Human-Centered Design
A Journey of Understanding

Ariel Singer, MPH
OPCA Partnership and Innovation Director
Human-Centered Design

SEE & EXPERIENCE

DIMENSION & DIAGRAM

SIX PRINCIPLES for WORKING DIFFERENTLY

PITCH & COMMIT

TEST & SHAPE

QUESTION & REFRAME

IMAGINE & MODEL
## Catalyst Innovation + Design Thinking Framework

### GOALS

| What will you do? | Learn about your challenge through immersive experiences and listening to first-hand perspectives. | Make sense of what you documented and learned from your research. | Refine and focus the scope of your challenge based on key insights from your research. | Dream up many ideas to address the challenge. Draft a plan for how you’ll test key features of your best ideas with users and stakeholders. | Make quick, rough drafts of your ideas. Get the examples in front of people and incorporate their feedback -- repeat! | Communicate with people outside of your core team about your project and why it’s worth doing. |

### METHODS

| How will you do it? | Observation, Shadowing, Show + Tell Interviews | Collaborative Cycle, Empathy Mapping, Journey Mapping | "How Might We..." Statements, Analogous Examples | Brainstorming, Voting, 2x2 Matrix, Solution Mapping | Paper Prototypes, Storyboarding + Scenes, Role Play | 7-Part Pitch Structure, Calculating Value, Video Storytelling, "I Like I Wish, I Wonder" |

### ACTIVITIES

| What will it involve? | Collect quotes, photos, and video from observational, shadowing, and interview research. | Analyze qualitative research and convey patterns using visual frameworks. | Articulate your challenge in a concise, focused, and optimistic way. | Encourage people with diverse perspectives to contribute ideas. Prioritize which ideas to try first and which specific elements to test. | Create and test at least three variations on your best idea(s) using sketches, scripts, mock-ups, and other tangible formats. | Present a compelling story about your challenge to organizational leadership and propose next steps. |

### MINDSETS

- Inclusion + Empathy
- Collaboration
- Starting small + learning fast
- Making things tangible
- Sharing unfinished work early + often

© Oregon Primary Care Association
Some of the key things that we realized:

1) There is a education gap at OPCA relating to APCM. Engaging with APCM requires significant investment in climbing the learning curve.

2) The project is very complex and feels complex both for our staff and for the health centers. There is probably a lot to be gained from simplification.

3) There is a kitchen sink effect with APCM. We throw a lot of things and people in the mix with it.

4) There is some tension between being expansive and inclusive, and trying not to increase the complexity and breadth of the project.
Questions lead to solution ideas:
1) Reduce the complexity in the project, where appropriate and possible
2) Move from siloes of knowledge to a shared pool
3) Clarify the right level of detail for staff to understand about APCM and support staff to feel confident in their ability to understand and connect dots to OPCA’s flagship program
Today's Agenda

Objectives:
- Discuss updates on key OPCA activities
- Get to know who's who they are, why they're important, what we're working on
- Dive into dashboard data
- Brainstorm ideas for next use case

Action Items:
- Send proposal summary to OPCA team
- Update service plan updates on OPCA interface

Next Meeting:
- Dashboard process
- Clinic check-in & follow-up plan

Work Plan:

Program Issues

- Pelvic floor SFM
- Screening, access, and patient convenience
- Yakima having their unique level of accountability for quality improvement
- Enrollment changes to be echoed across all units

Brainstorm: Ideas on how to use Dashboard

- When meeting w/ OPCA, you have a relationship
- Look at the website to understand the openness to the community
- Ensure ongoing support for TA efforts are needed
- Who is succeeding to collect data? Look at core web
- Consider a yellow flag if data is not accurate or timely
- Anchor TA in program level data
- Note: This is a summary of data (auto vs manual input). MUST DISCUSS.

PE Webinars #1

- Engaging clinic stakeholders, even speaking to external audiences
WHY:
- Promote health equity
- Improve human experience
- Create high value health systems

WHAT:
- Build on PCMH practice transformation with focus on equity and human experience
- Develop changes in payment with accountability for outcomes and methods for accounting for social determinants
- Use data to manage change at all levels
- Invest in partnerships to create system level change in payment and delivery
- Address system level barriers to health in communities
- Experiment, innovate and learn as we go

ACCOUNTABILITY + TRANSFORMATION GOALS

QUARTERLY DASHBOARD

DATA SPOTLIGHT:
Mosaic equity analysis

HOW:
- Create new strategies to demonstrate improvement in human experience, cost, quality and access
- Drive change at the system level
- Implement a systematic approach to improving health equity
- Facilitate a robust learning community for stakeholders to learn from each other

ACCOUNTABILITY + TRANSFORMATION GOALS

QUALITY

COST

ACCESS

POPULATION HEALTH EQUITY

WHO:
What are we going to do together today?