

Faculty of Design

²⁰²⁰ Circulating Health Information toward Health Action

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Circulating Health Information Towards Health Action: A Design Approach to Translating Clinical Guidelines for Population Impact

C-CHANGE Team Education

September 2020

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How do we help people learn to self-manage their cardiovascular risk when, where & how they need it, during and beyond the pandemic?

Background

Cardiovascular disease (CVD) is the most prevalent chronic disease in Canada, with 4 in 5 Canadians having at least one CV risk factor (Tobe et al., 2011). The Canadian Cardiovascular Harmonized National Guideline Endeavour (C-CHANGE) guidelines harmonizes over 400 recommendations from nine clinical practice guidelines to improve the prevention and treatment of CVD in primary care (Tobe et al., 2018).

Research Question

C-CHANGE clinicians engaged a team of multidisciplinary healthcare design students to formulate design proposals for knowledge translation of the guidelines. The research question explored was: *how might we help people* learn to self-manage their CV risk through knowledge translation of the C-CHANGE guidelines?

Methods

Interviews were conducted with patients and clinicians in a primary care clinic and a specialty hypertension clinic to generate insights. Clinicians (primary care and specialist) participated in two co-design sessions. An initial participatory design workshop aimed to understand and define the complex information pathways through producing journey maps of patient and clinician information seeking. A second co-design session developed proposals on opportunities for intervention in the system, aided by the use of personas, storyboards and voting exercises.

Findings

Research findings were summarized in a system map illustrating the complex processes of how people learn to self-manage their CV risk (see Figure 1). Based on interview data, four personas were created to represent different segments of the population (see Figure 2). Personas are exposed to health information from publicly accessible channels. Promoting actionable lifestyle recommendations from the C-CHANGE guidelines (i.e., diet and exercise recommendations) at multiple touch points across these channels, and tailoring how that information is designed and presented is expected to engage the broader population.

Next Steps

Early research findings support a multifaceted service design proposal that will be developed and evaluated in the context of the pandemic and beyond. Our-service blueprint (see Figure 2) illustrates components of the proposed service. We propose short bursts of lifestyle-oriented health information designed to improve population health. Providing brief messages that promote incremental lifestyle changes across multiple accessible channels is expected to help people act and maintain lifestyle changes. A public-facing website, at *circulatehealth.ca* is proposed as an interactive online repository of evidence-based health information to support the service.

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He doesn't takes his

meds regularly.

He ends his nights on the couch.



on the radio.

Opportunities for Information Exposure			
and the second se	Grocery Stores	Workplaces	
	Transit Services	Schools	Health Information from these sources may not be sought, but gets passively consumed as people interact within essential services and other environments.
management ;	Gym / Sports clubs	Podcasts	
	Social Media	Radio	
	Pharmacies	Television	
Sources for Information Seeking			
of the	Health & Lifestyle Apps	Heart + Stroke	These sources may be accessed by
ources	WebMD	Diabetes Canada	both the members of the public and providers. While there may be some
	Medline+	Pharmacists	opportunities for information exposure in these environments, the primary behaviour is health information seeking.
	Dr. Google	Physicians & Specialists	
Sources Open to Healthcare Professionals			
	Workshops	UptoDate	Healthcare providers have access to a variety of curated collections of resources and learning opportunities, including many that are not listed here. Certain sources may be accessed by patients, but for most patients, the resources are not useful without a provider to interpret the information.
lementation	Medical Rounds	Clinical Guidelines	
	Conferences	Academic Journals	
	Lectures	Online Modules	
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