\*Photo of a collaborative session with a specialised nurse in Dundee, Scotland - November, 2016

## Care Pathway Blueprint

Facilitating the adoption of service innovation in a healthcare organization within the context of value-based healthcare.

EUROPEAN HEALTHCARE DESIGN 2018

@sara\_manzini @frogdesign







## frog advances the human experience through design.

frog designs exceptional digital and physical customer experiences to transform businesses at scale.



### **ABOUT FROG**

## form follows emotion

Hartmut Esslinger, frog founder

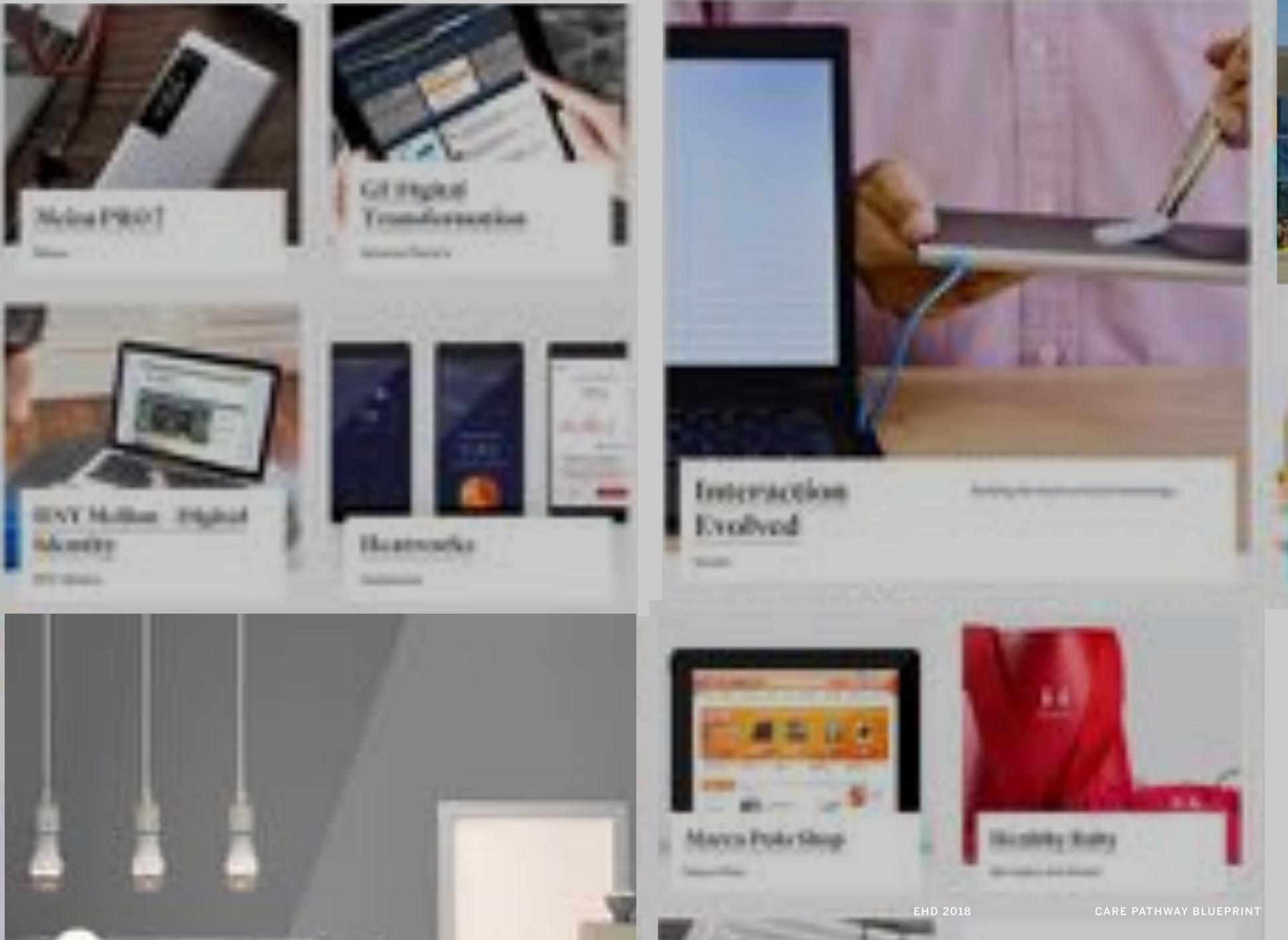
The emphasis on the need for design to elicit a deep emotional response underpins frog entire portfolio of work over 4+ decades in industries as diverse as finance, mobile and telecommunications, technology, healthcare, energy, education, media, and social innovation.

