Patient Engagement by Design

Brian R. Golden, PhD
Sandra Rotman Chaired Professor of Health Sector Strategy at The University of Toronto and The University Health Network, Rotman School of Management

Heather Fraser
Director, Rotman DesignWorks
Adjunct Professor, Rotman School of Management
The Case for Design around the Patient Experience

- **THE “RIGHT” THING TO DO** – The system was never (intentionally) designed to serve health professionals

- **PROFESSIONALISM & BURNOUT** – We are “losing” too many caregivers each year; crises of identity

- **THE BUSINESS CASE** – We are moving to (non-profit) “markets” in healthcare. Performance *writ large* matters and will matter more in the future.

- **WE KNOW HOW TO SEE WITH NEW EYES** – Design principles well established
Waiting
3 GEARS OF BUSINESS DESIGN

Empathy & Deep Human Understanding
What do people need?

Concept Visualization
How can we enhance their experience?

Strategic Business Design
How can we deliver that in a cost-effective and sustainable manner?
3 GEARS OF HEALTH CARE

Patient Care Satisfaction

Clinical Experience and Outcomes

Responsible Capital Investments and Spending
Gear 1
Empathy &
Deep Human
Understanding

A deep dive with a broad lens
BROADENING THE LENS
Appreciating their journey
Appreciating their journey
Appreciating their journey
DEEPENING THE UNDERSTANDING

Defining unmet needs
Needs Framework: S.P.I.C.E.

**SOCIAL** – What does this person need from relationships with the people around them?

**PHYSICAL** – What does this person need on a functional and practical level?

**IDENTITY** – What does this person need to define themselves?

**COMMUNICATION** – What information does this person need?

**EMOTIONAL** – What does this person need emotionally and psychologically?

2007 © Heather Fraser
Listening to their stories – what do they need?
What does a police uniform have to do with cancer treatment?
Story:
My uniform in the closet is a reminder that I am not working.

Solution:
Chemo Buddy Support Program

Need:
Maintain a sense of self worth
“My sense of self worth is at a low.”
“I need support from the people around me.”

“Why do things have to be so difficult and inconvenient?”

“My sense of self worth is at a low.”

“I want to know what’s happening.”

“I feel so anxious. I need hope to heal.”
Personified

Patients and contextualized their Needs

Pamela Thomas

Age: 63
Sex: Female
Background: African-Canadian
Occupation: Retired Nurse
Status: Widow
Dog: "Ollie"

Pamela has had cancer for the last 2 years. She comes in for treatment once a week, usually Wednesdays. She lives on her own in Toronto, and her long-distance caregiver comes by once a week to check on her. She has 4 children and 10 grandchildren who occasionally visit her from time to time. Since she does not work anymore, she wishes they would visit more frequently. She is deeply religious and volunteers at a local church every Sunday. Since retiring from nursing 6 years ago, she now occupies her days with cooking, walking her dog in the forest and bird watching. Every Thursday, she goes to the nearby community centre for her knitting group where she gets to spend time with old friends and make new ones. However, even with all her activities, she finds it difficult to pass the time. On treatment days, she takes a hospital shuttle service from Toronto to Pickering. She looks forward to coming to the hospital. Treatment days are the "highlight of her week." She sees Pickering as a way to connect with others. Her friends describe her as strong, independent but lonely.
Gear 2
Concept Visualization

Exploring new possibilities for a richer experience
Rich experiences are multi-dimensional
Experience Framework: P.O.E.M.S.

**PEOPLE** – Who could enhance the experience?

**OBJECTS** – What physical things could be created?

**ENVIRONMENTS** – In what kind of location and setting might this take place?

**MEDIA & MESSAGES** – What kind of information could be provided and how?

**SERVICES** – What services and support systems could be offered?
Experience Design

(At Home)
Checks Treatment Schedule

On his way to the hospital

Arrives & Checks in

Waiting for treatment

Receiving Treatment

Brian R. Golden and Heather M. A. Fraser, Rotman School of Management, University of Toronto, October 25, 2011
- nature
- natural lighting and views
- open space
- space for interaction
- areas for work, rest and support
- inspirational stories and objects
- flexible environments
Co-Creation

"The project allowed us to bring people from across the hospital to design a new chemotherapy suite with the patient in mind - and with real patient feedback on their experience of care. Doctors, nurses, researchers, clerical staff, volunteers, management - many of whom have never worked together before were able to share ideas, build something tangible and feel like they had a stake in the final outcome."

Sarah Downey
Vice-President, Princess Margaret Hospital
University Health Network, Toronto, Canada
Gear 3

Strategic Business Design

Defining the enterprise system

Brian R. Golden and Heather M. A. Fraser, Rotman School of Management, University of Toronto, October 25, 2011
Enrich The Patient Experience

Interactive Activities & Objects:
- Rental Laptops
- Portable Video Players
- Chemo-Chair Workstations

Value-Added Patient Services:
- Valet Parking
- Advocacy Programs
- Child Daycare

Information Technology:
- Patient Pagers
- Electronic Wait Time-Boards

Familiar Healthcare Staff:
- Team-based Treatment
- Patient ‘Buddies’

Space / Environmental Design:
- Nature-Inspired Design
- User-Friendly Signage & Way-finding

Improves Patient Access & Mobility

Increases Patient & Treatment Familiarity

Improves Patient Tracking & Queuing

Eases Staff-Patient Interactions

Eases Staff-Patient Interactions

Provides Stimulating Patient Activity

Creates Productive Patient Time

Enhances Communication, Reduces Stress

Creates Continuity of Experience

Improves Ease of Navigation, Promotes Healthy Environment

Improve Hospital Operations

Brian R. Golden and Heather M. A. Fraser, Rotman School of Management, University of Toronto, October 25, 2011
Patient-Centric Care

“Recommendations gave us focus on an action checklist and a way of prioritizing the elements of redesign of our chemotherapy unit. It gives us a guideline for ongoing planning, and a brief for architects, IT, communications and staff.

For new projects we ask: Does this meet the patient’s needs? What do they want? Does it really count?”

Sarah Downey
Vice President, Princess Margaret Hospital
University Health Network, Toronto, Canada
RESULTS

• Motivated patients and staff: progress

• Broader areas of impact
  - Streamlined operations
  - Reduced administration by nurses
  - Greater potential impact on patient healing

• Complete reprioritization of priorities

• Shift in resource allocation
Princess Margaret Hospital
Thank you.