

A photograph of a person in a blue kayak navigating a narrow, moss-covered canyon. The canyon walls are steep and covered in vibrant green moss. A waterfall is visible in the background, cascading over rocks. The water is clear and reflects the surrounding greenery. The scene is illuminated by natural light, creating a serene and adventurous atmosphere.

Design Thinking Meets Complex Care

Andy Switky

Barbara Kohnen Adriance

Nov. 15, 2017



Packard Bell

486SX2/50MHz Multimedia Computer System

- 420 MB Hard Drive
- 4 MB Memory
- 1 MB Video Memory
- 14" Super VGA Non-Interlaced Color Monitor
- Double-Spin CD ROM Drive
- 16-Bit Sound Card & Speakers
- Internal Fax/Modem (2050+/8549)

\$1796
CPU & MONITOR

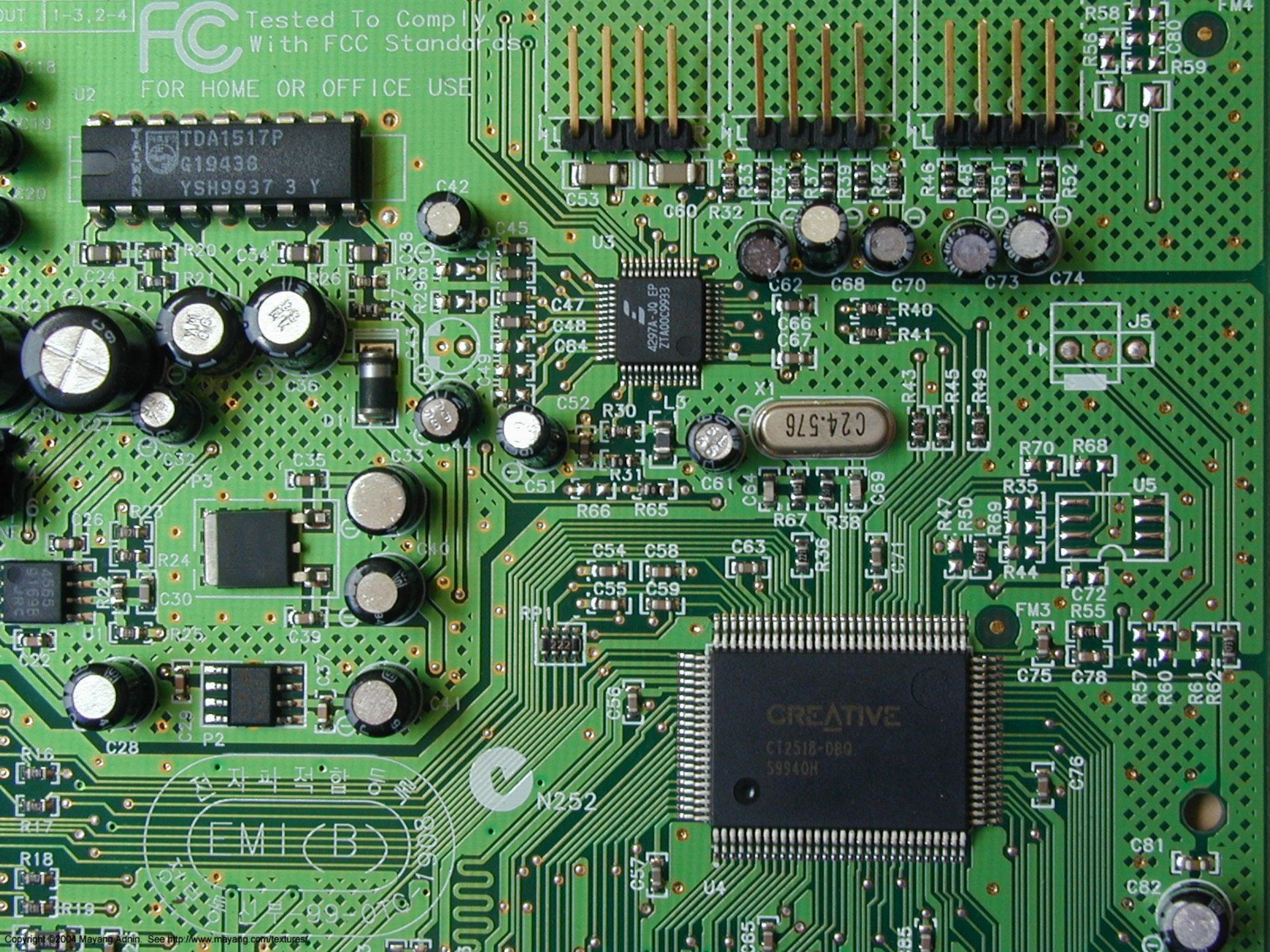


CD ROM Drive



Includes Preloaded Software and CD ROM Software

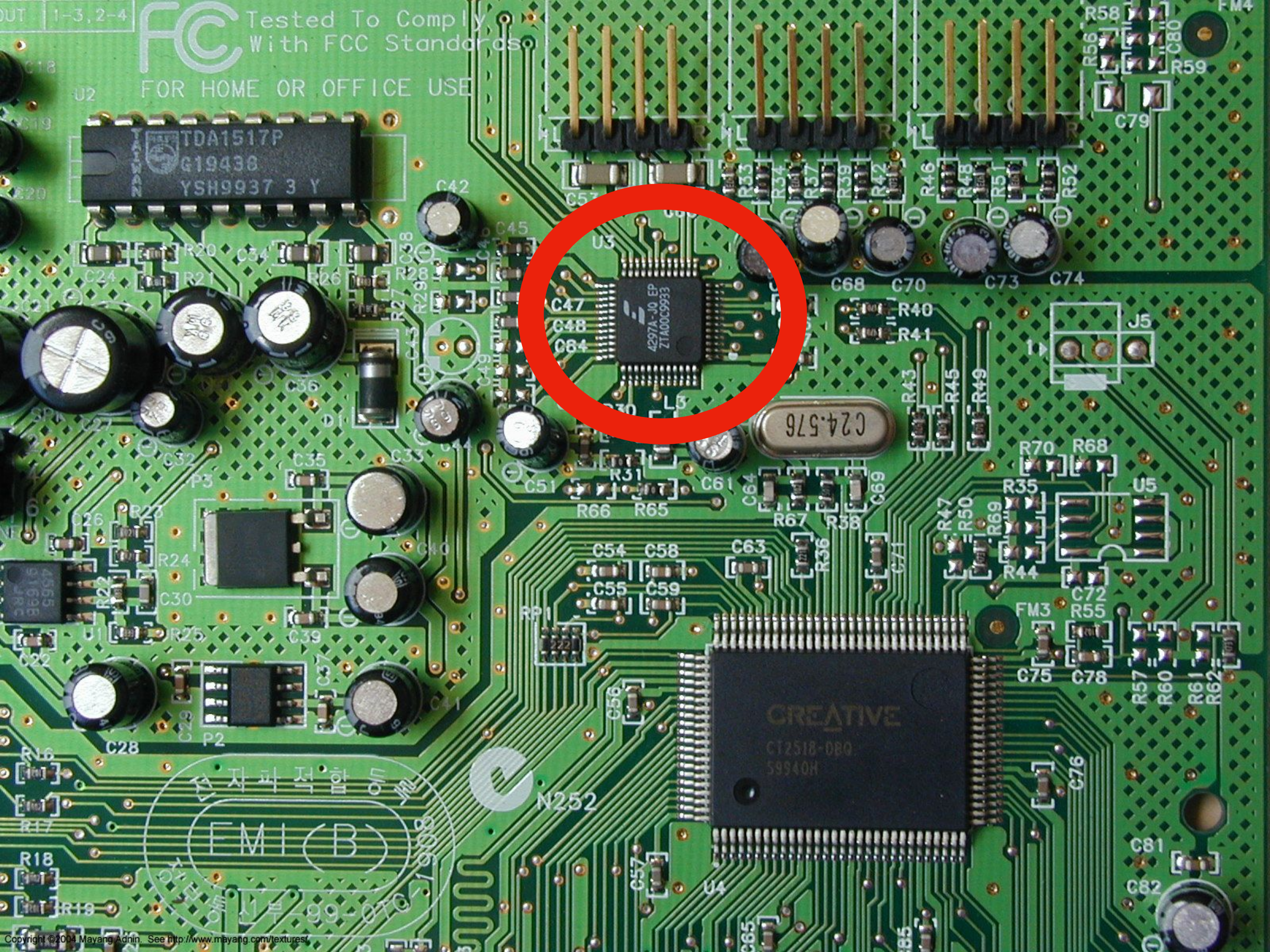
In many industries increasing specialization is necessary and useful.