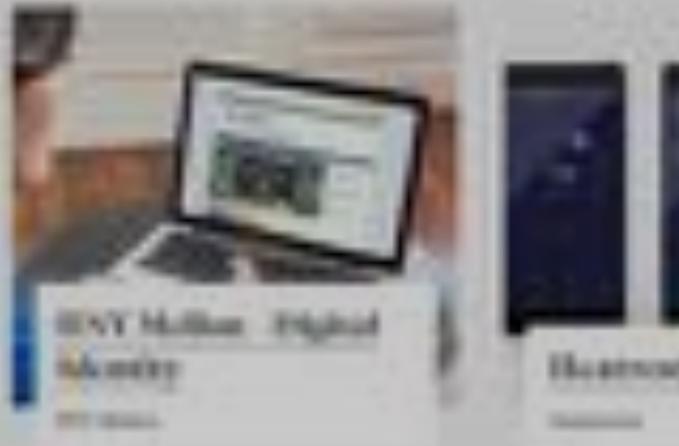




## ABOUT FROG



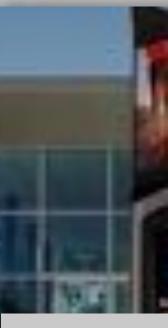






















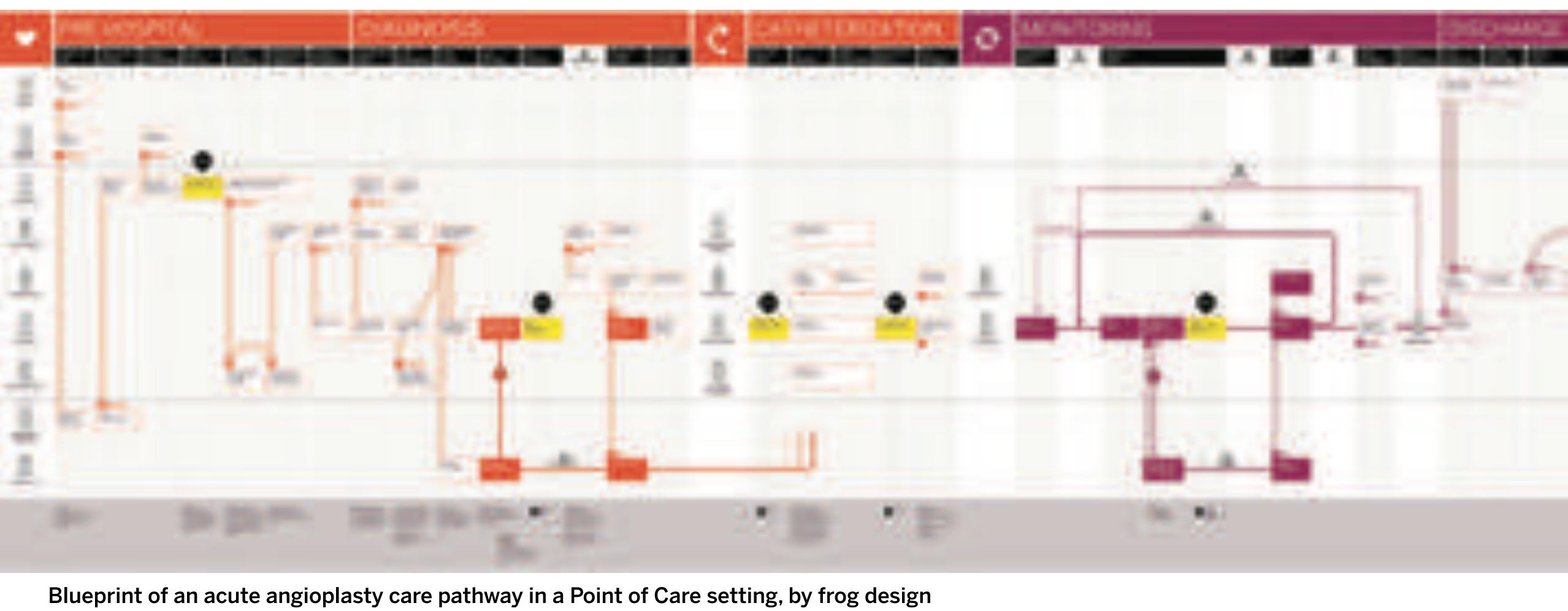
The Founder by John Lee Hancock - 2016





Centre Georges Pompidou, Paris









Architecture Blueprint



## Care Pathway Blueprint

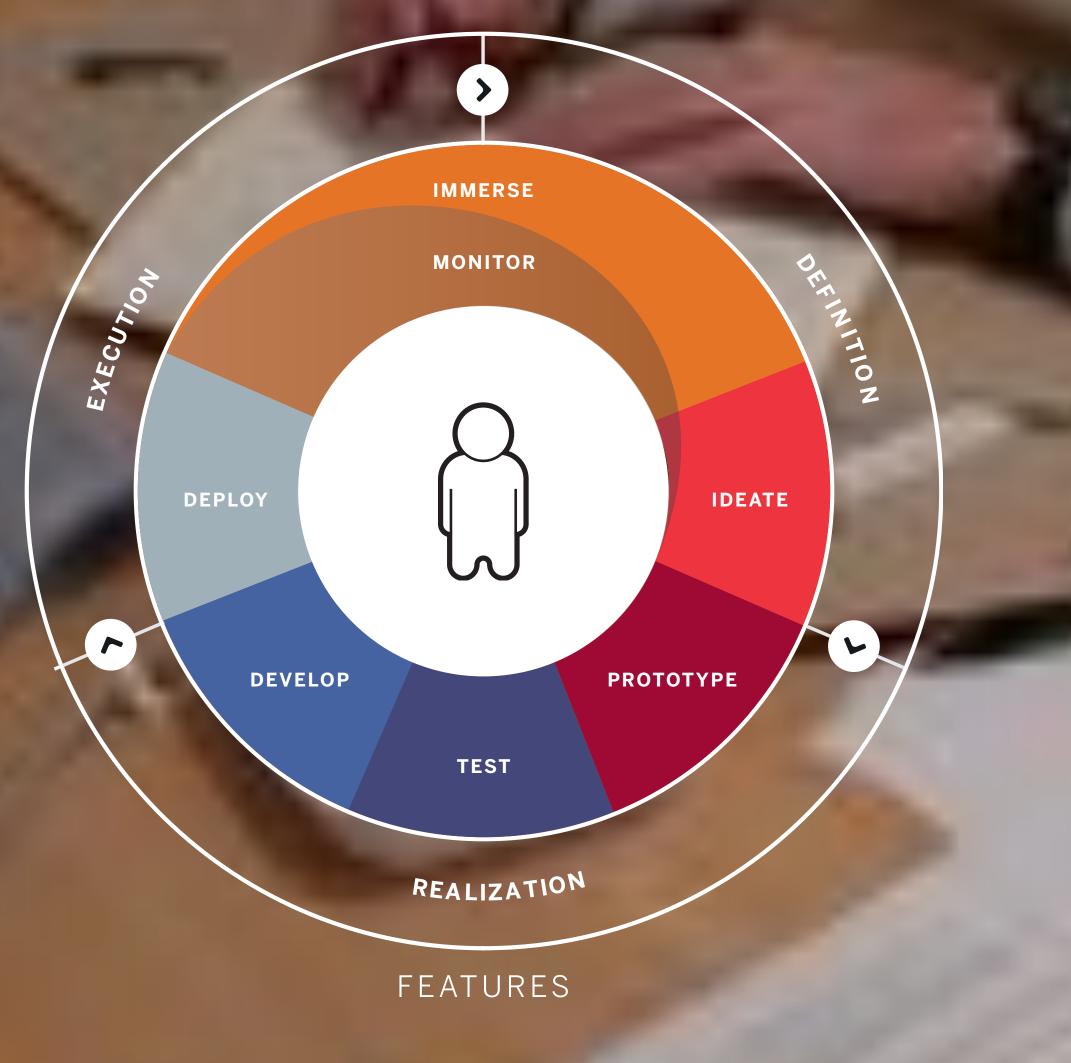
## Service Design for Value-Based Healthcare



Human-Centered Design is an innovation process in which end-user needs, aspirations and context are given extensive attention at each stage of the product/ service development process.



### FUTURES





Value *in* the experience

For example + Fun Useful Cheap Fast Easy Accessible



## Value *from* the experience

For example + Health Wealth Social Connection Empowerment Knowledge Security

IMPACT

## Value *in* the experience

For example
+
Fun
Useful
Cheap
Fast
Easy
Accessible

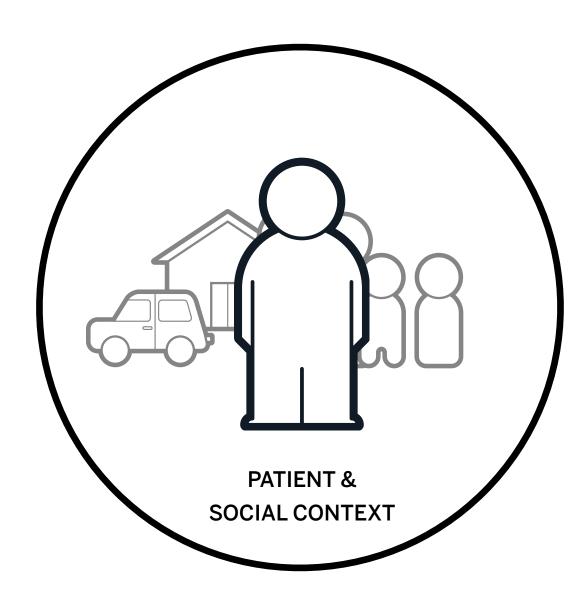


## Value *from* the experience

## Design for healthcare

IMPACT





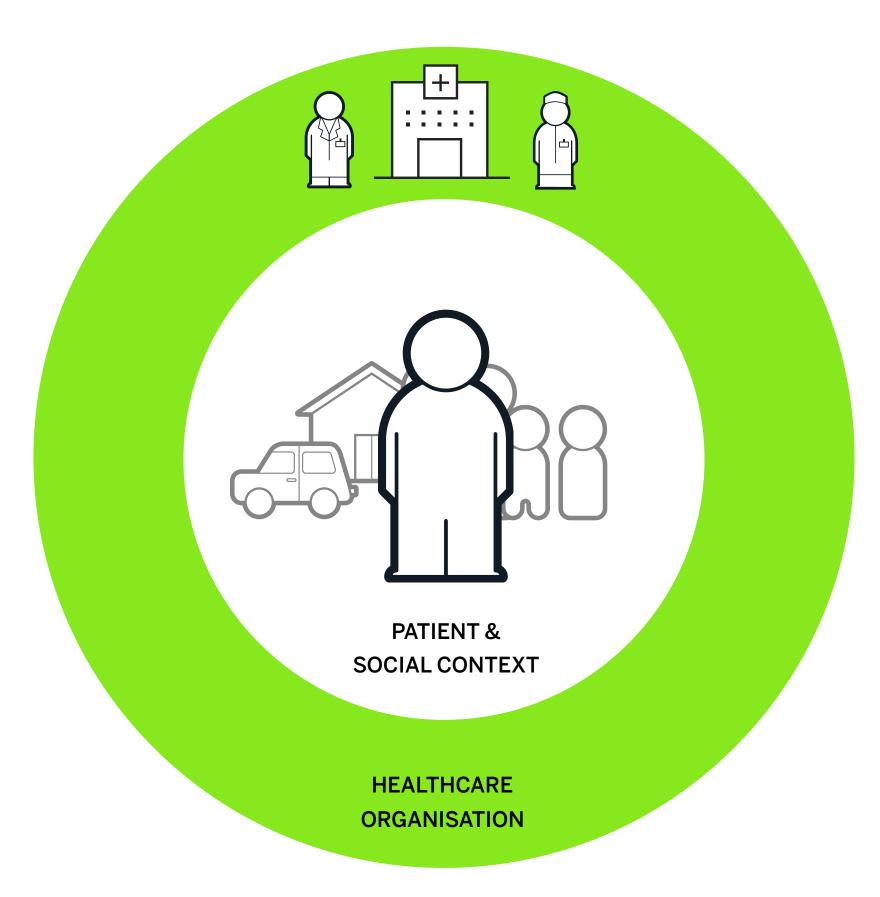
through Human-Centred Design



CARE PATHWAY BLUEPRIN







## through *Service Design*







Service Design Network

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# communication and material components interaction between the service provider





