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Designing interventions in a complex health care setting
Enninga, Tanja

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Designing Interventions in a Complex Health Care Setting
Learnings from 2 case studies

Tanja Enninga, MSc.
tanja.enninga@hu.nl
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Research Group Co-Design

Tanja Enninga, MSc.
Research Centre Technology & Innovation,
Research Group Co-Design
www.onderzoek.hu.nl

1 September 2015, Systemic Design, Banff
Innovation Pyramid (CICC Toronto)

Global System Impact

- Commercialise
- Create a Program
- Evaluate the Project
- Implement a Pilot Project
- Understand the Issue & Create a Project

Source: [http://thecicc.com/thecicc/aboutus.html](http://thecicc.com/thecicc/aboutus.html)
In Jones (2013) *Design for Care*

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Two case studies
Innovation Pyramid (CICC Toronto)

How do patients and relatives, as well as health care professionals evaluate the intervention for implementation in their daily practice?

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In Jones (2013) *Design for Care*
First Case: POKO

Designing interventions to improve exercising and nutritional status in children with cancer (UMCG)
Nutritional intake - Exercise

Tanja Enninga, MSc.  
Research Centre Technology & Innovation,  
Research Group Co-Design  
www.onderzoek.hu.nl
Stakeholder map
Patient journey extended

Needs/Goals
Parents / Family
Hospital
Energy level

Treatment / outpatients
Maximize Performance

Maximum 90-100%
Benefit: Helps fit athletes develop speed

Hard 80-90%
Benefit: Increases maximum performance capacity for shorter sessions

Moderate 70-80%
Benefit: Improves aerobic fitness

Light 60-70%
Benefit: Improves basic endurance and fat burning

Very Light 50-60%
Benefit: Helps with recovery

Improve Fitness

Lose Weight

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Research Centre Technology & Innovation,
Research Group Co-Design
www.onderzoek.hu.nl

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Research in hospital environment

Photo Roos Tigchelaar, 2014

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Levels of energy in children with cancer

- walking about the hospital
- walking about the ward
- walking in the room
- sitting in a chair in the room
- standing next to the bed
- sitting on the edge of the bed
- sitting up in bed
- ill in bed

Adapted from Thesis Roos Tigchelaar, 2014
Student project: Race mat (prototype)
Food game: a Journey of Five from prototype to start-up
In Innovation Pyramid (CICC Toronto)

How do patients and relatives, as well as health care professionals evaluate the intervention for implementation in their daily practice?

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In Jones (2013) *Design for Care*
Two main responses…

“Wow, nice! Very interesting indeed! However, …”

“Actually not very new at all. We are already focusing on these issues.”
Second Case: Hogewey

A nursing home designed to improve quality of life for people with severe dementia
Hogewey 1992:
Residents in control
Living a normal life in a normal household
Interior according to lifestyle
For years Hogewey received the same main responses from the professional field

“Wow, nice! Very interesting indeed! However, …”

“Actually not very new at all. We are already focusing on these issues.”
The village where people have dementia - and fun

How is society to look after the ever-growing number of people with dementia? A curiously uplifting care home near Amsterdam may have the answers

Hogewey 2012: may have the answers, according to the Guardian

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Research Centre Technology & Innovation,
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www.onderzoek.hu.nl

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How do patients and relatives, as well as health care professionals evaluate the intervention for implementation in their daily practice?

What did we learn from those two cases?

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In Jones (2013) Design for Care
Different lenses

- Patients and relatives who participated in the co-design project
- Patients and relatives in similar health seeking situations
- Participants of the co-design project
- Organizational colleagues of the participants of the co-design project (various professionals, same organization and same patient group)
- Functional colleagues of the participants of the co-design project (same profession, different organization)

Patients and relatives

Professionals
POKO):
• recognise the problem framing
• enthusiastic about the idea of the interventions
• willing to cooperate in testing of prototypes

Hogewey
during development care takers were volunteering immediately to have their loved ones placed in the ‘prototype’ ward

Patients and relatives
POKO: children and their parents recognise the problem framing and designed solutions and are enthusiastic and willing to cooperate in testing of prototypes.

Hogewey: patients with severe dementia do recognise the created environment and their relatives/care takers recognise the benefits of the concept for their loved ones.

Interventions POKO (children and their parents):
- recognise the problem framing
- enthusiastic about the idea of the interventions
- willing to cooperate in testing of prototypes

Hogewey
- during development care takers were volunteering immediately to have their loved ones placed in the ‘prototype’ ward

Patients and relatives

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POKO inspired others in same hospital: some change happens besides project activities

POKO professionals (UMCG)
Enthusiastic about process participatory design
Willing to cooperate, although time is an issue

Hogewey (1992)
Process design with whole organization (n=200)
Some professionals were skeptical.
A few left the organization (concept didn’t match professional beliefs of good care); some other critics gave it a try (now the best ambassadors)
POKO:
Recognise problem
No active questions from other hospitals about the interventions

Hogewey:
Recognise problem;
Often positive about how they experience solution ‘in situ’; ask frequently about the evidence-base of the concept; some have difficulty to see the integrality of the concept

POKO inspired others in same hospital: some change happens besides project activities
POKO professionals (UMCG)
Enthusiastic about process participatory design
Willing to cooperate, although time is an issue
Hogewey (1992)
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Creating empathy and understanding needs, problems, experiences

personas relationships journey in time
Empathy and understanding needs, problems and experiences, should lead to desirable solutions…

Patients and relatives

• Recognise and acknowledge problem (re)framing

• Accept / understand/ like the idea or concept; are willing to try or use

Health care professionals:

• Recognise and acknowledge problem (re)framing

• However, acceptance of the concept and/or willingness to try differs and seems to decrease outside the project and even more outside the organization

Patients and relatives

Professionals
context

child

family system

various family systems

one health organization

GP

health care profs

health care mgt

GP

GP
context

child

family system

various family systems

health care

health care profs

health care mgt
Discussion
Innovation Pyramid (CICC Toronto)

- Understand the Issue & Create a Project
- Implement a Pilot Project
- Evaluate the Project
- Create a Program
- Commercialise

Boundary

Global System Impact

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Content and process

The intervention and the project experiences are like the destination and the journey towards


Tanja Enninga, MSc.
Research Centre Technology & Innovation,
Research Group Co-Design
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Armchair Travelling
crossing boundaries with narratives
Q & A