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With FCC Standards

FOR HOME OR OFFICE USE

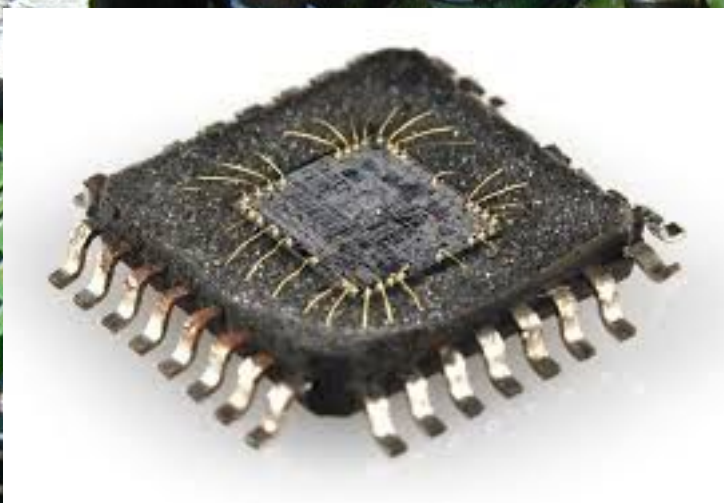
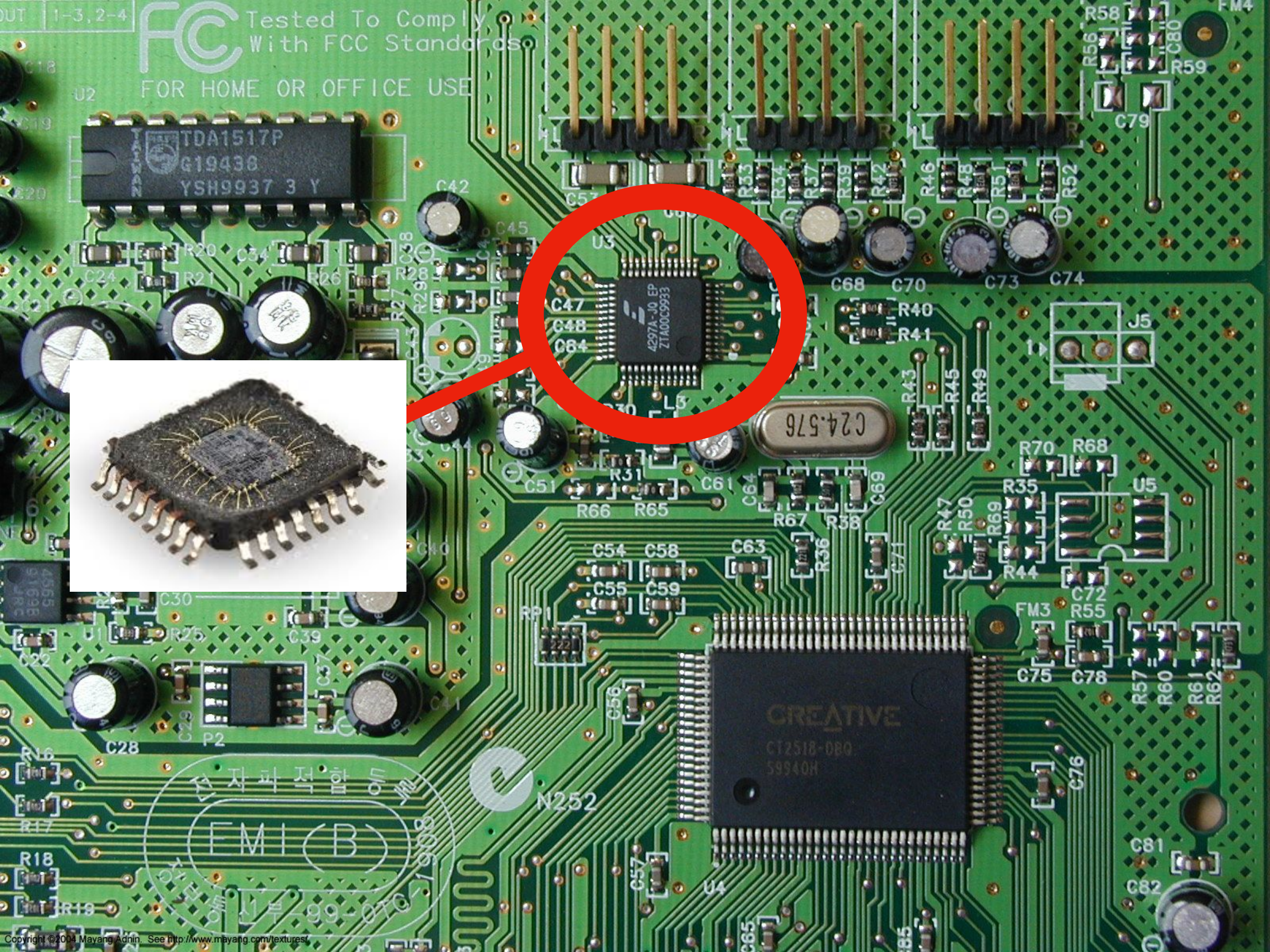
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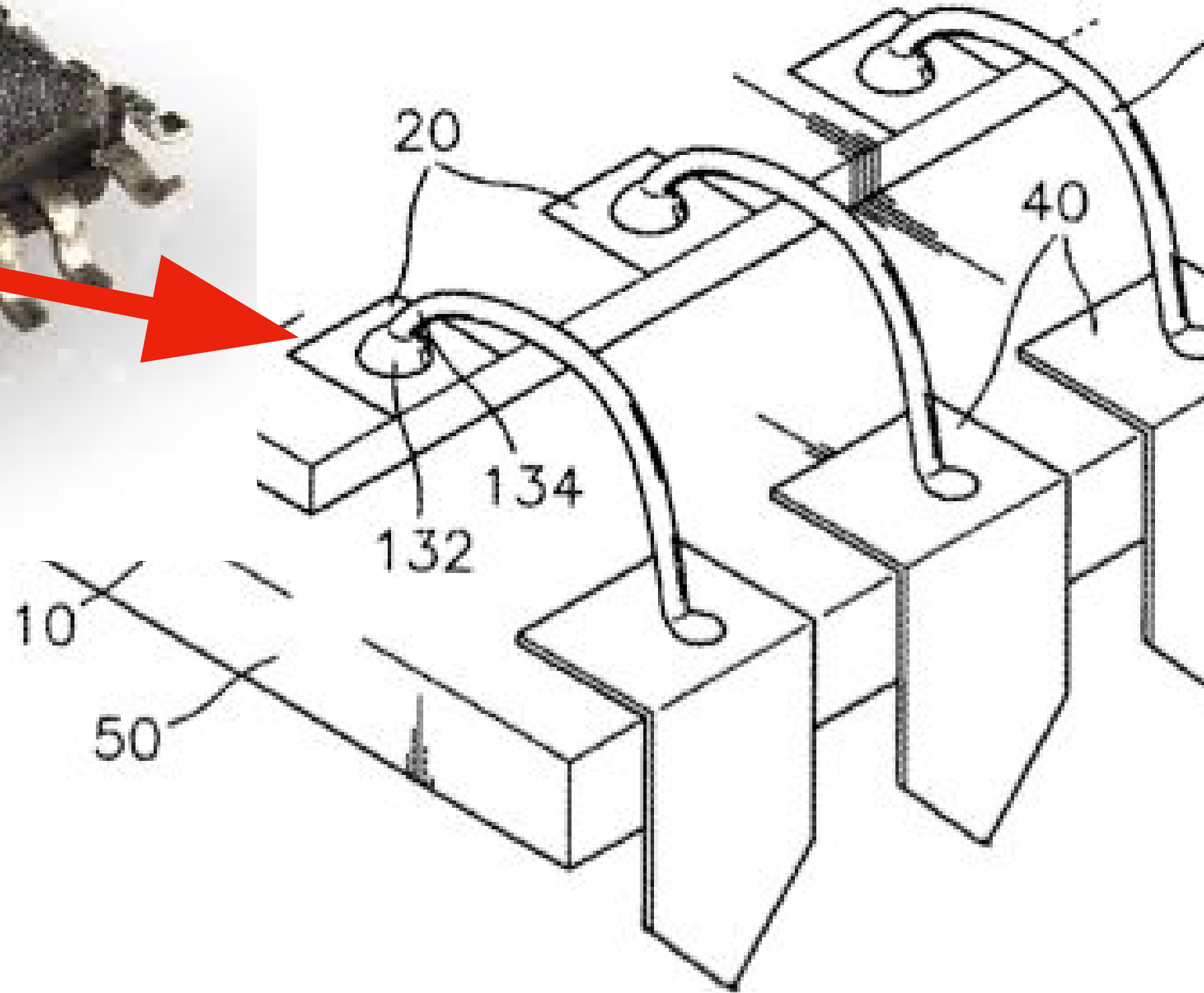
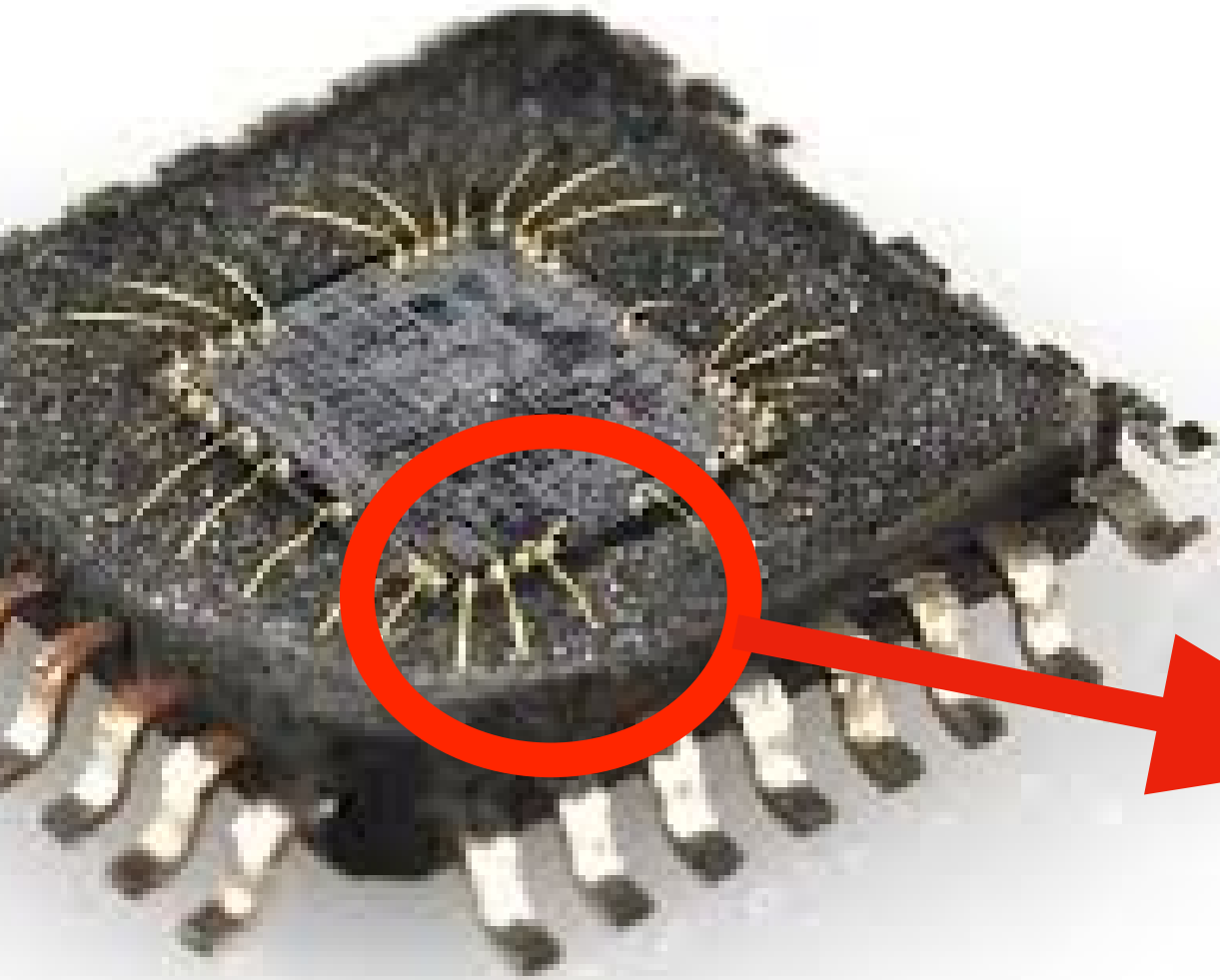


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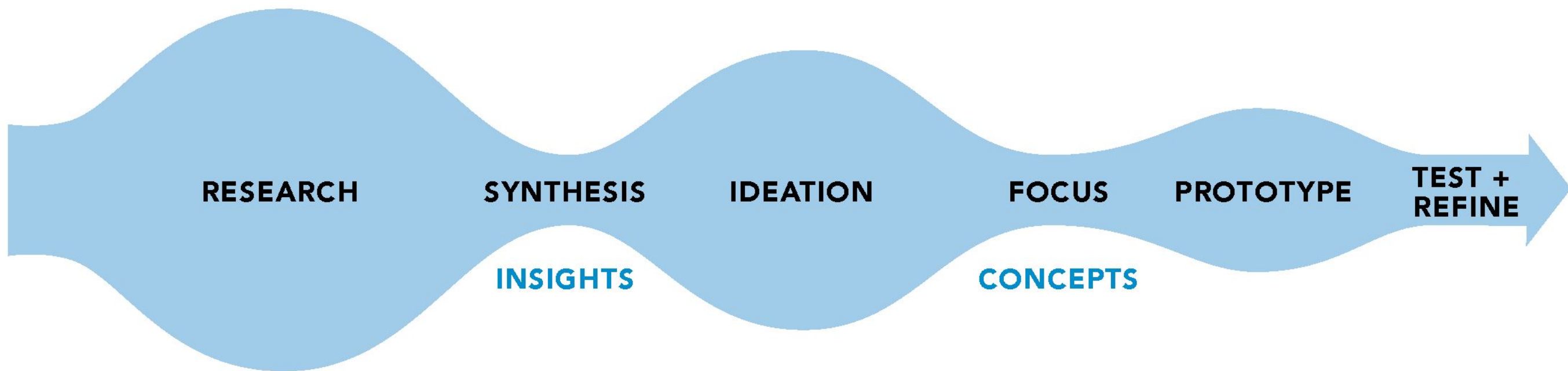






But “complex care” crosses so many disciplines - behavioral, medical, and social - that it requires expertise in collaboration and coordination.

Design Thinking provides a framework for in-depth exploration and radical collaboration across disciplines.





CareOregon Sherpa



In a conceptual redefinition of the Case Manager role, the CareOregon Sherpa would guide members through the entire medical journey. This can include a pre-appointment interview to address concerns, counseling during a medical appointment, and a comprehensive set of post-appointment tools to empower CareOregon members to make better decisions about medication, diet, and treatment.

