | % reached within X hours   |
| Ticket deflection     | “How do I...” requests        | Reduction in IT/HR tickets |
| Onboarding efficiency | Time to competence            | Days reduced for key roles |
| Compliance readiness  | Audit evidence availability   | Time saved in audits       |



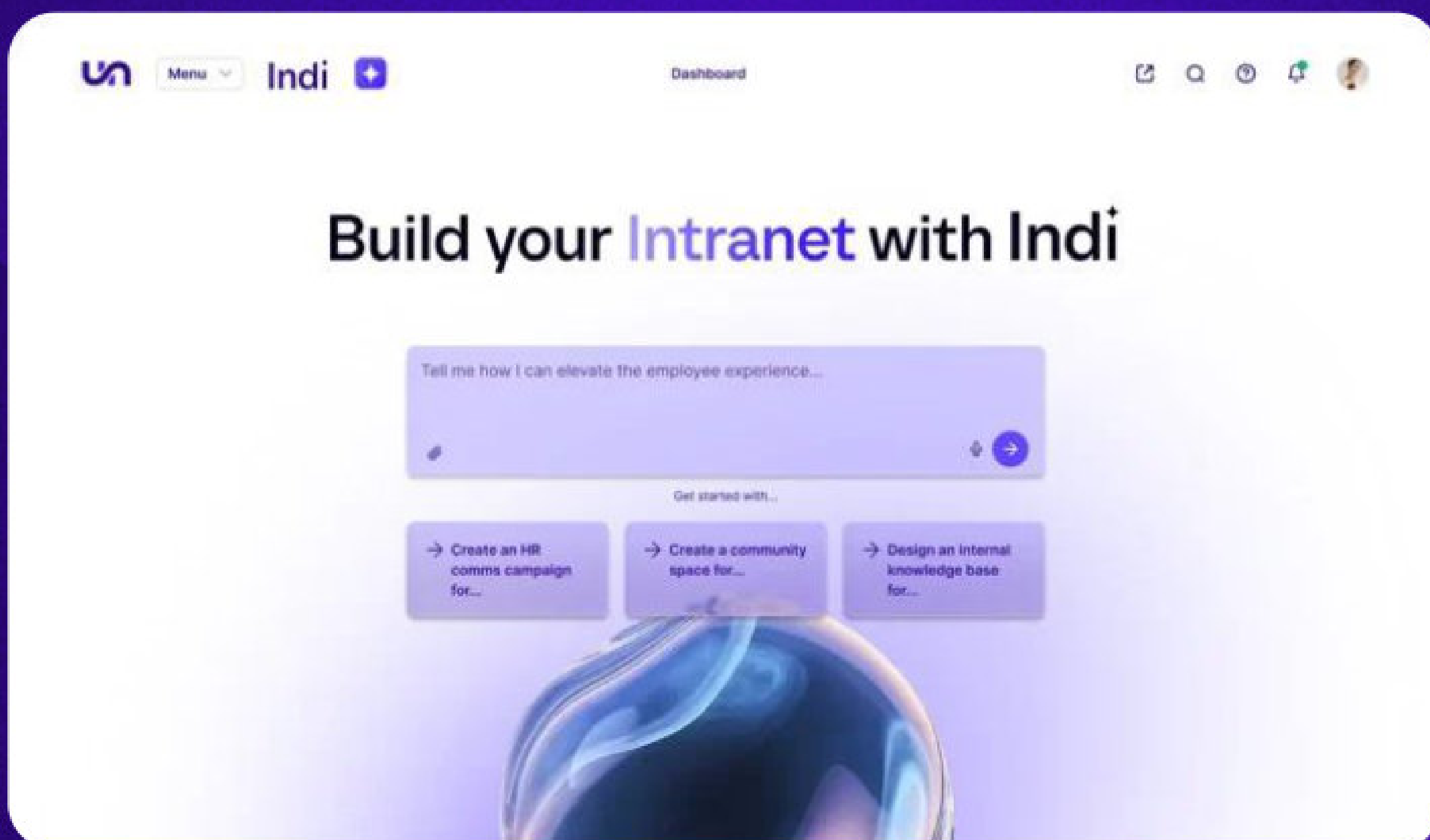
# Future-ready intranets: what to look for next

Healthcare intranets are moving from “publishing” to “orchestration” and measurable outcomes, including AI-assisted discovery and workflow support. IDC explicitly points to augmentation with AI and orchestration across tools in the digital workspace landscape.

## What to evaluate now

- ✗ Can the platform surface trusted answers quickly (and show where they came from)?
- ✗ Can it translate intent into action (requests, workflows, routing)?
- ✗ Can you govern it (permissions, audits, lifecycle), especially for policy content?
- ✗ Can you develop new employee experiences without additional support requirements?

As an example of how this could look, **Indi** is Unily's native AI agent that enables teams to architect, design, and govern employee experiences from a single prompt, ready to go live in minutes.





# Final recommendations and next steps

- 01 Write your "start of shift" requirements and convert them into a demo script.
- 02 Use the Integration Readiness Checklist and Scorecard to force clarity and avoid integration theater.
- 03 Pick 3–6 vendors, score them with the weighted decision framework, then validate with references in regulated, frontline-heavy environments.

## Unily Glass Product Tour

Take a tour and see how Unily Glass unifies actions across your digital workplace

[See it in action](#)



### What is a healthcare intranet platform?

A healthcare intranet platform is an internal digital workplace that helps healthcare teams access communications, knowledge, and tools securely in one place, across devices and locations.

### Is SharePoint enough for a healthcare intranet?

It can be, if you have strong governance, ownership, and a consistent experience across sites and devices. Many healthcare companies add [partner solutions](#) or choose a dedicated, user-friendly intranet platform when they need better mobile reach, targeting, and audit-ready governance.

### What features matter most for frontline healthcare workers?

Mobile-first access, targeted alerts, offline resilience, efficient task management, fast search, and role-based resource hubs. The experience needs to work for shift-based healthcare staff with limited time and variable connectivity to support better patient care.

### How do I evaluate whether a vendor's integrations are real?

Ask for end-to-end demos that include SSO, permissions-aware search, out of the box widgets, and workflow actions. Be cautious of deep links and embedded pages, which do not equal true interoperability

### What does "digital front door" mean in healthcare?

It means a single platform where staff start their day with a personalized entry point, find what they need, and access key tools without switching between multiple portals.

### **What governance controls should we require?**

Version control, approvals, review cycles, expiry, audit logs, and reporting. These controls help prevent outdated policy content and support compliance readiness.

### **How long does implementation typically take?**

It depends on scope and integrations. A focused “front door MVP” can launch faster than a fully migrated, fully integrated environment. Your biggest time drivers are usually integration, information architecture, and governance.

### **How do we drive adoption across clinical teams?**

Design should focus on user experience using team members' typical workflows (start-of-shift, policy lookup, urgent alerts), run pilots, use champions, and continuously improve search and content based on analytics.

### **What should be in a vendor demo script?**

A standardized script should cover how the intranet software: role-based targeting, mobile alerts, federated search with permissions, a policy update with audit trail, and analytics reporting.

### **How can an intranet support HIPAA Compliance?**

By enabling strong access controls, permissions-aware search, audit logs, content governance, secure mobile access, and providing a Business Associate Agreement (BAA) that sets out responsibilities and safeguards for protecting sensitive health information, alongside your internal policies and identity standards.

**Get started.** Get your personalized demo.

[www.unily.com](https://www.unily.com)



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