Strengthening Preconception Screening & Care Using a Human-Centered Approach

Preconception CoIN Year 1 Meeting
December 11th & 12th, 2017
Presenter: Rachel Berkowitz, MPH
Overview of Sessions

• December 11th, 2017
  • Part I: Introduction to a Human-Centered Approach
  • Part II: HCD Design Sprint for Preconception Screening & Care

• December 12th, 2017
  • Part III: HCD Process for Preconception Screening & Care
Part I
Introduction to a Human-Centered Approach
What is “human-centered”? 

How might you learn about the needs, priorities, and perspectives of your clients/ patients/ neighbors/ friends?
A Human-Centered Design (HCD) Approach

• **Roots** in architecture, urban planning, and engineering

• Creation of innovative products in the commercial sector, but has also been used in the social sector

• “Iterative process” for problem-solving in which the priorities, needs, and behaviors of end-users...serve as a driving force throughout a [solution’s] conceptualization, development, and distribution”

• Often a **Design Team** guides the implementation of the approach

Source: Chapter 9—Human-Centered Design, in *Translating Life Course Theory into Practice*
Mindsets of HCD

- HCD Mindsets help to define the culture for the Design Team’s work
- Discussing and agreeing to these Mindsets is part of team formation
HCD in Action

• Briefly describe the context in which an HCD approach was applied
• **Why** you decided to use an HCD approach
• What you found useful
• What you found challenging

Image source

5 minutes
Overview of our HCD Approach
Patients struggle to manage their diabetes

Who is the "end user"?
Who are other stakeholders involved in this issue?

Develop a “How might we...?” question
How might we help patients achieve their diabetes management goals?

Source: Chapter 9—Human-Centered Design, in Translating Life Course Theory into Practice
UNDERSTANDING

- observe & inspire
- tell stories
- synthesize insights
- “How might we...?”

CHALLENGE

Source: Chapter 9—Human-Centered Design, in Translating Life Course Theory into Practice
UNDERSTANDING

- observe & inspire
- tell stories

IDEATION

- synthesize insights
- “How might we...?”
- brainstorm
- select ideas

CHALLENGE

Source: Chapter 9—Human-Centered Design, in Translating Life Course Theory into Practice
UNDERSTANDING
- observe & inspire
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IDEATION
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EXPERIMENTATION & IMPLEMENTATION
- prototype
- focus idea
- test & refine
- scale, sustain, spread

Source: Chapter 9—Human-Centered Design, in Translating Life Course Theory into Practice
Why are we applying an HCD Approach?

• To create an opportunity for thinking about “old” problems in “new” way

• To center our work around the needs, priorities, and perspectives of those who we hope will benefit and key stakeholder

Image source
BREAK FOR LUNCH
Part II
HCD Design Sprint for Preconception Screening & Care
What we’ll be doing

• **Apply the HCD Approach**: Move through Understanding, Ideation, and prototyping component of Experimentation & Implementation in your State Teams – 2 hours

• **BREAK** – 15 minutes

• **Share and Reflect**: Each State Team will share their process and result with the group
# Mindsets of HCD +

<table>
<thead>
<tr>
<th>Empathy</th>
<th>Optimism</th>
<th>Iteration</th>
<th>Creative Confidence</th>
<th>Making</th>
<th>Embracing Ambiguity</th>
<th>Learning from Failure</th>
</tr>
</thead>
</table>

Make space, take space

We are all experts

Source: IDEO.org’s *Field Guide to Human-Centered Design*
**CHALLENGE**

- **Inconsistency** with implementation, quality, and follow-up of preconception screening and care during preventive health visits
- Potential **missed opportunities** to provide targeted support and preventive care to women to support general wellbeing and to enhance preconception health

**How might we improve the quality of preconception screening and care that women experience as a part of preventive health visits?**

- **End-user:** women at preventive health visits
- **Stakeholders:** clinic care providers and staff, woman’s family and social network, community resource providers, insurance providers
Brainstorming

• Use the following prompting questions to begin a conversation about women’s and stakeholders’ perspectives and priorities related to our challenge question

• Capture the diverse perspectives on your Flip Chart paper (including conflicting perspectives)

• **Time:** 15 minutes
How might we improve the quality of preconception screening and care that women experience as a part of preventive health visits?

• Who (among women) come to preventive health visits? Why do women come to preventive health visits?

• What is the preventive health visit like for women? How do women feel about the results of preventive health visits?

• What constitutes preconception screening and care? How do women define “quality” preconception screening and care? How do other stakeholder groups define ”quality”?

• What sort of preconception screening and care do women experience? What are those experience like for women?

• How do other stakeholder groups feel about preconception screening and care as part of preventive health visits?

• Other information to help understand the context and experiences relevant to our How Might We question...
Identifying Insights & Refining How Might We question

• Identify insights from your brainstorming session
  • What surprised you?
  • What connections do you see between different pieces of information that were shared?