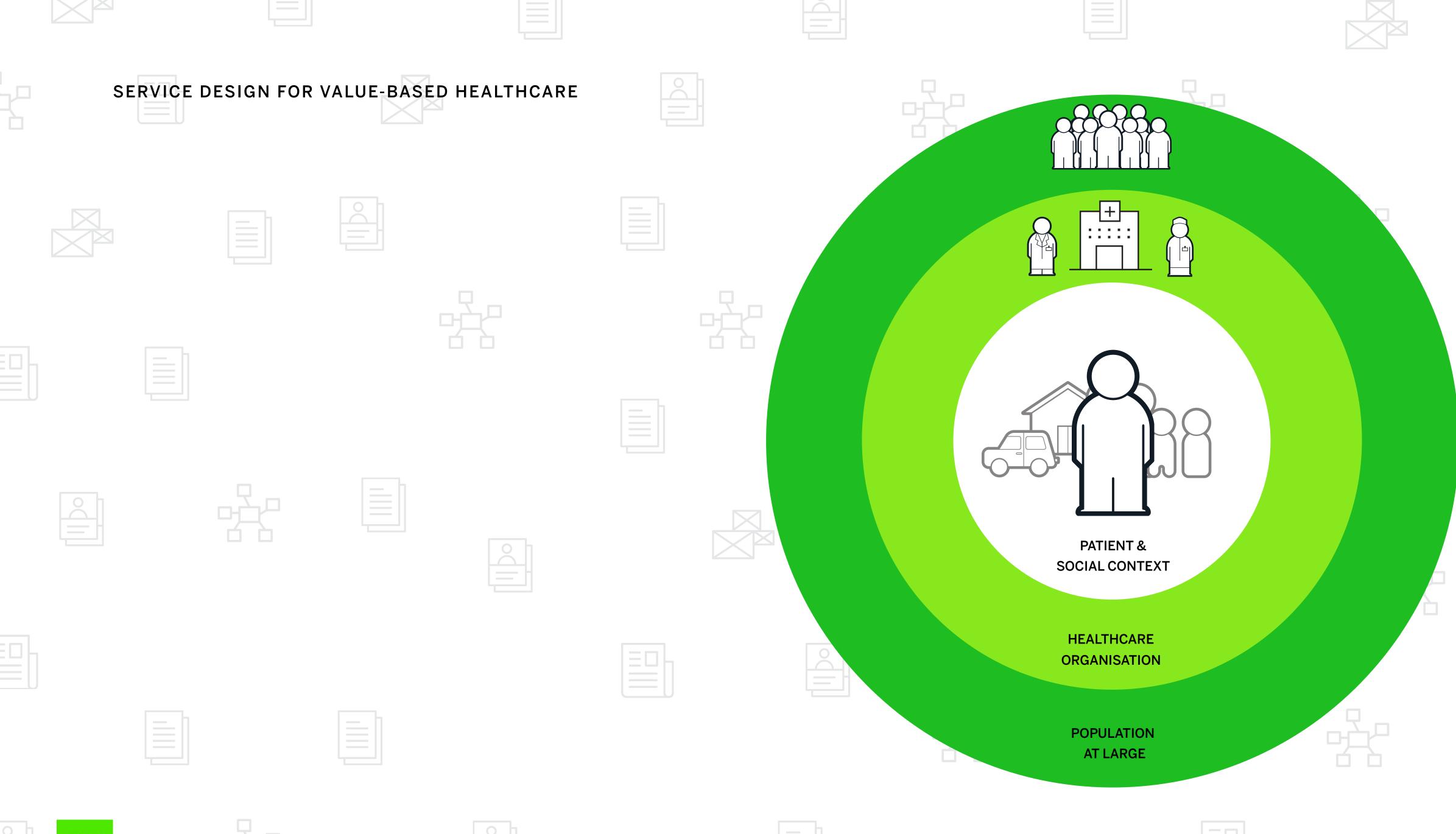








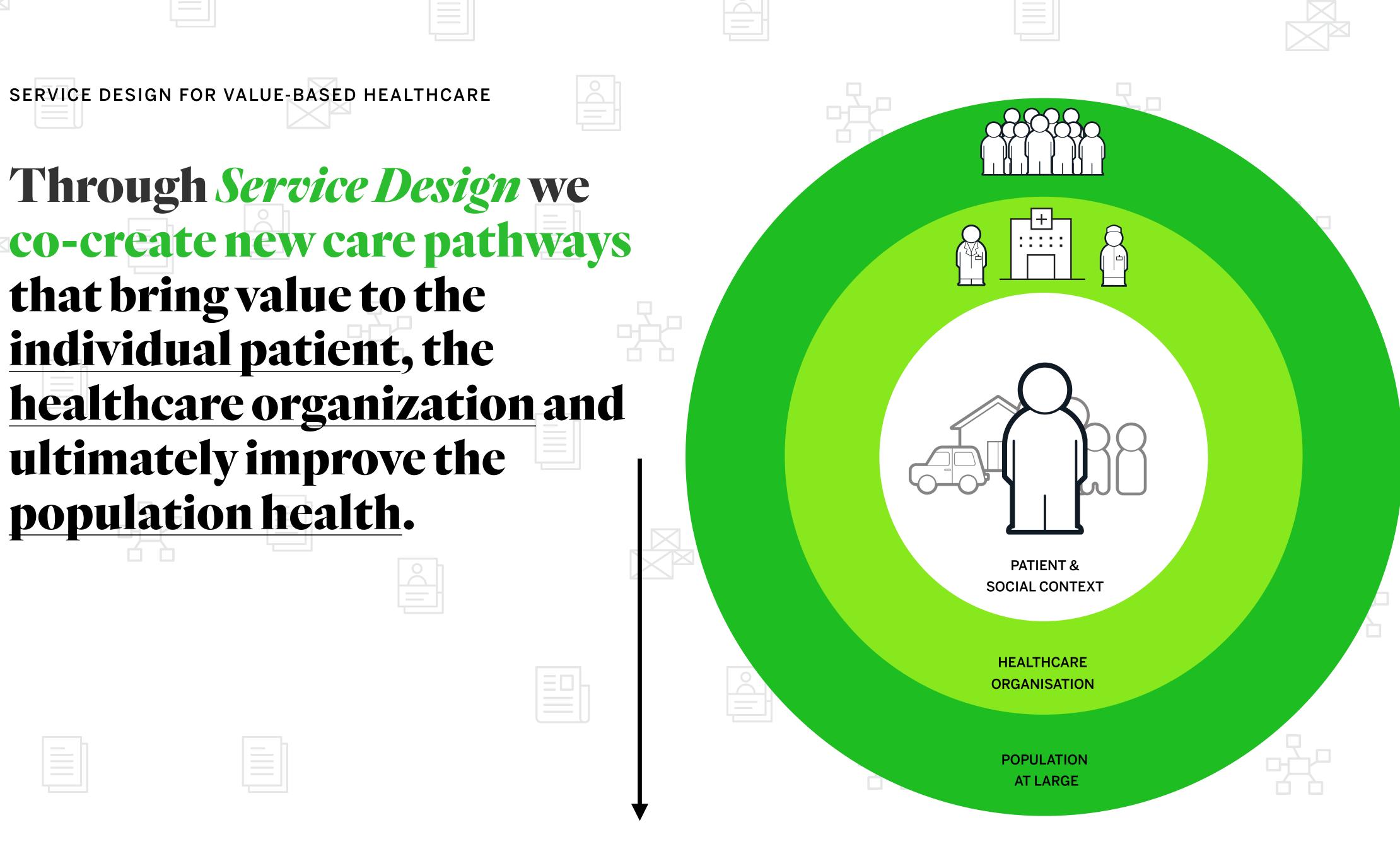
CARE PATHWAY BLUEPRINT











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## Through Service Design we co-create new care pathways that bring value to the individual patient, the healthcare organization and ultimately improve the population health.

