

Using DESIGN THINKING to Build Hospital-Primary Care Partnerships

THE STORY

In the era of value-based payment, relationships between safety net providers and hospitals are increasingly important. Together, we can work to better manage the many contributors to poor health and support our patients in living healthier and happier lives. For the purpose of our exercise today, we are focusing on solving the problem of patients choosing hospital-based care when primary care is the more appropriate, more cost-effective, and more optimal option for continuity of care.

THE WICKED PROBLEM

People go to hospitals for primary care too often and unnecessarily.

- Overuse of the ED costs the US \$38B annually (Becker's Review, 2017)
- The average cost of an ED visit (over \$2,000) is approximately 40% more than most people spend on rent each month
- Primary care providers can offer more holistic services and can provide care that integrates physical, social, spiritual, and other health factors
- Primary care clinics are the foundation of a safety net of care that relies on community agencies, social services, and health systems to work together to assist those most in need



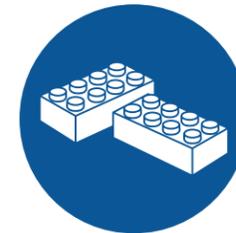
Empathize



Define



Ideate



Prototype



Test and Refine

Brainstorm 5–10 'How can we...?' questions

My copay is higher at PCP than Hospital ER: *"How can we use pricing incentives to influence behavior?"*

Hospital ER has better hours for me and I don't have to miss work: *"How can we make PC more convenient?"*

I don't speak English—the hospital has interpreters so I go there: *"How can we serve non-English speakers?"*

I am healthy and rarely need care, so I don't know options other than the ER: *"How can we make people more aware that we exist?"*

Study from all perspectives

Hospitals offer 24/7 options for care; all services in one place and single visit; interpreter services; look at the data regarding what is available to the population you serve. What is missing? What would it take to provide the missing elements?

It is easy to find out where the nearest hospital is located and the hours of operation. Measure the level of awareness of your services and pinpoint differences between knowledge and understanding; differences in accessibility; sources of information and how people access information about you vs. hospitals.

25 ideas in 5 minutes; choose 2–3 to build upon; select 1 to move forward

- Mobile PC options; van; pop-ups
- Include clinic info in school packets
- PC clinic at library or community location
- Bilingual telehealth on-demand
- App that shows clinics that can take you today and the locations
- Targeted social media campaign with teen champions on Snapchat, Instagram, etc.
- On-demand Uber or shuttle
- Business partnerships to serve hourly workers at workplace
- Fast track annual visit w/clinic info
- High utilizer buddies and outreach
- Multiple family members; single visit

Brainstorm 2–3 ideas for how to prototype your idea, storyboard, mock-up, model...

Decided to combine app that shows walk-in options for today with targeted social media campaign:

- Detail campaign purpose, message, outcomes, and options
- Map participating clinics
- Develop status indicator and input process; info to be included (time, cost, provider info, etc.); coding
- Create social media filters with users
- Outline incentives and rewards
- Teen or new mom ambassadors
- Sketch out the options—target area mapping, push messaging, interaction

Put it out there. TRY IT.

Recruit a focus group and unveil your prototype. Give them something that they can touch, feel, experience.

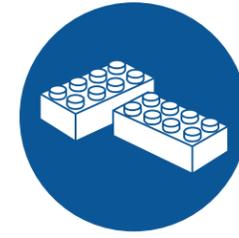
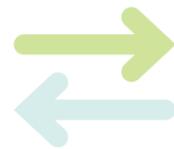
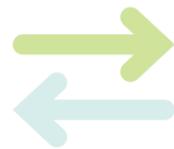
See how they use the product as expected and in unexpected ways. Listen for things they wish it did or how they wish it would function. Don't judge, filter, or defend. Record all comments.

Take the feedback and go back to the prototype phase and refine. Test again. Once you have something that might work, detail production and budget requirements, launch plan, and outcome metrics.

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