CareOregon builds community health centers



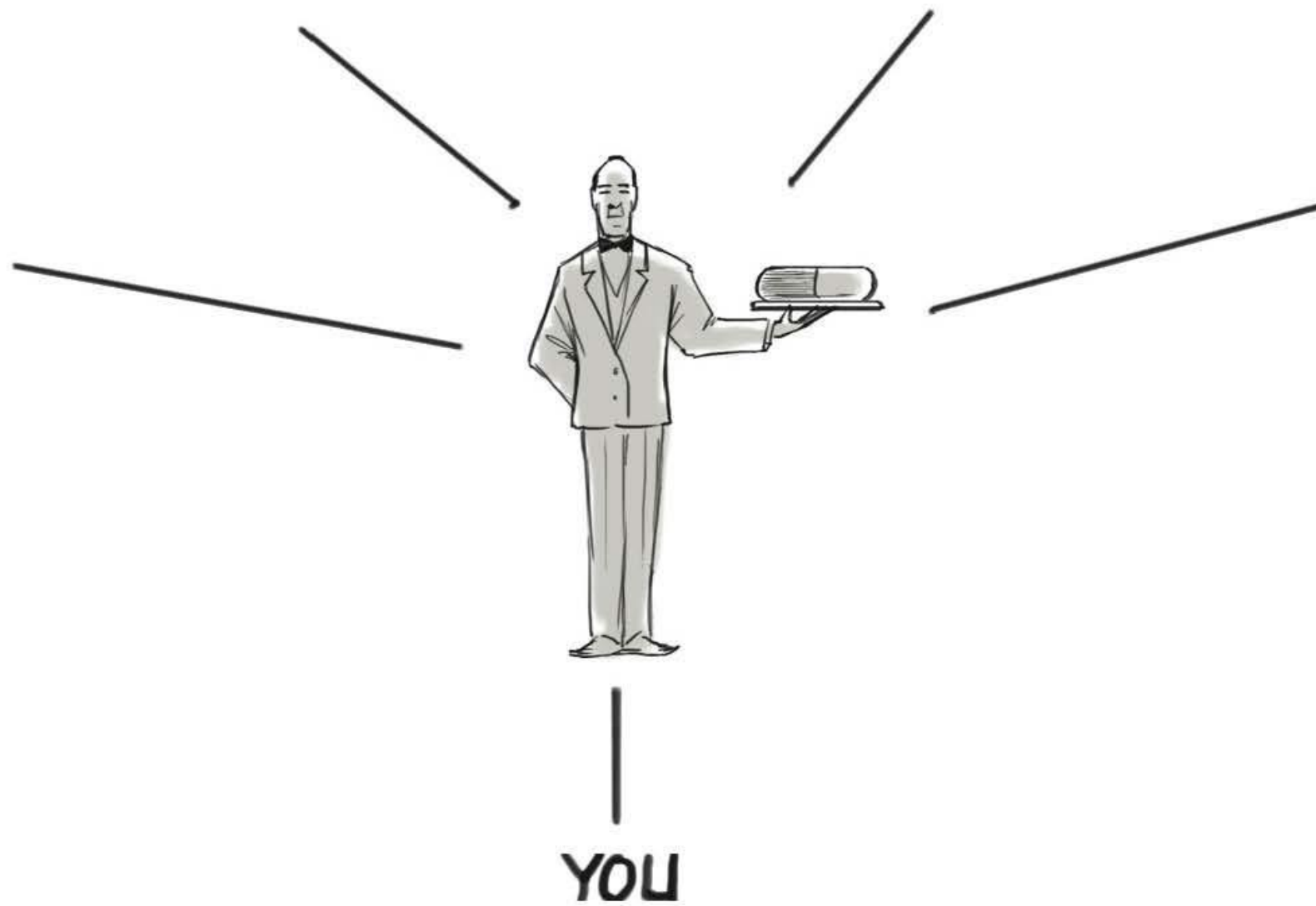
CareOregon would work closely with health providers and social service organizations in communities around the State to understand their specific challenges. CareOregon has the opportunity to be face-to-face with its far-flung membership and becomes uniquely positioned to provide guidance and design of community-specific health centers.

Healthy cooking: learning and doing



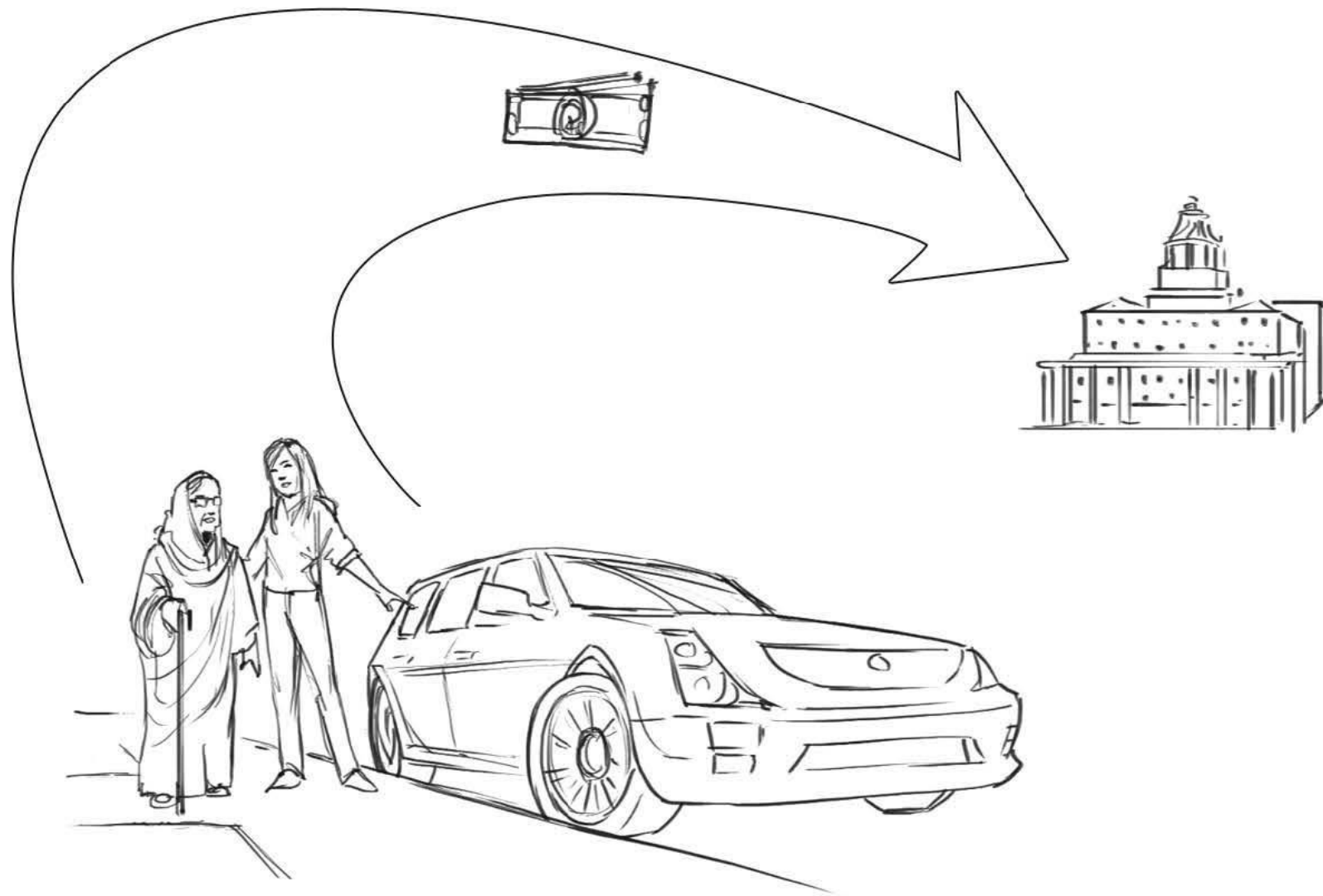
To bridge the gap between learning about healthy eating and cooking healthy meals, this concept would offer CareOregon members inexpensive (\$10-20) rice cookers, rice, and easy recipes at cooking classes in targeted “food desert” locations.

Drug Butler



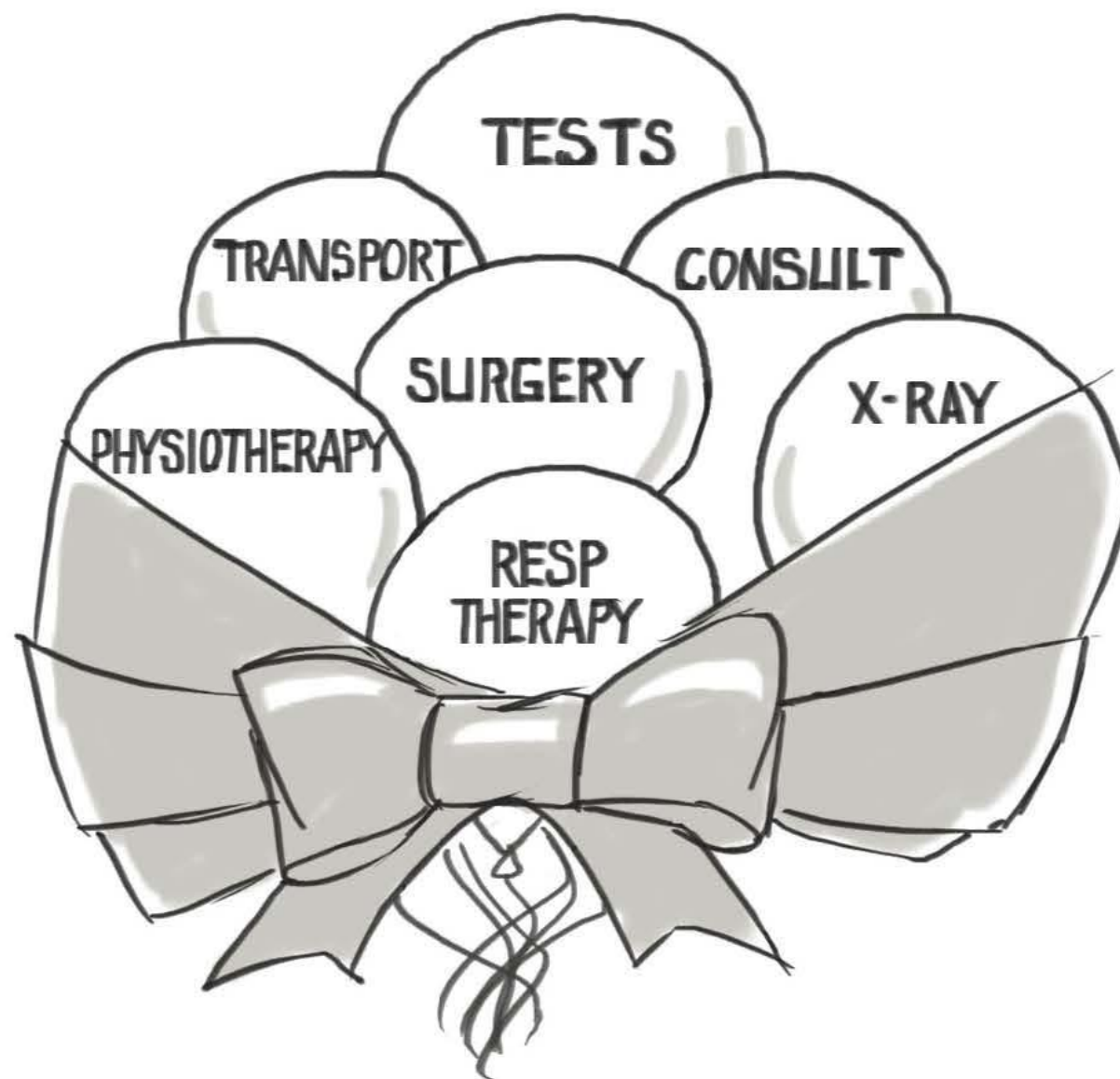
This concept is a user-friendly service to coordinate the receipt and delivery of all medications. The member can consolidate prescriptions so they can be renewed and/or picked up (or mailed) at the same time. Members could call in or log in to a website to renew prescriptions. This service could also help with medication management by managing blood work, drug interactions, a list of all meds, etc.

Wellness bank & barter



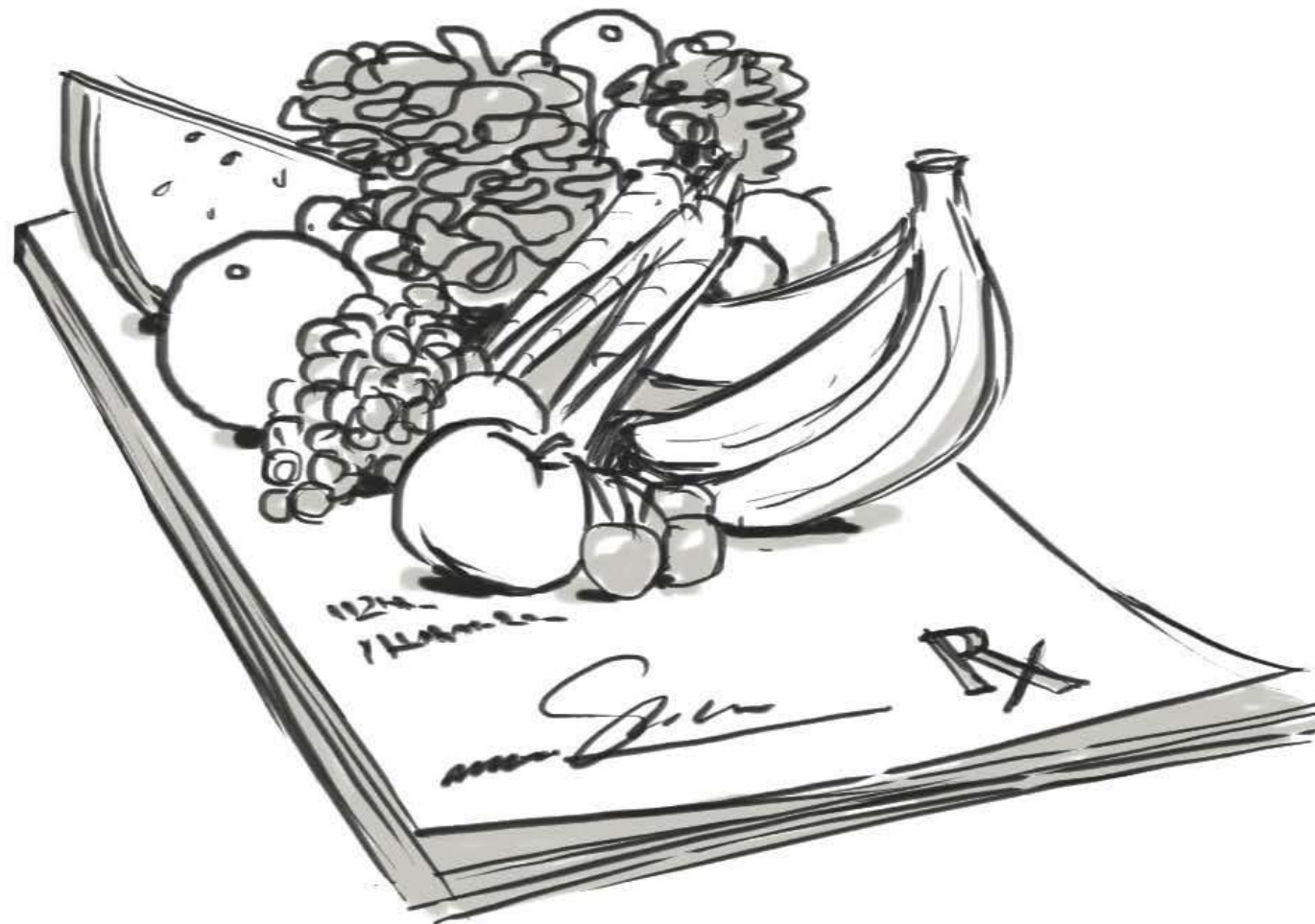
This concept is based around a bank that facilitates the exchange of services between members of the community. For example, a university student might provide a ride to the grocery store for an elderly person, and in return receive money for college from the wellness bank.