PERSONAL VALUE: Value at the level of the Patient







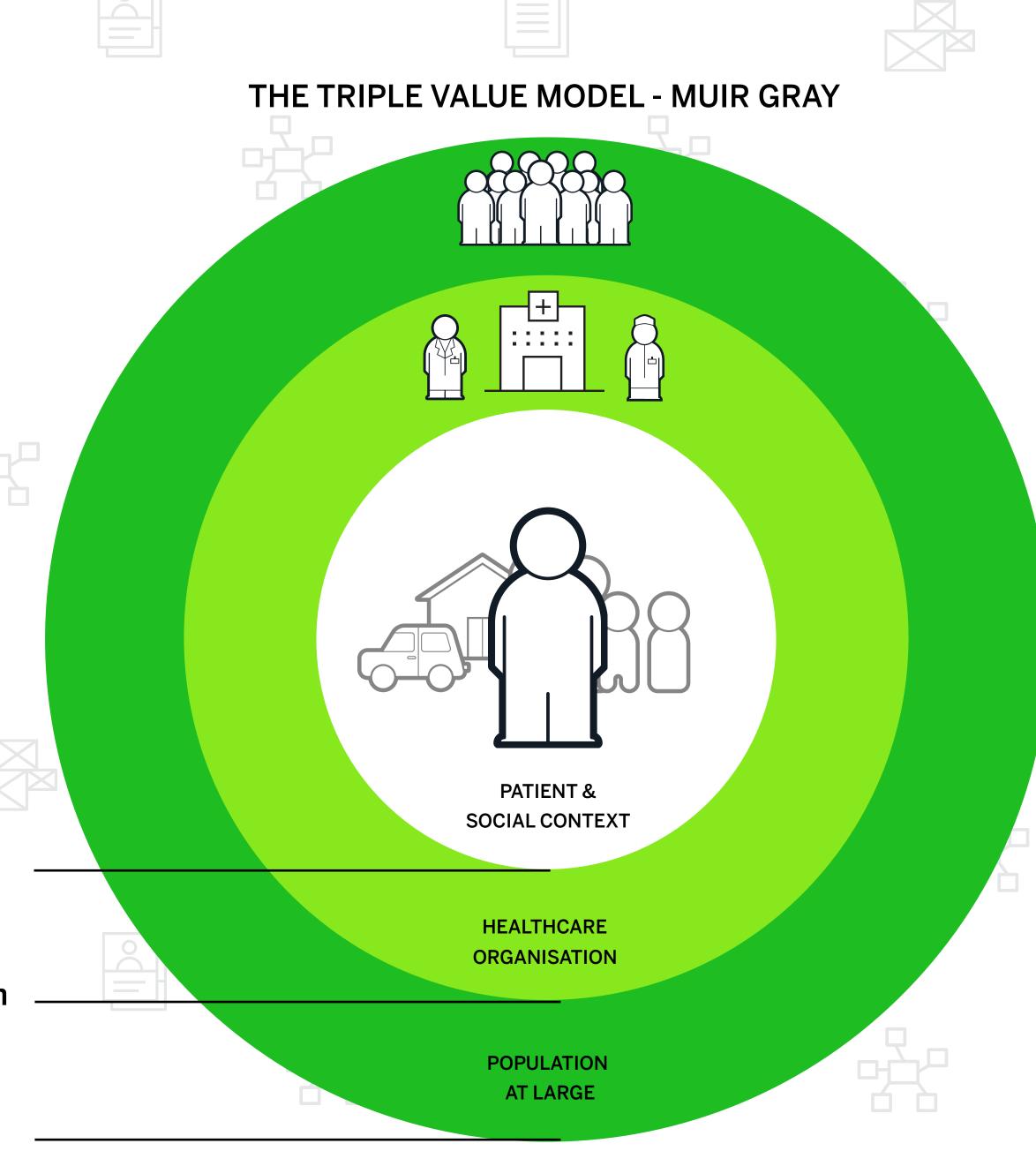


ALLOCATIVE VALUE: Value at the level of the Population







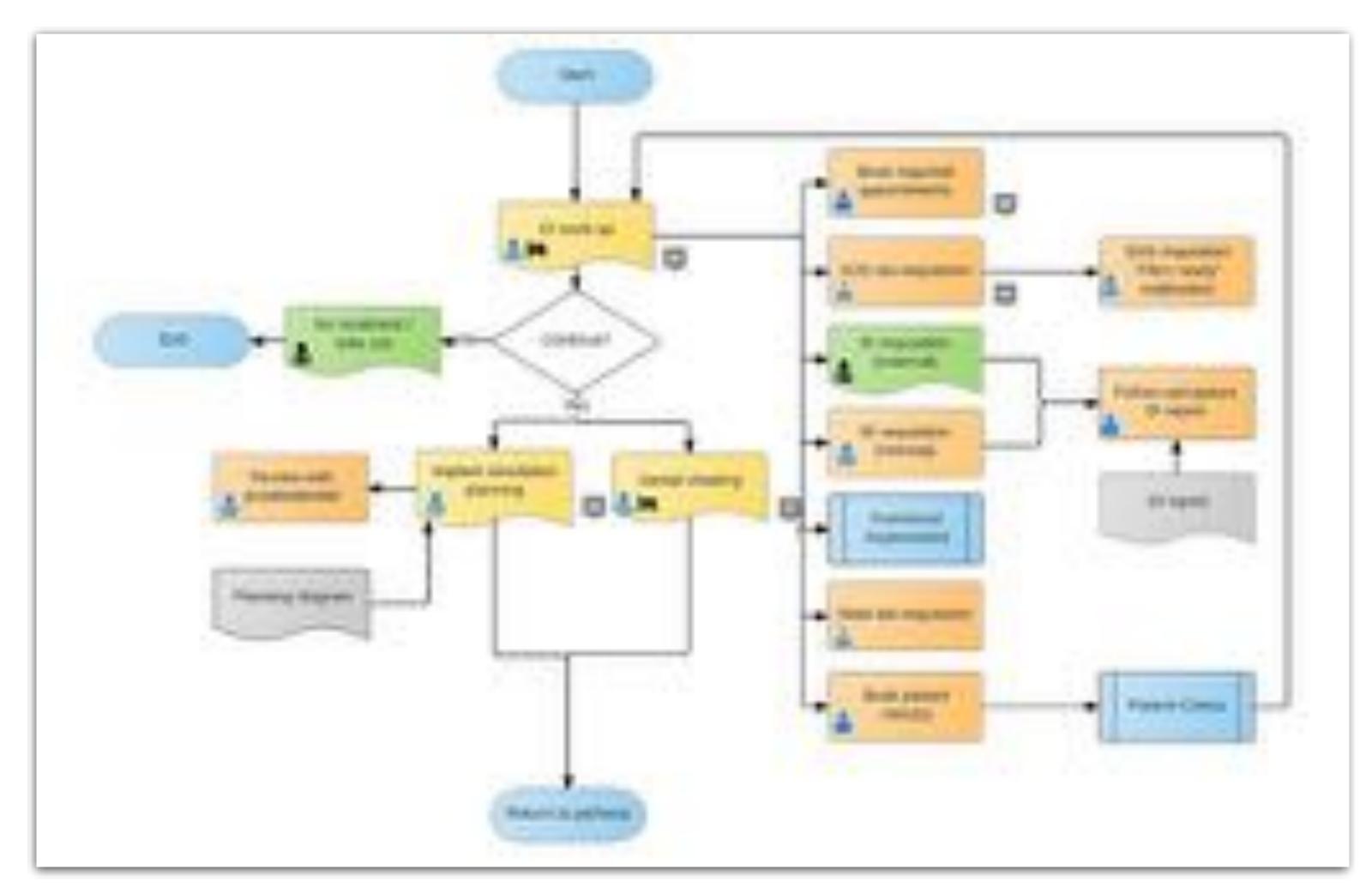






## Introducing the Care Pathway Blueprint





## EMR Workflow Diagram example, by Tim Edlund

http://www.softworksgroup.com/synoptec-blog/improve-emr-implementation-with-emrworkflow-diagrams/