• Talk through these insights in your group to identify the underlying issues behind the challenge of importance to women

• Consider reframing the How Might We question to reflect addressing the underlying issues (write down your final question)

  How might we improve the quality of preconception screening and care that women experience as a part of preventive health visits?

• Time: 15 minutes
Idea generation

• Brainstorm as many ideas as possible to answer your **How Might We question**, drawing from the **insights** you identified during the understanding phase, with NO self-editing or self-limiting (**ground rules**)

• Write each individual idea on a sticky note, large enough for people to read, and post them on the Flip Chart paper (at least 25 ideas each)

• **Time:** 10 minutes
<table>
<thead>
<tr>
<th>Groundrules for Ideation Part 1</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Go fast</td>
<td>Going fast builds momentum and energy. It also reduces the tendency to hesitate and internally censor or criticize ideas.</td>
</tr>
<tr>
<td>Defer judgement</td>
<td>Do not criticize or evaluate ideas as it will inhibit idea generation. You will be able to evaluate, select, and refine ideas in the next phase.</td>
</tr>
<tr>
<td>Quantity</td>
<td>The more obvious ideas tend to be generated first. Generating many ideas encourages us to reach beyond familiar ideas to be more creative.</td>
</tr>
<tr>
<td>Be wild and radical</td>
<td>Wild and radical ideas may be inspirations for revolutionary ideas and breakthroughs.</td>
</tr>
<tr>
<td>Build on ideas</td>
<td>Be inspired by the ideas of your team to create additional ideas.</td>
</tr>
<tr>
<td>Stay focused</td>
<td>Return to your “How might we…” question to stay on task.</td>
</tr>
<tr>
<td>One at a time</td>
<td>Allow each team member to fully share their idea.</td>
</tr>
<tr>
<td>Be visual</td>
<td>A picture is worth a thousand words. A quick sketch can bring your idea to life.</td>
</tr>
</tbody>
</table>

Source: Based on IDEO.org’s *Field Guide to Human-Centered Design*
Ideation – 2/3

Sorting

• Review and sort your sticky notes, grouping similar ideas together (okay to have some ideas on their own)

• **Time:** 10 minutes
Prioritizing ideas – 2x2 matrix

- Organize your sorted ideas in a 2x2 matrix based on your team’s priorities (example axes provided on the next slide)

- As a team, decide on 2-3 ideas for prototyping, based on our team’s priorities
  - Consider using dot-voting – each team member has 3 “dots” to identify their top 3 ideas (can put all one one idea, or spread them out), and identify the ideas with the most dots

- **Time:** 10 minutes
Addressed high priority issue to women

Easy to implement

Hard to implement

Addressed low priority issue to women

Preconception Health Care Initiative
Developing the prototype

- Divide your team into groups to develop prototypes for each of your 2-3 ideas, however you imagine that (skit, story board, tool)
  - Use the resources at your table (paper, markers, tape, scissors, etc)

- **Time:** 10 minutes
Share your prototypes with your team and identify the “best” idea

• Each group present your prototype to the rest of your team
  • **Time:** 5 minutes each

• Discuss each group’s prototype after presentation
  • **Time:** 5 minutes each

• As a team, decide which prototype you would want to move into more advanced experimentation
  • **Time:** 5 minutes

• **Time (total):** 35 minutes
15-MINUTE BREAK
Share your team’s experience and results

• What are some key insights you identified?

• What is your HMW question?

• Share the prototype of the idea you “selected” (if you got to this point).

• How was this experience for your team?
  • What did you like?
  • What was challenging?

• **Q&A:** Any thoughts/questions from the broader group for the team?

• **Time:** 3 minutes per presentation, 1 minutes for Q&A (24 min total)
Thank you!

Tomorrow: How do we bring in the HCD approach in our work moving forward?
Part III
HCD Process for Preconception Screening & Care
Considering the HCD Approach for your Work Moving Forward

- **Yesterday**, each team went through the HCD approach in response to an initial How Might We question/challenge

  How might we improve the quality of preconception screening and care that women experience as a part of preventive health visits?

- **Today**, each team will have the chance to discuss their experience with the HCD approach and identify how it may be useful for addressing preconception screening and care challenges in their clinical and community settings (**Time:** 30 minutes)

- **Each team** will share out their initial ideas and areas for additional support (**Time:** 5 minutes per presentation, 2.5 minutes Q&A)
The prototyped idea

• What do we think of our prototype from yesterday? Is this something we would want to develop further? Why or why not?
• Whose voices were missing from our table to inform our HCD approach? How could we engage them in further development of our prototype?

Use of HCD approach

• How might we use the HCD approach to further our work around preconception screening and care in our setting?
• What about applying the HCD approach might be challenging in our setting? What might be helpful?
• What kind of support would we need to apply an HCD approach in our setting?
Share your reflection

- The prototyped idea
- Use of the HCD approach

**Q&A:** Any thoughts/questions from the broader group for the team?

**Time:** 5 minutes per presentation, 2.5 minutes Q&A, 30 minutes total
Thank you!

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