Service bundles



This concept is designed to ease financial and administrative loads by bundling care services. Instead of creating service silos, CareOregon can simplify a patient's experience and make healthcare more streamlined for members.

Food Rx



In this concept, food truly is medicine. The idea is to have doctors prescribe specific foods in addition to (or instead of) traditional medications. These foods would be covered by insurance plans. The concept is designed to increase the speed of care and enable patients to make better choices over the long term by incorporating healthier foods into their lifestyle.



Prototyping is key to design thinking.



My Easy Drug System™



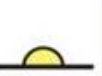
















(M.E.D.S.) Chart version 4.2.2

page ____ of ____

Name: _____

Date filled out: _____

PCP: _____

Drug Name & Strength	When & How Many				Why Taking	How Is It Working?	
						You	PROVIDER RESPONSE
						  	
						  	
						  	
						  	
						  	

Instructions

Doctor: Use this visual system to connect to the medicine bottle and explain what to do.

You: Use this MEDS Chart to write what you're taking, why to take, how to take and what to expect; and to share how it is working. Continue to read medication bottle. ***If this chart does NOT match your medication instructions given to you by your doctor or pharmacist, please call them for help on what to do.***





"When we started out, it was an R&D thing for driving innovation in new products. Now it's not just R&D; user-centered innovation is a central part of our culture. It's what we do throughout the organization," said Amy Cuneo, Associate Director, Customer Insights.

Ingredients for Success

- CEO and/or Board actively supports
- A champion anointed by the CEO or Board
- Senior leadership buy-in
- Right mix of people on the bus
- Clear purpose
- Excellent communication
- Budget
- Success - and failure - are highlighted and discussed broadly



THE TEN FACES OF INNOVATION

LEARNING

ANTHROPOLOGIST

Observe, Interact, Look Around

Vuja De – see the common for the first time

Keep a “Bug List” and an “Idea Wallet”

Maintain a Spirit of Curiosity

“The real act of discovery consists not in finding new lands, but in seeing with new eyes.”

– Marcel Post

EXPERIMENTER

Hard Work, Curious Mind

Fail Often to Succeed Sooner

Prototype everything!

“I have not failed, I have merely found ten thousand ways that won’t work.”

– Thomas Edison

CROSS-POLLINATOR

Draw Associations, Make Connections

Wide sets of interests and Avid Curiosity

Bring seemingly unrelated ideas together

“Leave the beaten track occasionally and dive into the woods. Every time you do so, you will be certain to find something that you have never seen before.”

– Alexander Graham Bell

ORGANIZING

HURDLER

Tireless Problem-Solver, Optimist

Quiet Determination, perseverance

Don’t “just do your job”

Do see beyond initial failures

“We choose to go to the moon in this decade and do the other things, not because they are easy, but because they are hard . . .”

– John F. Kennedy

COLLABORATOR

The team over the individual, shared journey

Multidisciplinary teams

More of a coach than a boss

“In the long history of humankind (and animal kind, too) those who learned to collaborate and improvise most effectively have prevailed.”

– Charles Darwin

DIRECTOR

Big picture thinking

Bring out the best in team members

Give center stage to others

Shoot for the moon and wield a large toolbox

“I dream for a living.”

– Steven Spielberg

BUILDING

EXPERIENCE ARCHITECT

Fend off the ordinary wherever you find it

Facilitate positive encounters with your

products, services, organizations, spaces, and events

SET DESIGNER

Liven up the workplace

Promote energetic, inspired culture

“Every organization (and every employee) performs a bit better or worse because of the planning, design, and management of its physical workspace.”

– Franklin Becker

CAREGIVER

The foundation of human-powered innovation

Empathy for individuals

Create relationships

STORYTELLER

Capture imagination with a story (video, narrative, animation, drawing)

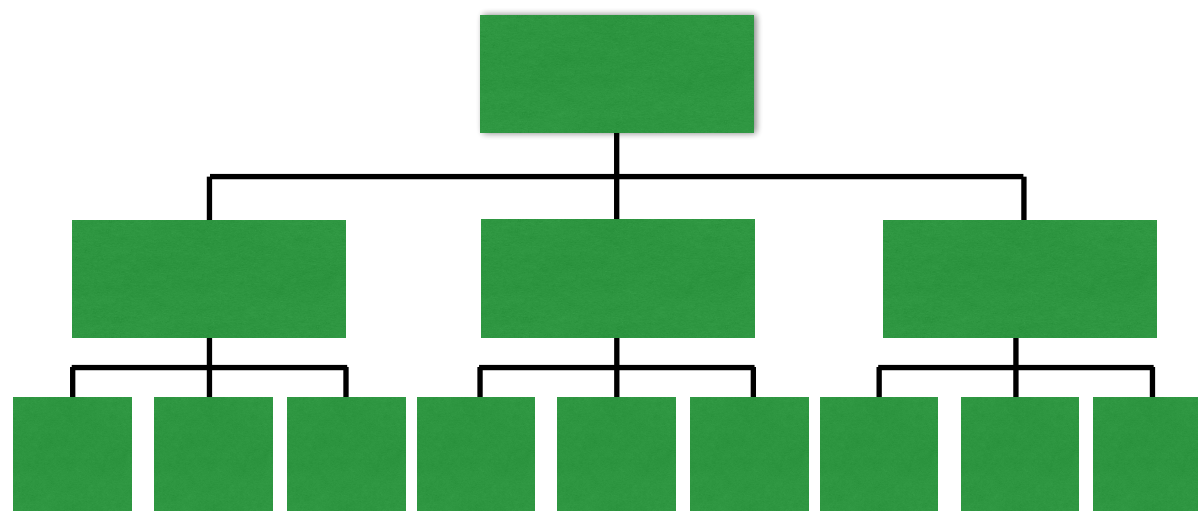
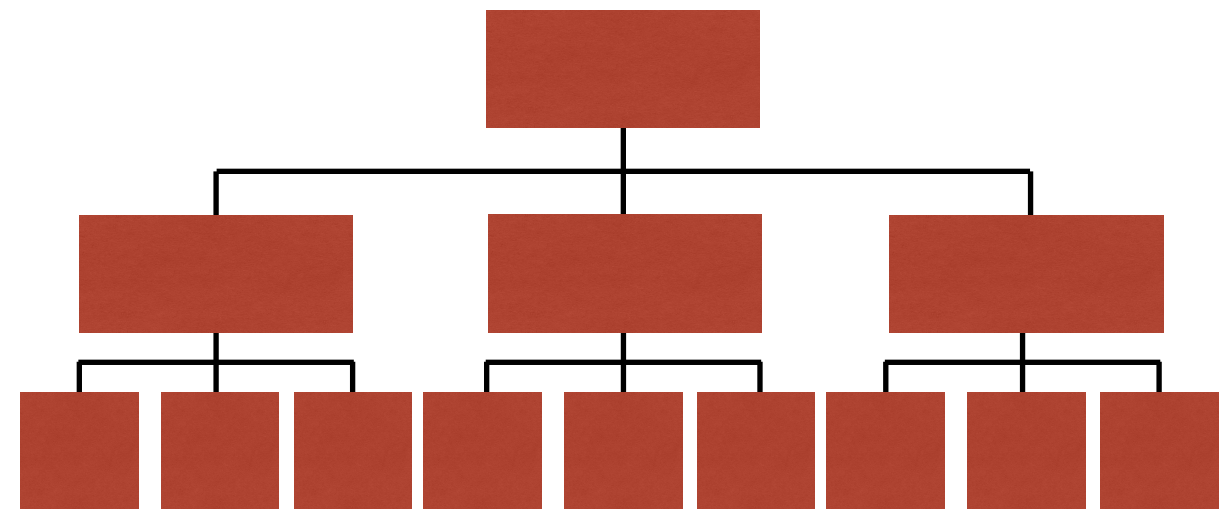
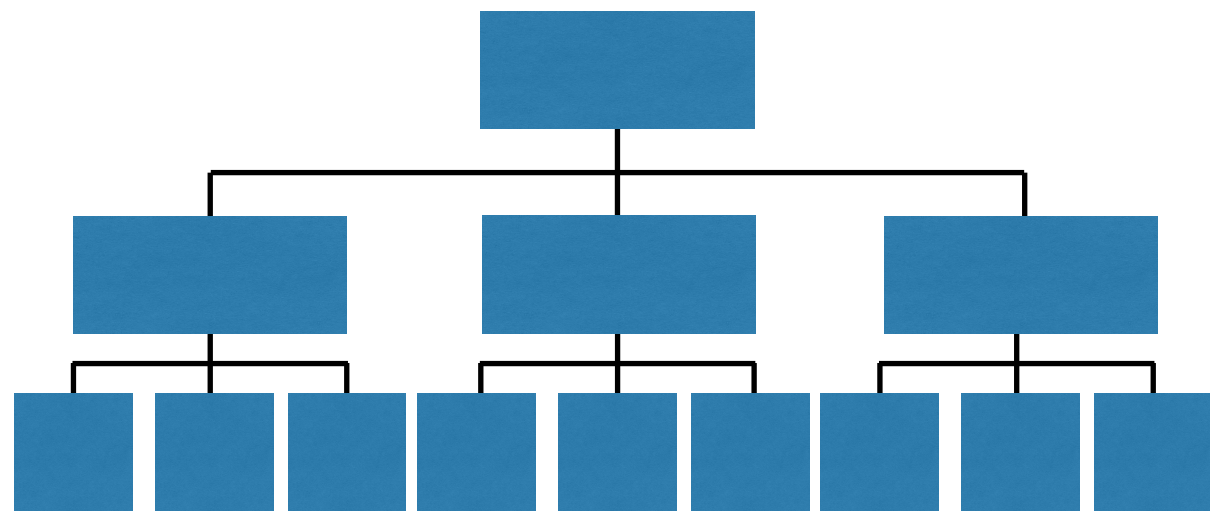
Spark emotion and action

“The universe is made of stories, not atoms.”