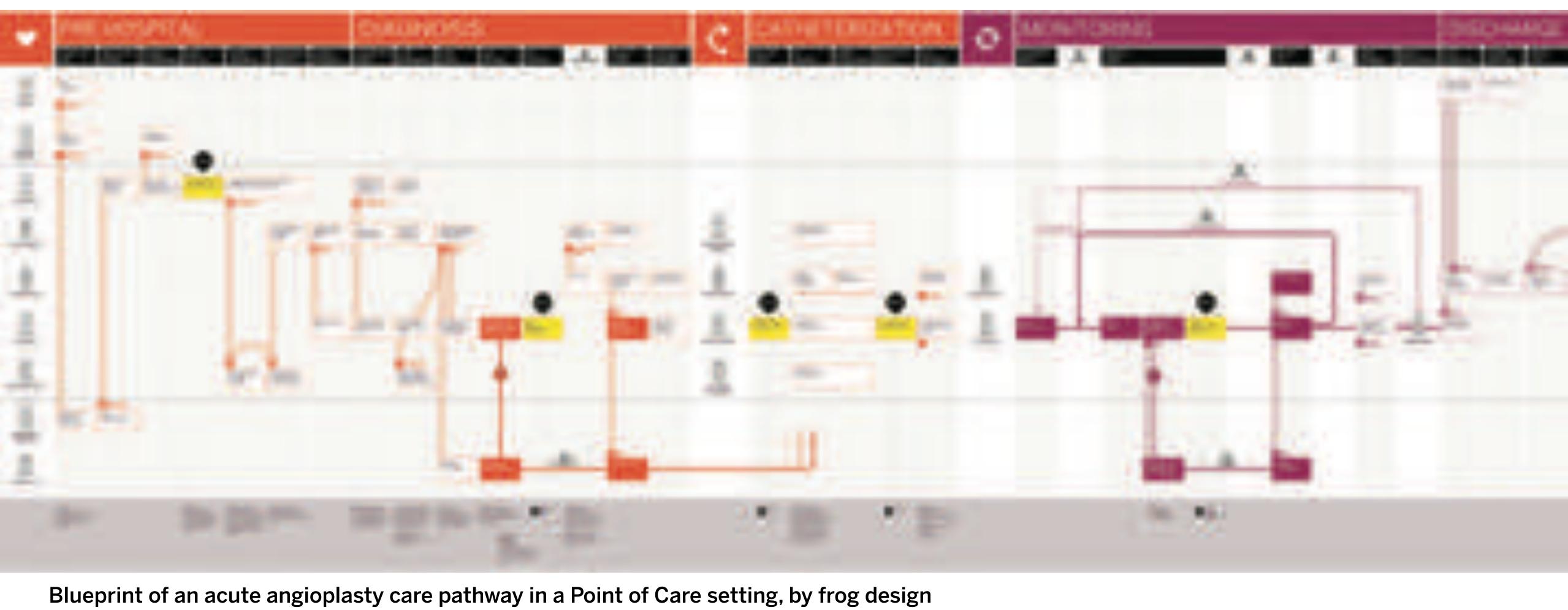


## A Care Pathway Blueprint is a diagram that visualises the activities and relationships between different components in the care pathway of a patient — people, resources and processes.

Blueprint of an acute angioplasty care pathway in a Point of Care setting, by frog design

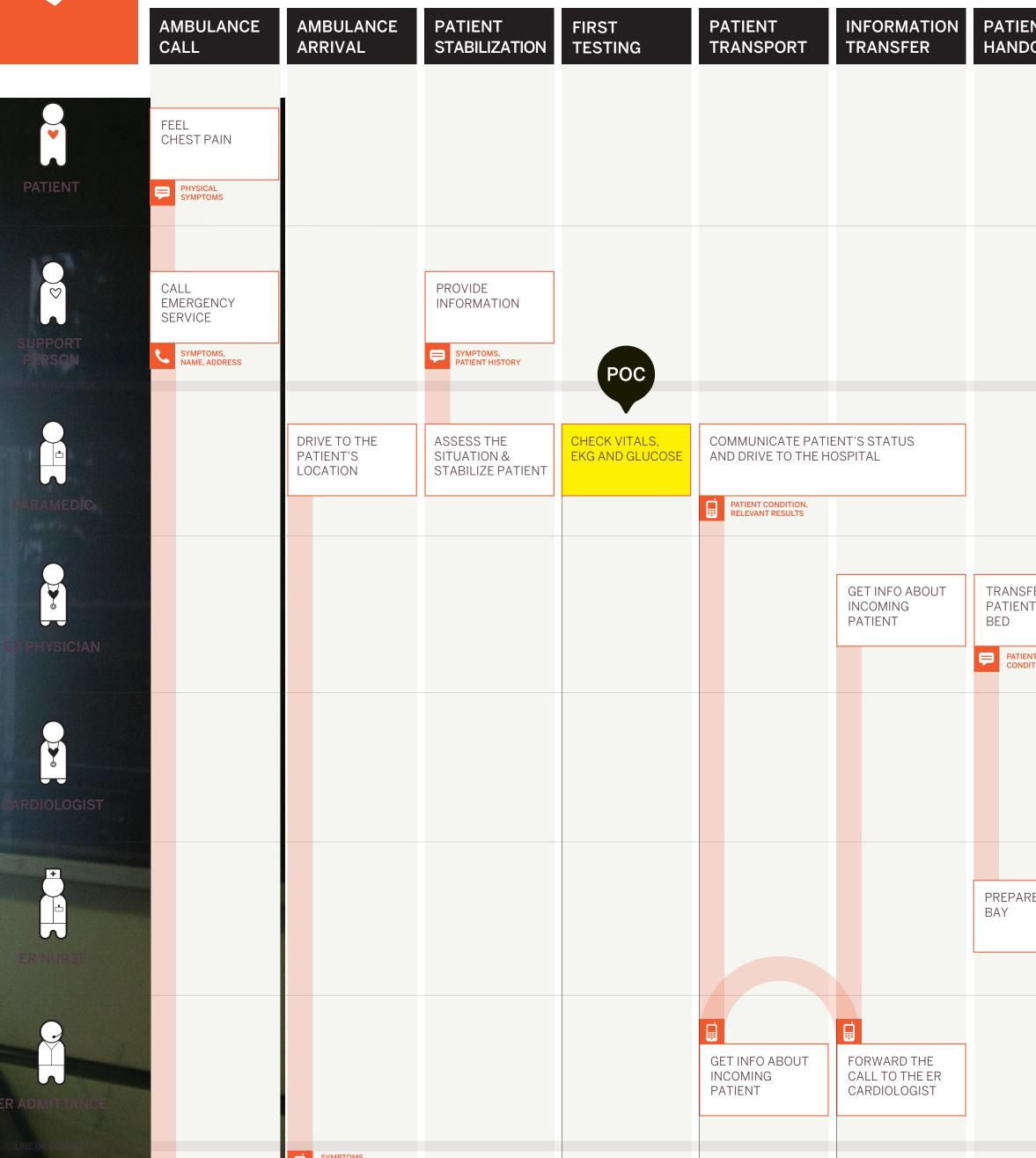








## PRE HOSPITAL



## DIAGNOSIS

ENT DOVER	PRELIMINARY CHECK	FIRST ASSESSMENT	TEST ORDER	LAB TESTING	POC TESTING	C 15-20 MINUTES	RESULTS REVIEW	C T
	BRING PATIENT INTO ER & TRANSFER INFO	FILL OUT AMBULANCE REPORT		>				
	DETAILED PATIENT CONDITION & RESULTS							
SFER THE	GET	CHECK THE	ORDER CBC, BGE,			CALL ER	ASSIST THE	
INT TO A	INFORMATION, START VISIT	PATIENT CONDITION	CARDIAC MARKER, CREATININE			CARDIOLOGIST ON CALL	CARDIOLOGIST	
'IENT NDITION			C TEST ORDER			CONDITION & TEST RESULTS		
						GO TO ER	CHECK PATIENT AND TEST	D
							RESULTS	
					POC			
ARE EXAM	TRANSFER THE PATIENT INTO A BAD	PRELIMINARY TEST (VITALS & EKG)	RECEIVE TEST ORDER & PRINT THE LABELS	PRINT LABELS AND SEND BLOOD SAMPLE TO LAB	RUN BGE-CBC POC TESTS		GET TEST RESULTS (POC + LAB)	TI P. C.
		PATIENT NAME & INSURANCE INFO.						
		REGISTRATION & CHECK INSURANCE						



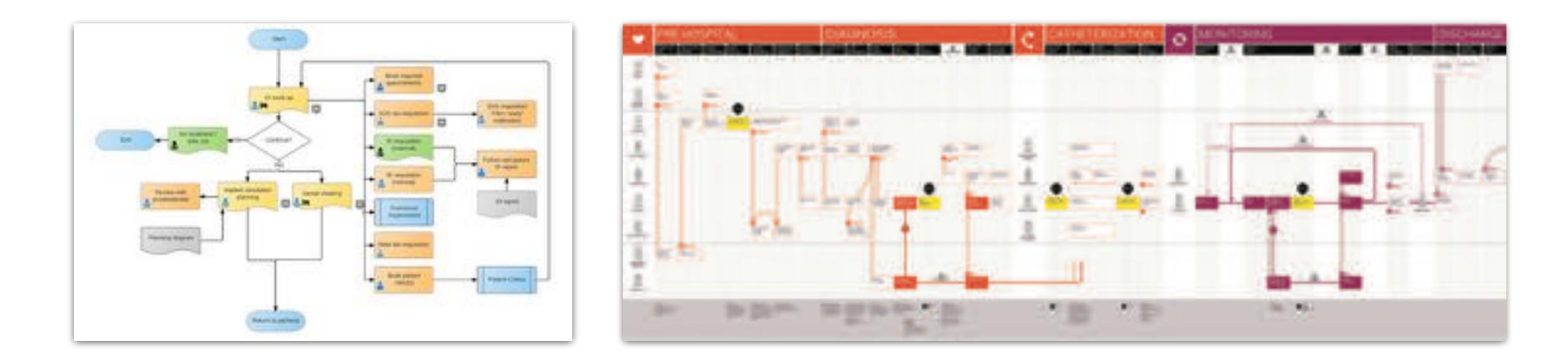


	Figure 1	Figure 2
Actors	<ul> <li>recognizable,</li> <li>distributed across the framework,</li> <li>difficult to see the sequence of tasks for each actor</li> </ul>	<ul> <li>recognize</li> <li>organize</li> <li>easy to i</li> </ul>
Time dimension		• Horizon
Location (or context)		• Present,



izable,

zed vertically

identify and count the sequence of tasks for each actor,

ntal

nt, connected to each step

## How to use the Care Pathway Blueprint



## Implementation process of Health Service Innovations

Immersion	Scoping	Co-creation	Deployment
Identify an	Consolidate the	Iteratively co-	Test the solution
opportunity for	vision and detail	design the	with patients in a
Service Innovation in	the solution	solution with the	real-life
a Care Pathway.	concept.	care team and	environment.
		other partners.	Assess outcomes,
			consolidate
			learnings.



## Immersion phase

Indentify the service innovation opportunity by leveraging the perspectives of internal and external stakeholders.













## Scoping phase

Consolidate the selected solution and detail it based on the specific characteristics of the healthcare setting where it will be implemented.



## **Current Care Pathway**



HOME-MONITORING PROTOCOL







## Co-creation phase

Prototype, test and co-create the service innovation with patients and the care team to gather feedback and ultimately define requirements for detailed design.