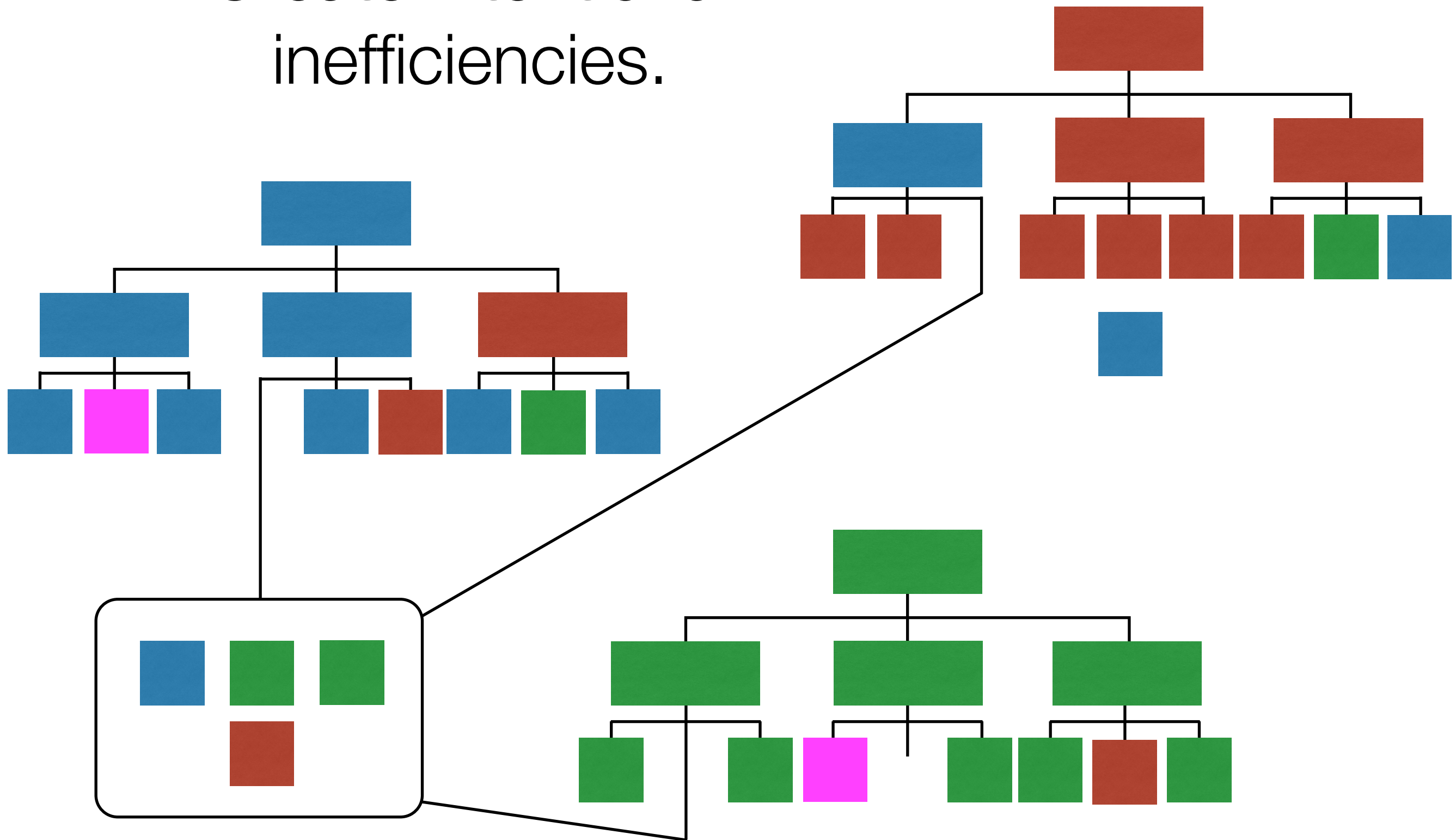
– Muriel Rukeyser

How do we get there?

Create intentional
inefficiencies.

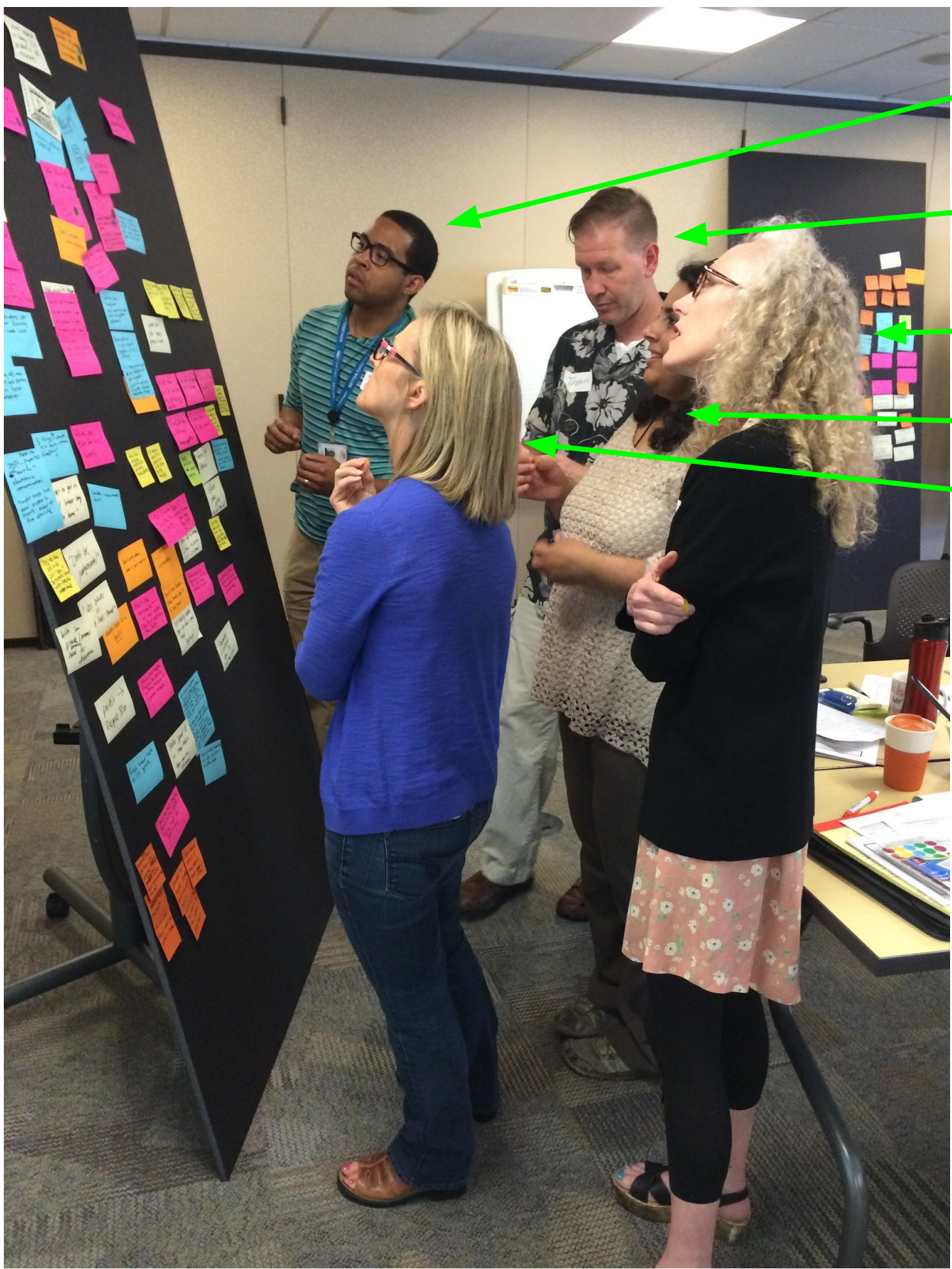


Create intentional inefficiencies.





A typical CareOregon
innovation team



Customer service

Operations

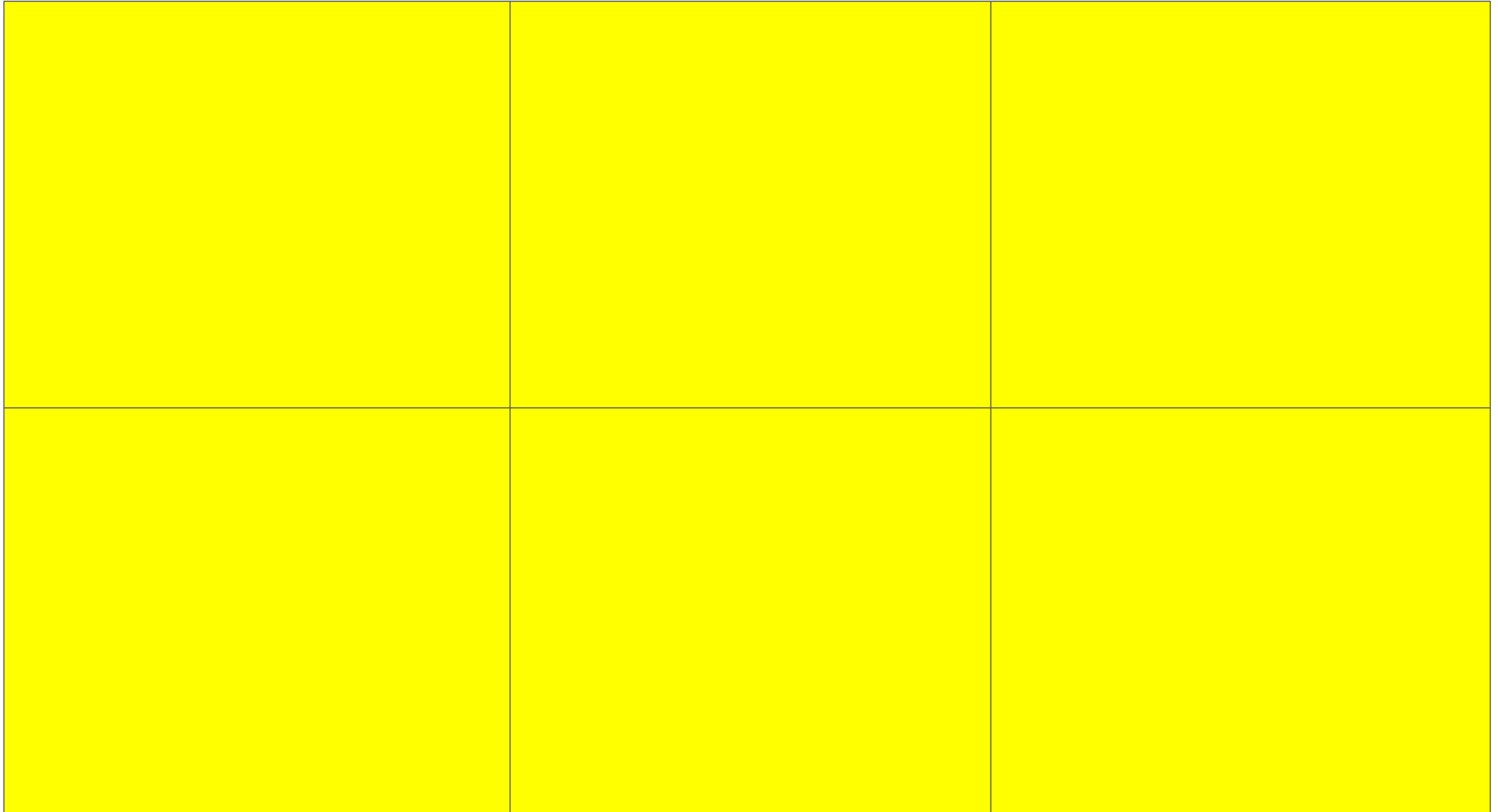
Communications

Pharmacy

Administration

A typical CareOregon
innovation team

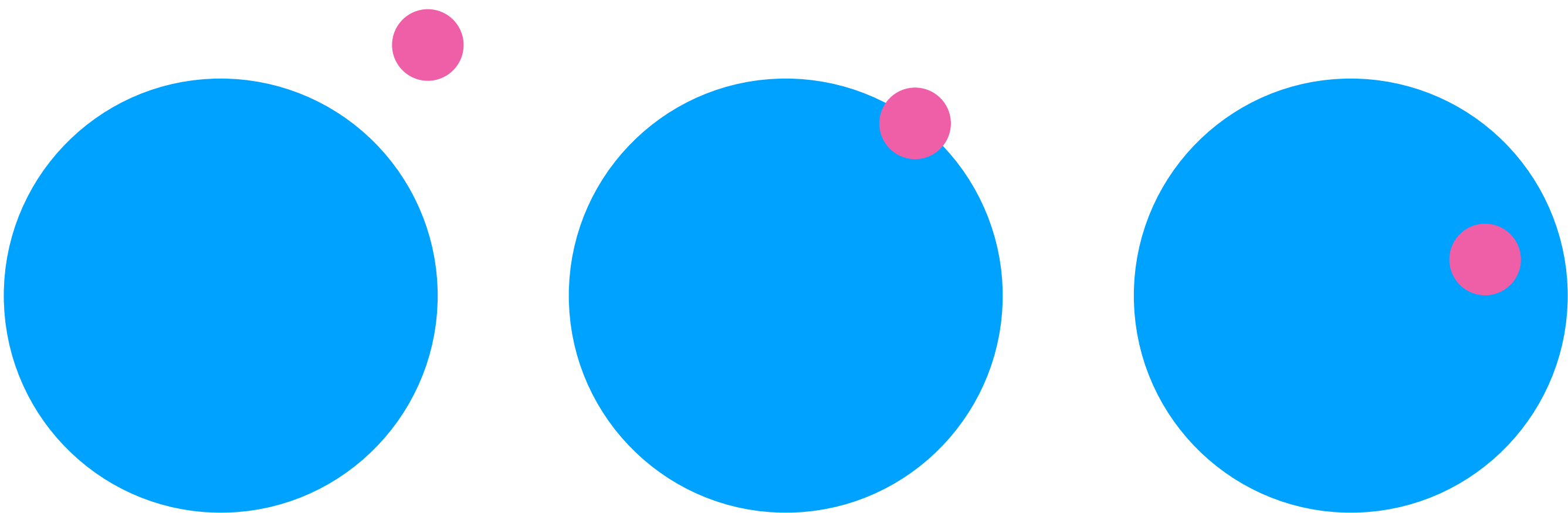
Now it's your turn!



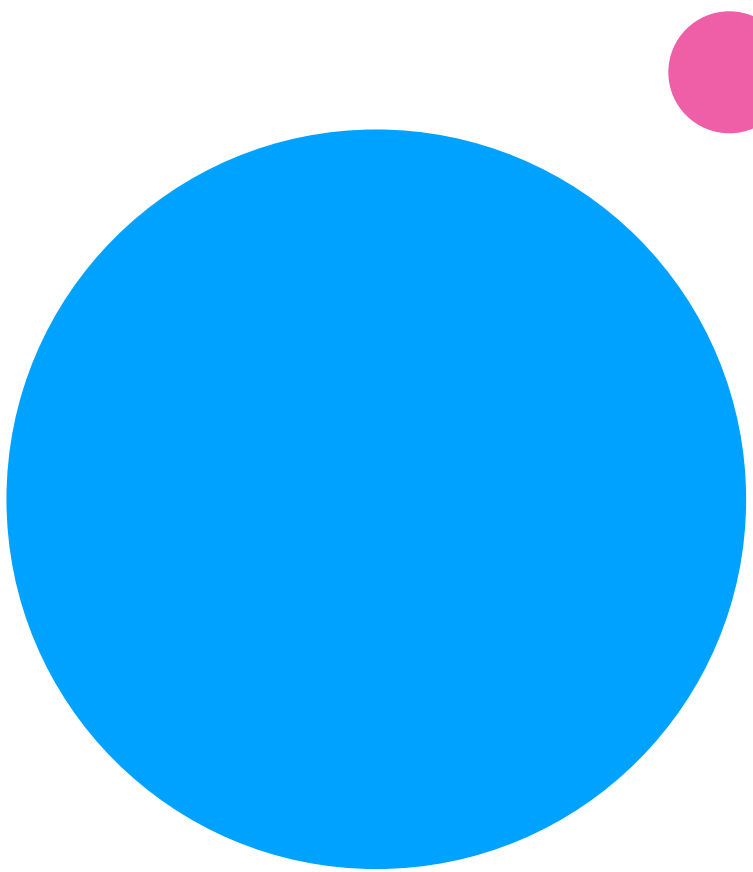
How siloed is your
organization?

strongly
siloed

wildly
mixed

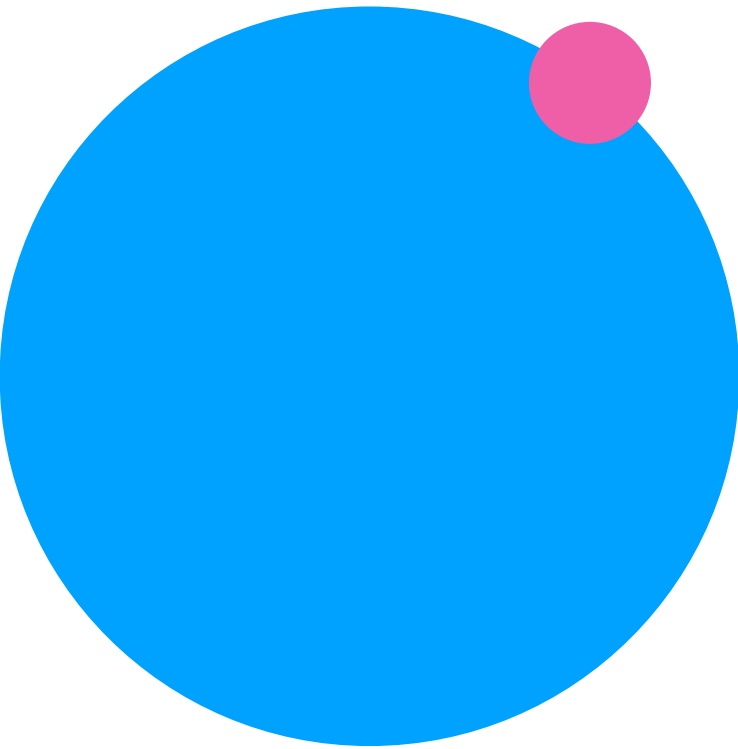


Be intentional about innovation



Outsourcing
innovation to
consultants

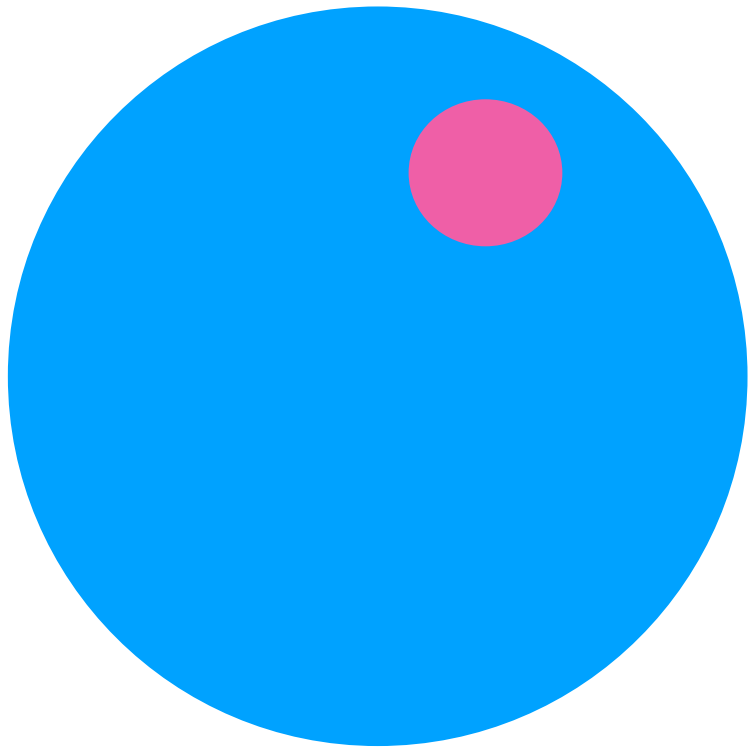
Growth by
acquisition



Joint ventures

Co-designing

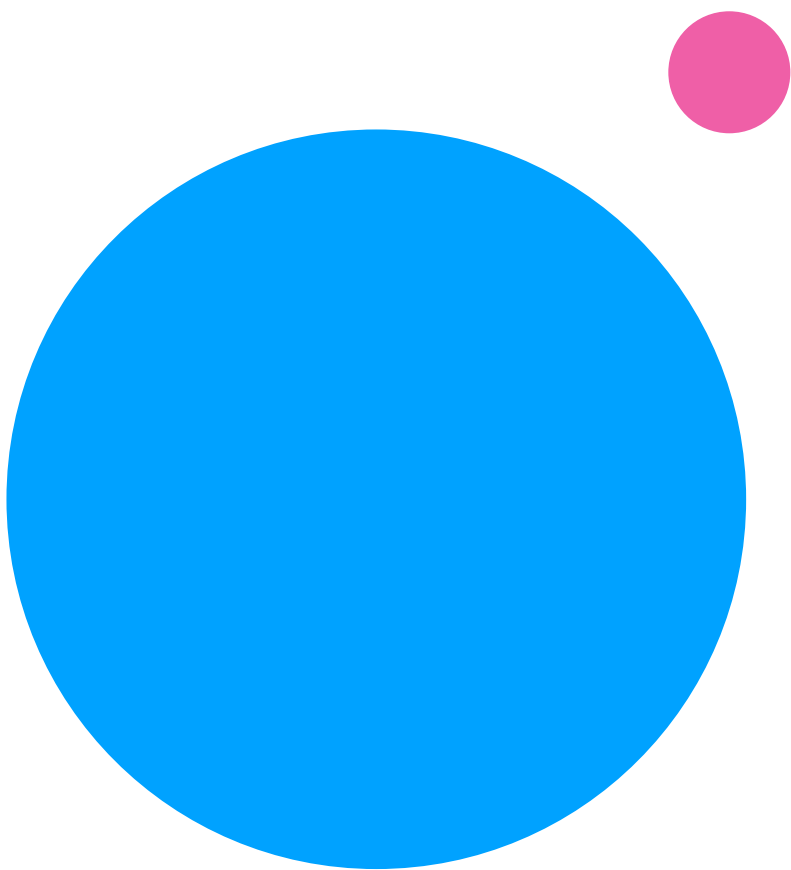
Learn one, do one...