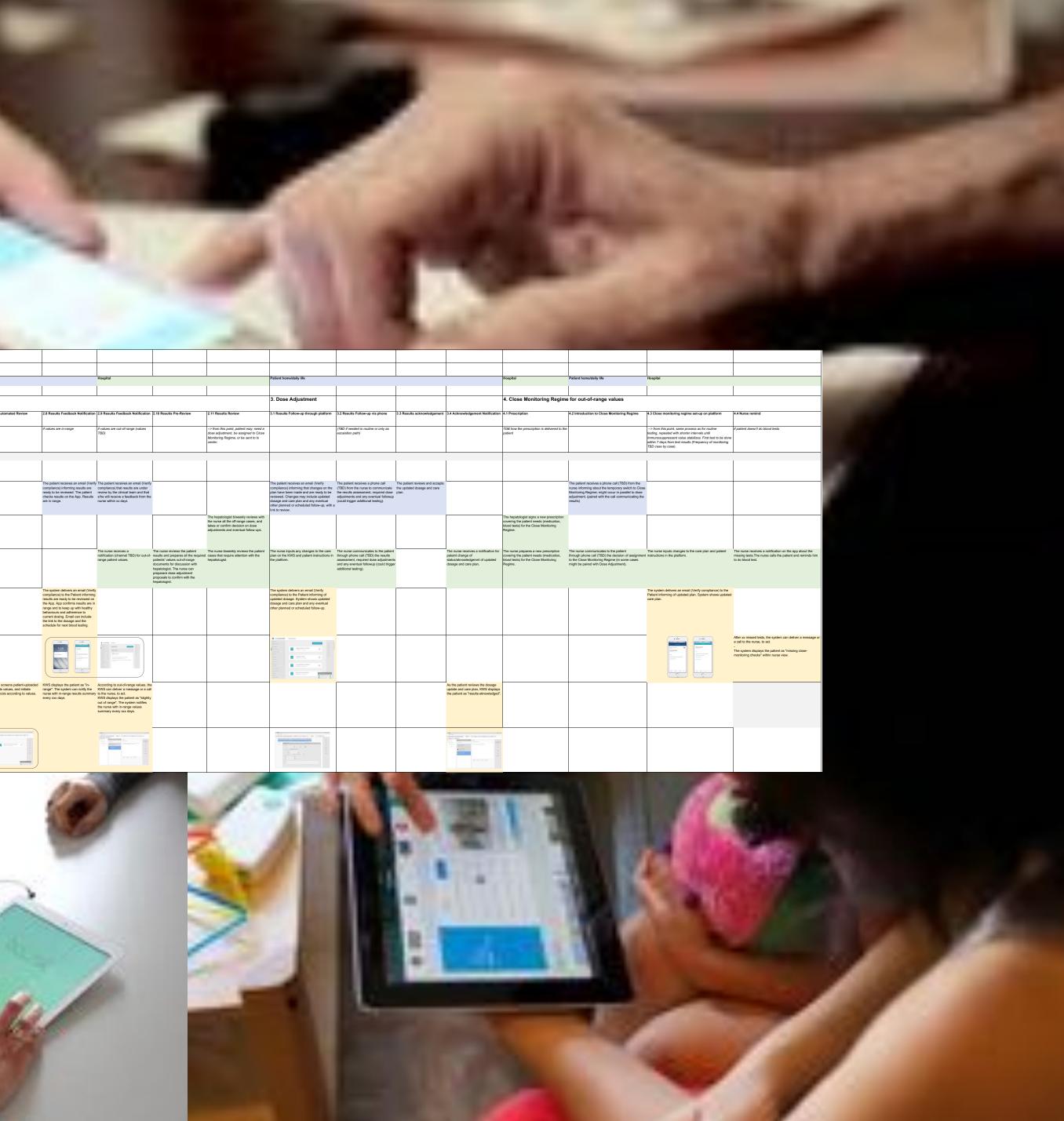


		Monitoring - Standard Scena	no																		
OCATIONS	Hospital					Patient home/daily	•			GP Practice/Lab/Referring C	entePatient home/daily life			Hospital			Patient home/daily life		1	Hospital	Patient home/daily life
PHASES	1. Onboarding to P	Pilot				2. Routine R	sime										3. Dose Adjustment			4. Close Monitoring Regim	to for out of range values
	-						-														-
	1.1 Candidate Identification	1.2 Introduce 1.3 Recruitivign-in	1.4 Patient File Update 1.5 Profile activat Training	on and 1.6 Profile actival Training	ion and 1.7 Prescriptio	ns & Discharge 2.1 Weekly Questio	naire 2.2 Weekly Monitoring	2.3 Reminder of Booking te	t 2.4 Booking test	2.5 Blood Test and visit	2.6 Results Input	2.7 Automated Review	2.5 Results Feedback Notification	n 2.9 Results Feedback Notificatio	in 2.10 Results Pre-Review	2.11 Results Review	3.1 Results Follow-up through platform	3.2 Results Follow-up via phone 3.3 Results acknowledgene	t 3.4 Acknowledgement Notificatio	n 4.1 Prescription	4.2 Introduction to Close Monitoring Regime
conditiona			If the patient is a rother myNexuzHealt	revuxer of If the patient alread	dy has a					Happening according to GPLs current protocols	ıb		f valuez are in-range	if values are out-of-range (values 72D)		-> from this point, patient may: need a dose adjustment, be assigned to Close		(TBD if needed in routine or only as escalation path)		TDB how the prescription is delivered to it patient	N
				myNexuzhiealth ay	φ.											Monitoring Regime, or be sent to tx center.					
ACTORS										1			1								
3P/LabNurse/Referring Center				1						According to specific GPLab/Referring center curre	nt	1		1		1					
										(to be further investigated)											
Patient	hepatologist for routine visit.	The patient gets introduced to The patient signs the the pilot opportunity by the paperwork. rurse.	the pilot protocol a	roduced to The patient gets in id the pilot protocol a dime surroutine trais o	nd prescriptions, th	eives the The patient fills out a re lab parameter questionnaire that in document, the questions about wee	udes	The patient receives a remind for booking blood test according to care plan.	at GP/Lab/Referring Center, with the prescription. The last of	d D	The patient inputs the blood less results into the app and gets confirmation of successful		compliance) informing results are	fy The patient receives an email (Ver compliance) that results are under review by the clinical team and the	·		compliance) informing that changes on the	The patient receives a phone call The patient reviews and accept (TBD) from the nurse to communicate the spdated dosage and care the results assessment, required dose plan.			The patient receives a phone call (TBD) from the nurse informing about the temporary switch to CI Monitoring Regime; might occur in perallel to doe
		10.00	support to install th MyNexusHealth A	e the care plan. p on his	care plan summ discharge note	sary and the symptoms, general p covering his and mental health as	ysical I the	to care part.	examination is available to the patient within the app and on the		upload.		checks results on the App. Results	afte will receive a feedback from t rutue within xx days			reviewed. Changes may include updated dosage and care plan and any eventual	adjustments and any eventual followup (could trigger additional testing).			adjustment. (paired with the call communicating t results)
			mobile phone. Sih the care plan with	neviews he nurse.	for the next 1 ye		he wook.		the lab parameter test instructio document.	on		_					other planned or achecluled follow-up, with link to review.	1.8			
lepatologist	During routine visit the Hepstologist identifies qualified patients for the pilot				The hepatologis patient-in-range sions the preson	parameters,										The hepatologist biweekly reviews with the nurse all the off-range cases, and takes or confirm decision on dose				The hepatologist signs a new prescription covering the patient needs (medication, blood tests) for the Close Monitoring	
	and redirect them to the pilot nurse for further information				discharge note patient needs (r blood tests) for	medication,										adjustments and eventual follow-ups.				Regime.	
	and finalize onboarding.	The nurse explains with					The nurse does her week										The name incuts any chances to the care				
Pilot Nurse		The nurse explains with further detail the Pilot to the patient, verifies elegibility	The nume opens the patient. The nume introduc file on the KWS platform. She patient to the Pliot assigns the TX Home guides the Patient	protocol, patient to the Pilot	protocol prescription for	the medication,	The nurse does her week review of the patient does							The nurse receives a notification (channel TBD) for out- range patient values.	of- results and prepares all the require		The nurse inputs any changes to the care plan on the KWS and patient instructions i the platform.		The nurse receives a notification to patient change of status/sknowledgemnt of updated	The nurse prepares a new preacription covering the patient needs (medication, blood tests) for the Close Monitoring	The nurse communicates to the patient through phone call (TBD) the decision of assignments to the Close Monitoring Regime (in some cases
		against detailed criteria and exposes the necessary	Monitoring tag to the patient the myNexuchealt file. She defines the patient's his mobile phone,	App on with the Patient on lustrates myNexuzhtealth A	the routine tests, th op. test instruction (	e lab parameter document and a									documents for discussion with hepatologist. The nurse can preparate dose adustment			and any eventual followup (could trigger additional testing).	dosage and care plan.	Regime.	might be paired with Doae Adjustment).
		paperwork for signature.	in-range parameters, to be the main features : reviewed by the hepatologist. reviews the care p Patient.	an with the	discharge note patient needs (r blood tests) for	medication,									proposals to confirm with the hepstologist.						
vexusHealth Platform				s created The Home Monito lioring TX care plan is activa				The system delivers a Remino to book the blood testing at th					The system delivers an email (Verify compliance) to the Patient informing		1	1	The system delivers an email (Verify compliance) to the Patient informing of		٦		
			care plan gets acti Reminders to book	ated. Reminders to bool quarterly tests are set.	quarterly			GPILab/Referring Center xxx days before the planned date.					results are ready to be reviewed on the App. App confirms results are in rance and to keep up with healthy				updated dosage. System shows updated dosage and care plan and any eventual other planned or acheckiled follow-up.				
								particular.					behaviours and adherence to current dosing. Email can include the link to the dosage and the				care particular an actinuate country.				
													the link to the dosage and the schedule for next blood leating.								
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<b>KWS</b>	-		The patient file is updated with new Home Monitoring		All the document and printed from		1					KWS screens patient-uploaded results values, and initiate	KWS displays the patient as "in- range". The system can notify the	According to out-of-range values, t KWS can deliver a message or a c	the call				As the patient reviews the dosage update and care plan. KWS display		
			TX Plot tag, the care plan and the in-range parameters		on the KWS.							protocols according to values.	nurse with in-range results summary every xxx days.	y to the nurse, to act. KWS displays the patient as "sligh					the patient as "results-aknowledged		
			(in 'pending confirmation' mode).											out of range". The system notifies the nurse with in-range values summary every xxx days.							
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1.1 Candidate Mettification 12 Inhoduce 1.2	Recruitivign-in 1.4 Palant File Update 1.5 Pedia activation and Training If the palant is a new stars of	1.5 Profile activation and 1.7 Preacriptions & Discharge 2.1 Weekly Questionnaire . Training If the patient abready has a	23 Weekity Menitoring 23 Reminder of Booking last 24 Booking	test 2.3 Blood Test and visit 2.4 Results Input 2.7 Autor Happening according to GPSLab	naled Review 2.8 Results Feedback Notification 2.9 Results Feedback Notific Feedback Notification 2.9 Results Feedback Notific Feadback are in-range Peables are coded-range (relation)		1 Results Follow-up through platform 32 Results Follow-up via phone 3 (700 / needed in routine or only as escalation pair)	3 Results acknowledgement 3.4.	4 Acknowledgement Notification 4.1 Prescription 700 how the prescription is delivered to it	4.2 Introduction to Close Monitoring Regime 4.3 Close monitoring regime set-up on platform	4.4 Nurse remind If patient doesn't do blood feate
ACTORS	ine rejektutzmaan app.	protei on hu mydfeauzhlaabh app.				nt -> from this guidel, patient may mond y draw and guiders may have subject to Character Monitoring Regime, or be anot to tr center.	A ECHARCO (SATY)		53567	<ul> <li>In the panel, same process are for codes lacking, operated and holders altravals until the processing operated and holders altravals interventing-present or codes and altravals. Plant and to the processing of the panel of the panel of the panel IED case by case).</li> </ul>	
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NexusHealth Platform	Patient. The patient profile is counsided and the Home Monitoring TX is care plan gata autohetid. Reministers is book quarkiny to	The Home Monitoring TX care plan is activated.	The system deturs a Reminder to book the blood testing at the GNLab/Referring Center zor day before the		The system delivers an email (Verify compliance) in the Palent Information the Apr. App confirm results are in mange and to long up with healty	hepatologiat. T	he system delivers an email (Verty proplannis) to the Paleert Informing of polied dosage. System shows updated assign and care yip and days weekaal			The system delivers an email (Verify compliance) to the Pacient informing of updated plan. System shows upd care plan.	ed.
					behaviourus and safererono to current desing: Fauli can include the link to the distage and the schedule for next blood testing.						After or missed tests the soutern run deliver a message or
											a call to the nume, to act. - The system displays the patient as "missing close- monitoring checks" within nume view.
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	din jurnding conformation" modeli				entry accury: out of sareger 1. The replan cut the name with beinger value summary every out days.						
LOCATIONS	Hospital	1					1	Pati	ient home/daily life		
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PHASES	1. Onboarding to	Pilot						2	Routine Regime		
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	1.1 Candidate Identification	n 1.2 Introduce	1.3 Recruit/sign-in	1.4 Patient File Update	1.5 Profile activation and Training	1.6 Profile activation and Training	1.7 Prescriptions & Disc	harge 2.1 \	Weekly Questionnaire	2.2 Weekly Monitoring	2.3 Reminder of
conditions					If the patient is a new user of						
conations					the myNexuzHealth app.	profile on the myNexuzHealth app.					
ACTORS											
GP/LabNurse/Referring Center											
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	The patient meets the hepatologist for routine visit.	The patient gets introduced to the pilot opportunity by the	The patient signs the paperwork.	-	The patient gets introduced to the pilot protocol and	D The patient gets introduced the pilot protocol and	to The patient receives the prescriptions, the lab para		patient fills out a weekly		The patient receiptor for booking blood
		nurse.	paperwork.		supporting tools, getting support to install the	supporting tools, reviewing the care plan.	test instruction document care plan summary and t	, the ques	stions about weekly ptoms, general physical		to care plan.
					MyNexusHealth App on his mobile phone. S/he reviews		discharge note covering I needs (medication, blood	nis and	mental health and the	k.	
Here et al a clat	During routing visit the		1	-	the care plan with the nurse.	1	for the next 1 year.		·		
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	and redirect them to the pilot nurse for further information						discharge note covering t patient needs (medication	he			
	and finalize onboarding.						blood tests) for the next 1				
Pilot Nurse		The nurse explains with further detail the Pilot to the		The nurse opens the patient		The nurse introduces the	The nurse prepares the	ation		The nurse does her weekly/biwee review of the patient dossiers.	kly
		patient, verifies elegibility against detailed criteria and		file on the KWS platform. She assigns the TX Home Monitoring tag to the patient	guides the Patient to install	patient to the Pilot protocol and reviews the care plan with the Patient on the	prescription for the medic 4 prescriptions for the qua routine tests, the lab para	arterly		review of the patient dossiers.	
		exposes the necessary paperwork for signature.			his mobile phone, illustrates the main features and		test instruction document discharge note covering t	and a			
		papornon oi oignataioi			Patient.	2	patient needs (medication blood tests) for the next 1	۱,			
NexusHealth Platform		]			The patient profile is created						The system deliv
					and the Home Monitoring TX care plan gets activated.	Reminders to book quarterly	y				to book the blood GP/Lab/Referring
					Reminders to book quarterly tests are set.	tests are set.					Center xxx days planned date.
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LOCATIONS	Hospital							Patient home/daily life				GP Practice/Lab/Referring Cent	Patient home/daily life	_
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PHASES	1. Onboarding to F	Pilot						2. Routine Regime						
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	1.1 Candidate Identification	1.2 Introduce	1.3 Recruit/sign-in	1.4 Patient File Update	1.5 Profile activation and Training	1.6 Profile activation and Training	1.7 Prescriptions & Discharge	2.1 Weekly Questionnaire	2.2 Weekly Monitoring	2.3 Reminder of Booking test	2.4 Booking test	2.5 Blood Test and visit	2.6 Results Input	2.7 AL
conditions					If the patient is a new user of the myNexuzHealth app.	If the patient already has a profile on the myNexuzHealth app.						Happening according to GP/Lab current protocols		
ACTORS		1	1		1	1	1		1			Anna da ana Ma		
GP/LabNurse/Referring Center												According to specific GP/Lab/Referring center current protocols (to be further investigated)		
Patient	hepatologist for routine visit.	The patient gets introduced to the pilot opportunity by the nurse.			the pilot protocol and supporting tools, getting	supporting tools, reviewing	prescriptions, the lab parameter test instruction document, the care plan summary and the	questions about weekly symptoms, general physical and mental health and the		for booking blood test according to care plan.	The patient books the blood test at GP/Lab/Referring Center, with the prescription. The list of examination is available to the patient within the app and on the the lab parameter test instruction document.		The patient inputs the blood test results into the app and gets confirmation of successful upload.	
Hepatologist	During routine visit the Hepatologist identifies qualified patients for the pilot and redirect them to the pilot nurse for further information and finalize onboarding.						The hepatologist confirms the patient-in-range parameters, signs the prescriptions and the discharge note covering the patient needs (medication, blood tests) for the next 1 year.							
Pilot Nurse		The nurse explains with further detail the Pilot to the patient, verifies elegibility against detailed criteria and exposes the necessary paperwork for signature.		file on the KWS platform. She assigns the TX Home Monitoring tag to the patient's in-range parameters, to be reviewed by the hepatologist.	The nurse introduces the patient to the Filot protocol, guides the Patient to install the myNexuzHealth App on his mobile phone, illustrates the main features and reviews the care plan with the Patient.	patient to the Pilot protocol and reviews the care plan with the Patient on the myNexuzHealth App.	The nurse prepares the prescription for the medication, 4 prescriptions for the quarterly routine tests, the lab parameter test instruction document and a discharge note covering the patient needs (medication, blood tests) for the next 1 year.		The nurse does her weekly/biweekly review of the patient dossiers.					[
NexusHealth Platform					The patient profile is created and the Home Monitoring TX care plan gets activated. Reminders to book quarterly tests are set.	care plan is activated. Reminders to book quarterly				The system delivers a Reminder to book the blood lesting at the GP/LabRefering Center xxx days before the planned date.				
ĸws				The patient file is updated with new Home Monitoring TX Pilot tag, the care plan and the in-range parameters (in 'pending confirmation' mode).			All the documents are saved on and printed from the patient file on the KWS.							KWS results
									Normalized         Normalined         Normalined         Normali					a ana a sa







## Deployment phase

Pilot the solution with patients in a real life environment, assessing outcomes and consolidating learnings.





## Service Designer Super Powers





## Start from the people's meeds

#empathy





# Decipher the complexity

**#system thinking** 





## The world around the patient

## Maketheintangible tangible

**#visual communication #rapid prototyping** 





## Make everyone part of the change

#facilitation #co-creation







Illustration by Mercedes Bazan http://mechibazan.com

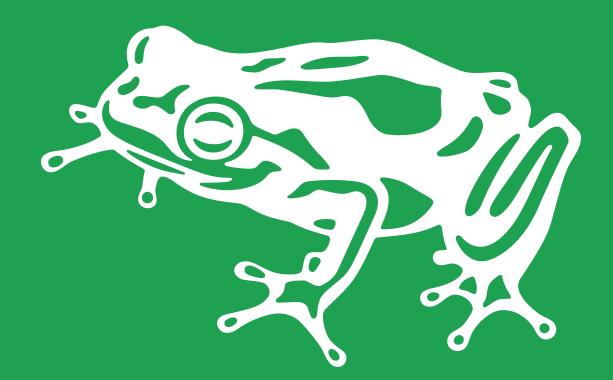


## Whatever you do, don't F up the culture

Why is culture so important to a business? Here is a simple way to frame it. The stronger the culture, the less corporate process a company needs. When the culture is strong, you can trust everyone to do the right thing. People can be independent and autonomous. They can be entrepreneurial. And if we have a company that is entrepreneurial in spirit, we will be able to take our next "(wo)man on the moon" leap. In organizations (or even in a society) where culture is weak, you need an abundance of heavy, precise rules and processes.

## -Brian Chesky





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## Thank you.

@sara\_manzini @frogdesign

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