Internal innovation
teams

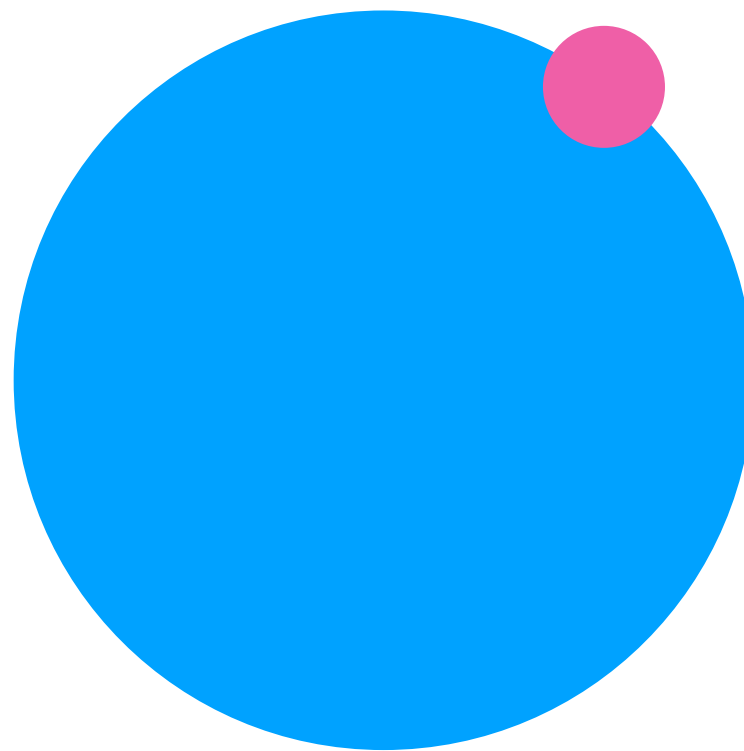
Centers of
Excellence

Six Sigma blackbelts



Outsourcing
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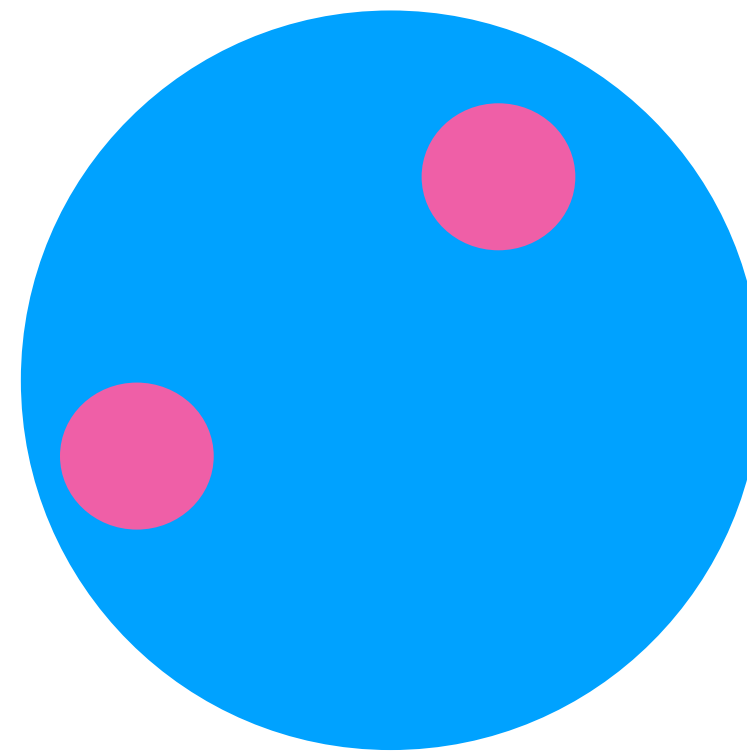
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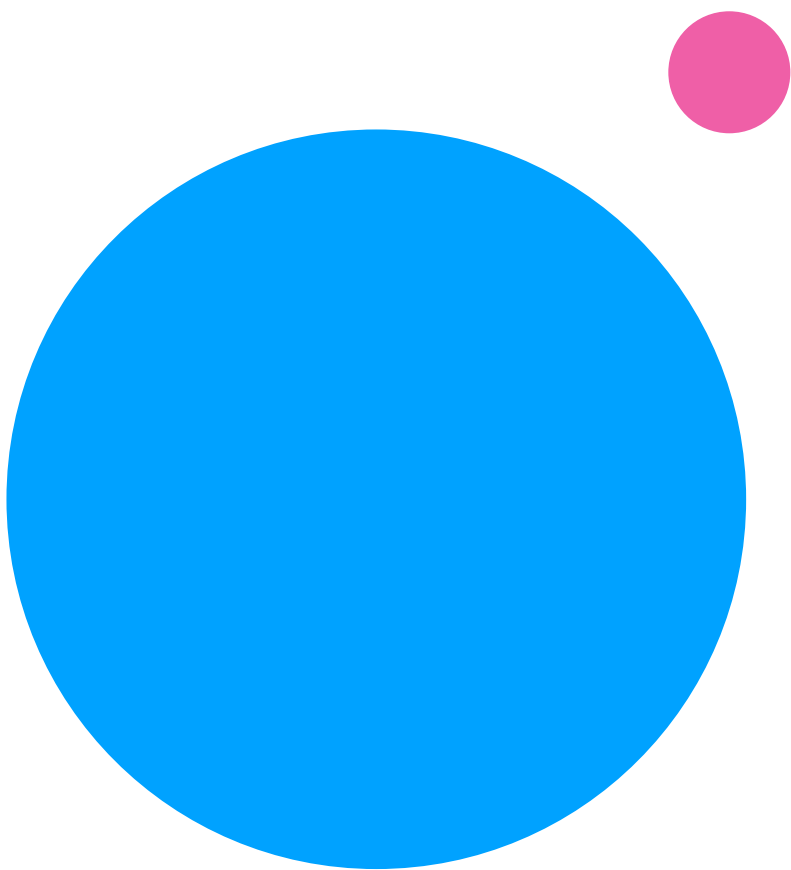
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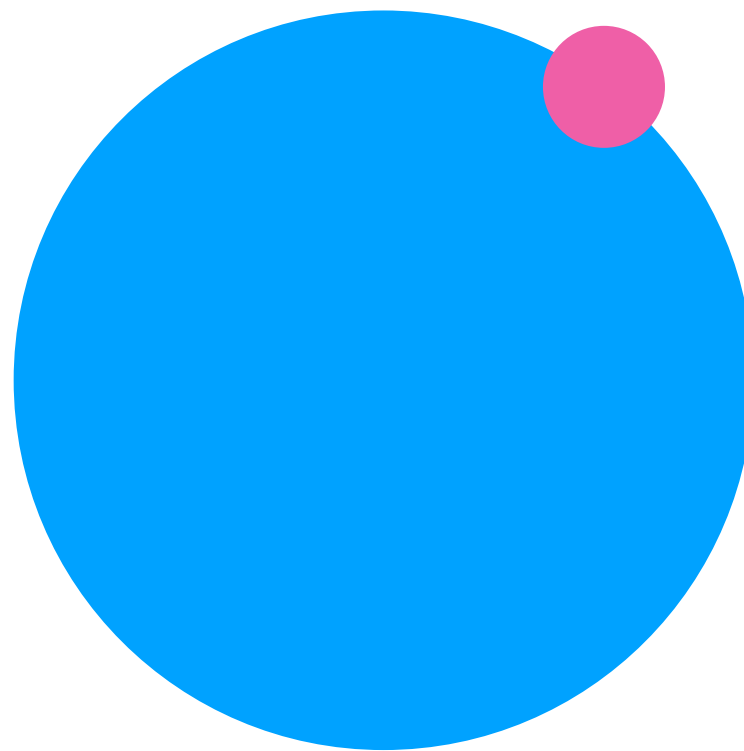
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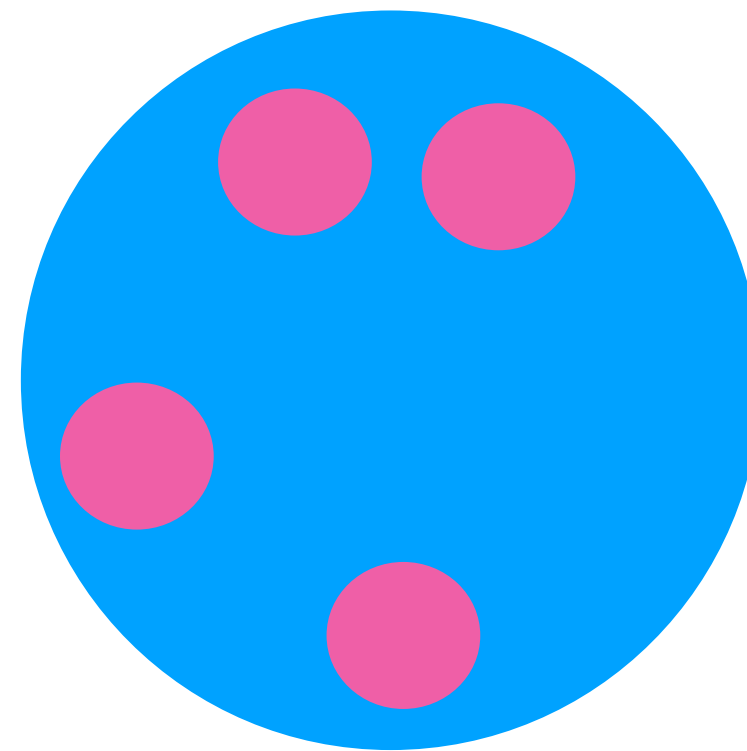
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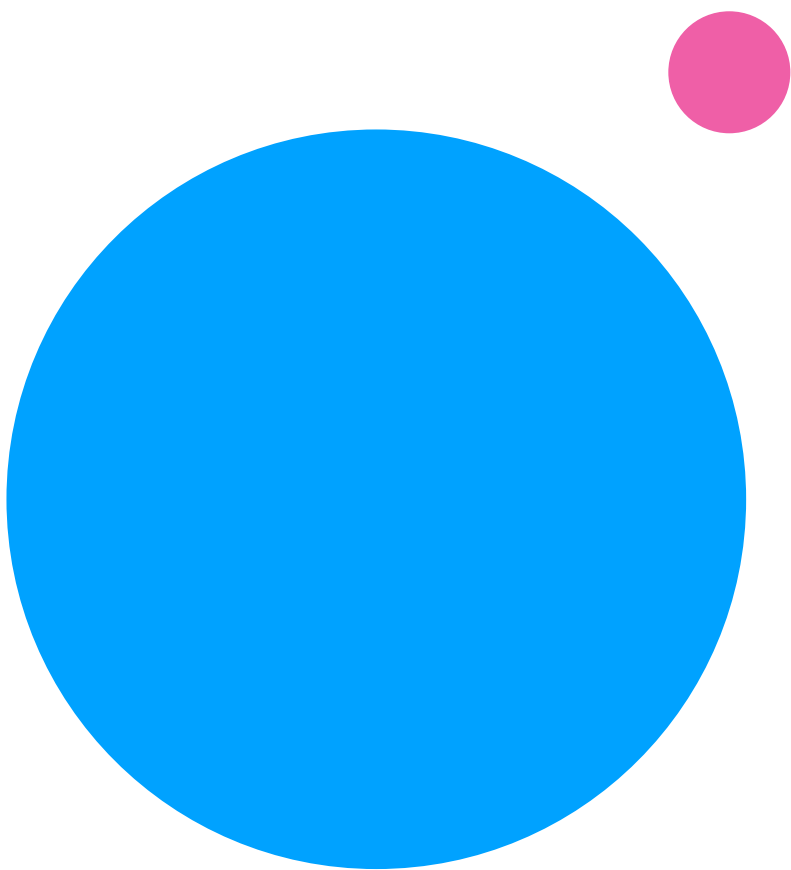
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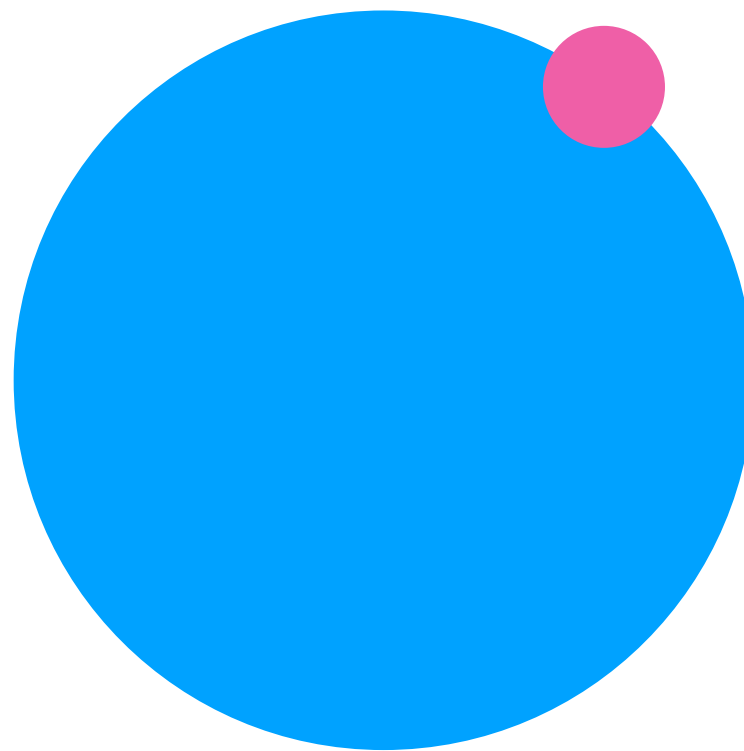
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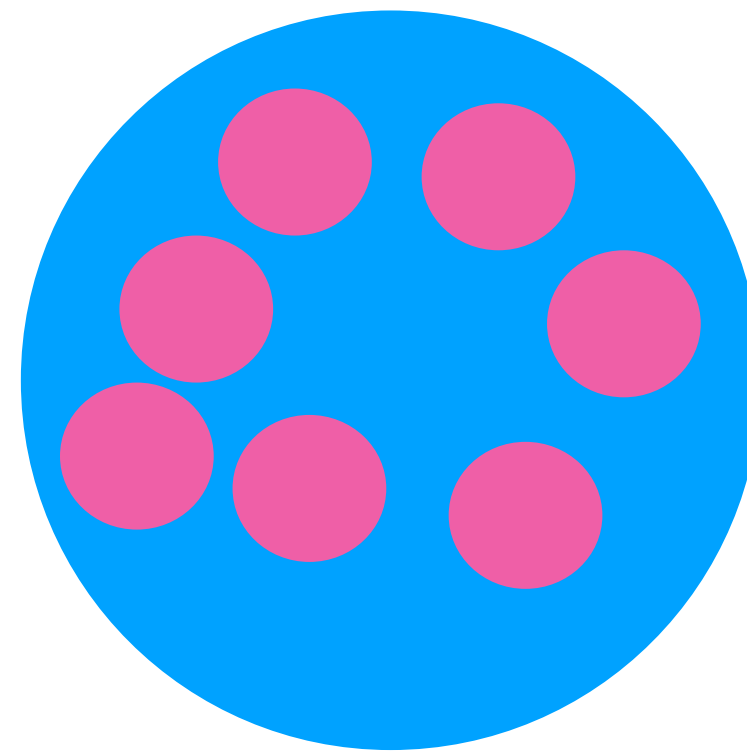
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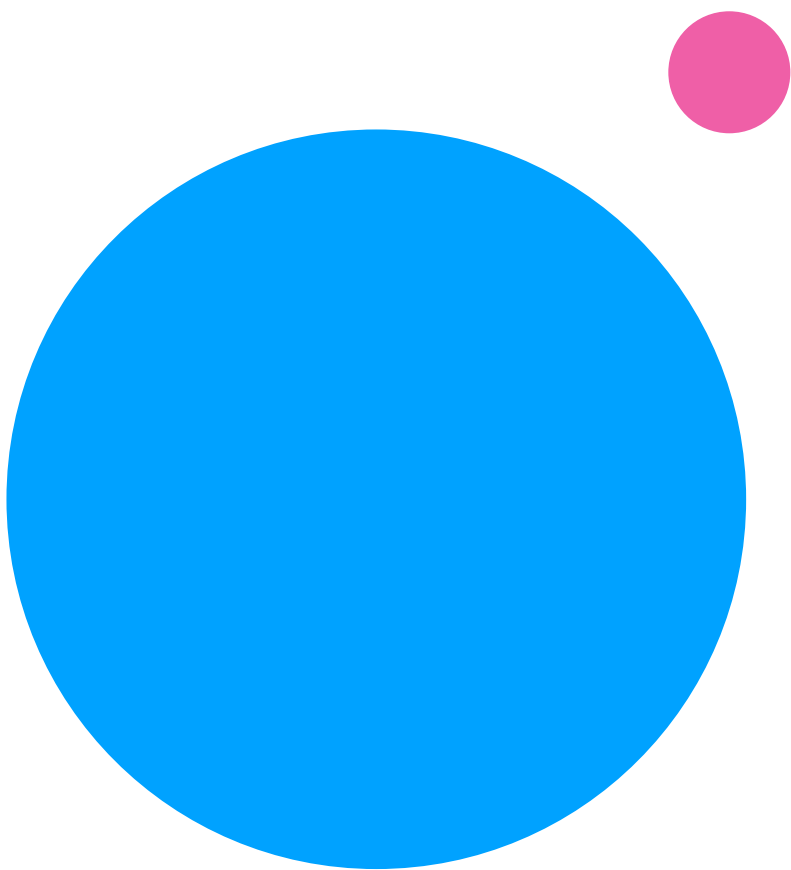
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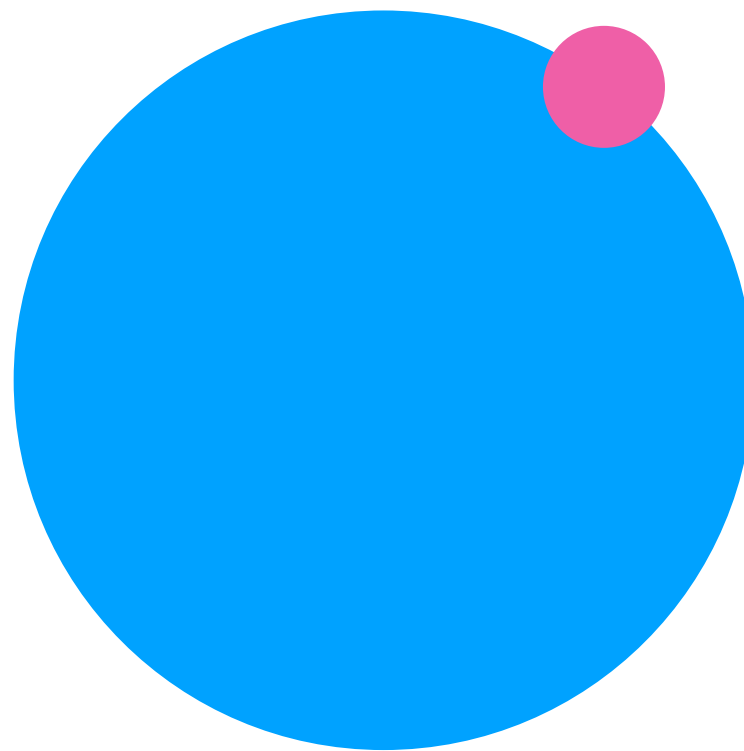
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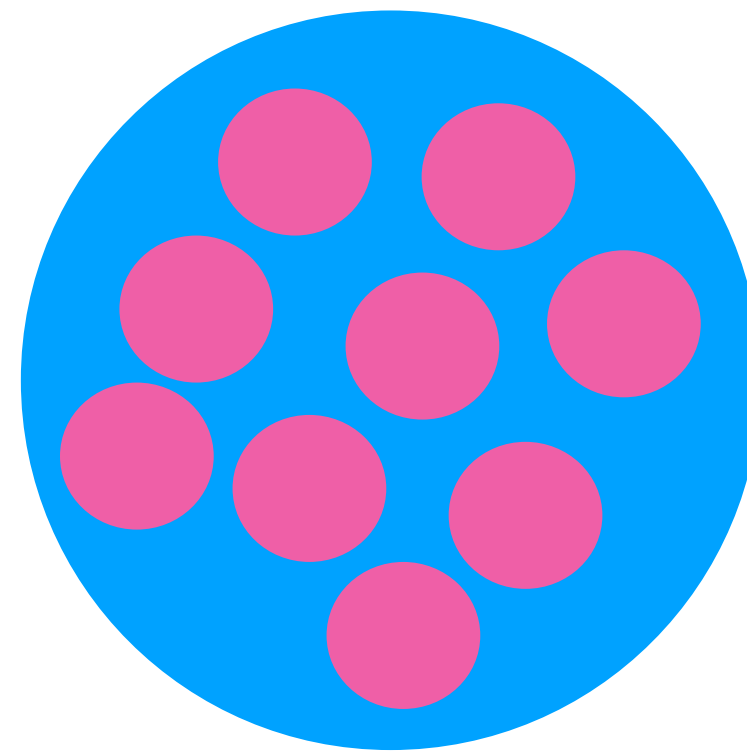
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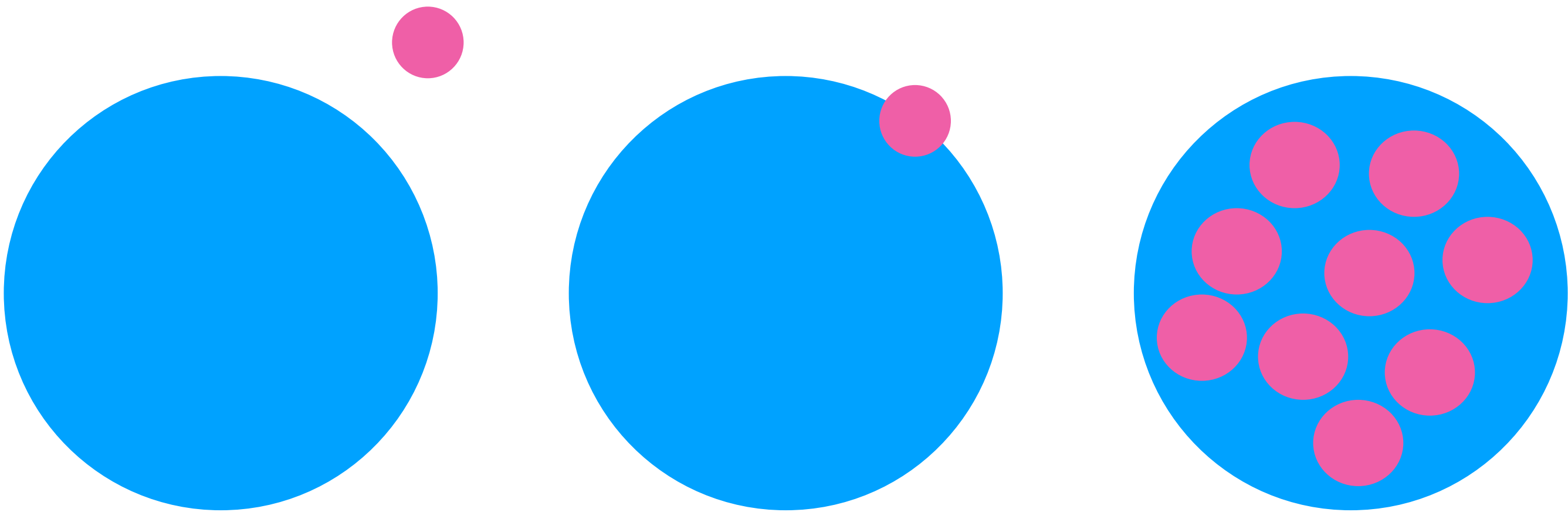
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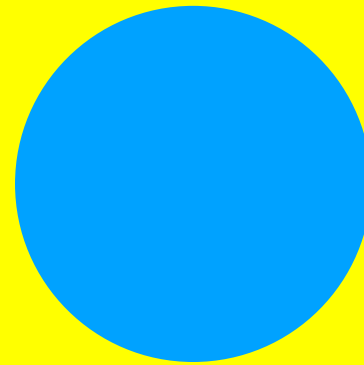
Often, but not always, the goal is to move an organization from left to right over time.

Who & where - how siloed
is your organization?

strongly
siloed

wildly
mixed

What type of organization
are you?



Micro versus Macro



Improving quality, decreasing defects with better soldering fixtures



New wound-care system in Bangladesh
(courtesy of Healyx and Stanford's Design for Extreme Affordability)



Design Thinking

Operations

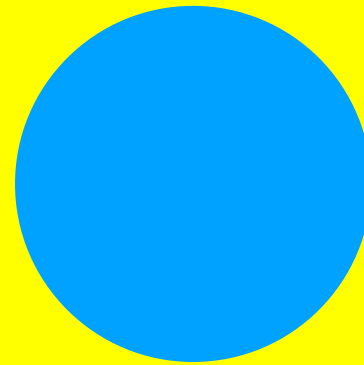
We need people who can do Lean AND innovation. Stop focusing on one or the other and find a middle path: you need to see the value of both.

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What type of organization
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Where is your
organization's innovation
efforts focused?

micro

macro

What are some of YOUR
Inhibitors

Barbara and Andy's list of Inhibitors

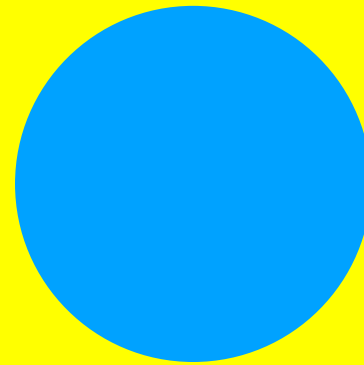
- Lack of support or leadership (or worse such as undermining and sabotage)
- Culture (e.g., we're all about price, not "new")
- Tactical thinking over strategic thinking
- Being in survival mode
- Being unclear about what's an investment and what's an expense
- Dipping your toe into innovation and thinking you know how to swim
- Too many chiefs and infighting
- Using internal staff too soon
- Insufficient training

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Where is your
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micro

macro

What are your top 3
inhibitors?

How might we make progress despite our inhibitors

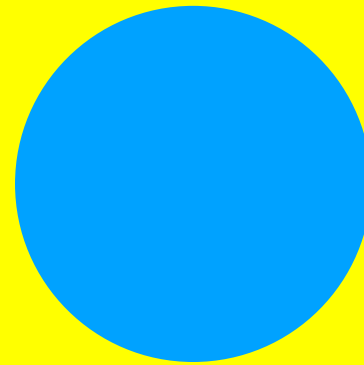
- | | | |
|---|---|--|
| ● Lack of support or leadership (or worse such as undermining and sabotage) | → | Co-design, nemawashi |
| ● Culture (e.g., we're all about price, not "new") | → | Infectious agent model (blue circle challenge) |
| ● Tactical thinking over strategic thinking | → | Establish culture around DT-Lean assessment |
| ● Being in survival mode | → | Ride it out - or is it culture? |
| ● Being unclear about what's an investment and what's an expense | → | Build awareness of innovation-operations spectrum; outsource or share innovation |
| ● Dipping your toe into innovation and thinking you know how to swim | → | Collaborate with experts and partners; get the right people on the bus |
| ● Too many chiefs and infighting | → | Leadership clarifies priorities; move innovation outside |
| ● Using internal staff too soon | → | Leverage consultants (investment vs. exp) |
| ● Insufficient training | → | Do more; co-design with experts |

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is your organization?

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What type of organization
are you?



Top 3 ways to make
progress

Where is your
organization's innovation
efforts focused?

micro

macro

What are your top 3
inhibitors?

Everyone designs who devises courses of action aimed at changing existing situations into preferred ones.

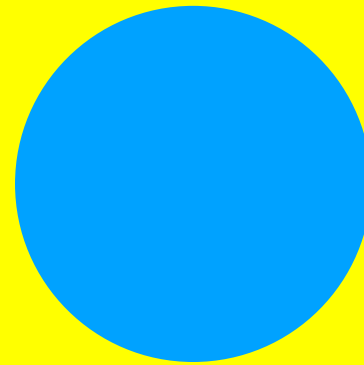
- *Herbert Simon from "The Sciences of the Artificial"*

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What type of organization
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Top 3 ways to make
progress

Where is your
organization's innovation
efforts focused?

micro

macro

What are your inhibitors?

Your headline:



HOUSING AUTHORITY
DROP BOX

mailboxes.com
1-800-MAILBOX

What can you do in an hour?

What can you do in a day?

What can you do in a week?