Inclusive Design in Healthcare: From Front Line Need to Commercial Reality

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Who we are

Inclusive Design methods

Case studies of Inclusive Design impact on the front line

Methods for application - conclusions

Who we are (and what we do)

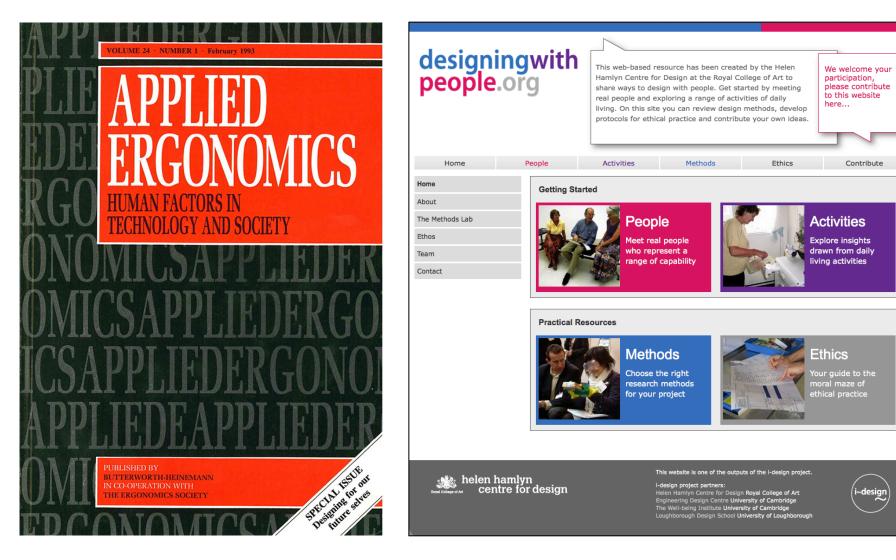
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25-year History



Business Driven



Community Facing



Public Facing



INNOVATING WITH PEOPLE THE BUSINESS OF INCLUSIVE DESIGN

Innovating with People

🜒 Listen

Are you searching for new competitive advantages? Is your company operating in a market undergoing change?

Turn the challenges connected to the rapidly changing contexts of demographics and environment into new opportunities to innovate, make profit and increase market shares. Click to enable Adobe Flash Player

A video about Inclusive design.

View video transcript

Engage with Inclusive Design strategy!

Inclusive Design is being written into legislation. Products and services will

now have to meet these new criterias. This book shows how you can turn these challenge into opportunities for profitable innovation.

Adopt an Inclusive Design strategy and you will come closer to your customers by understanding their needs. Inclusive Design is also used here to describe Universal Design and Design for All.

Buy this practical step-by-step guide that explains how to involve people in your design process.

Read more about what's in the book >

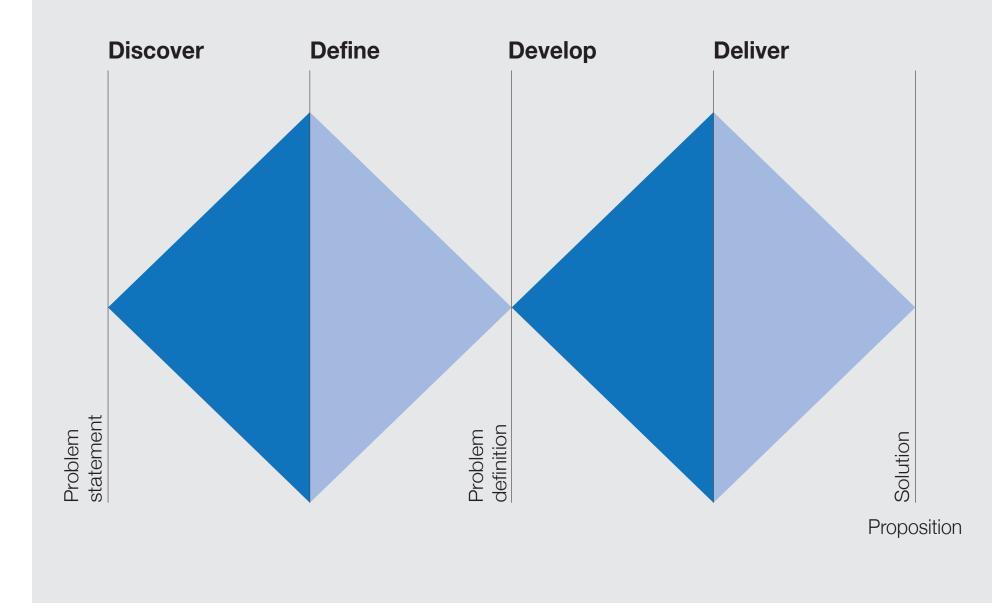


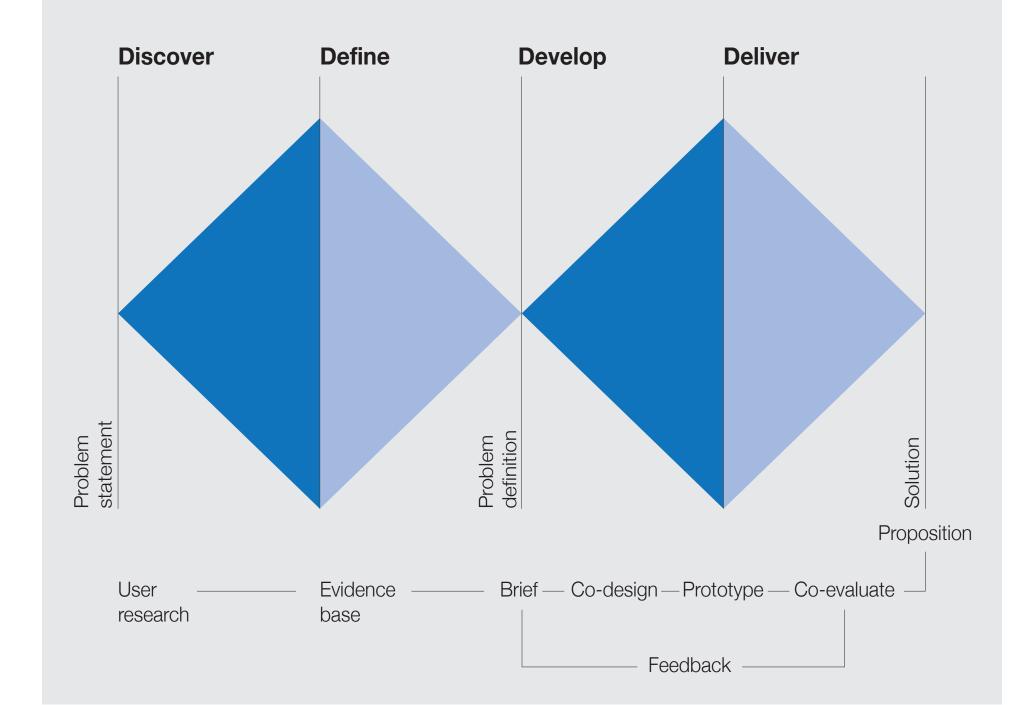
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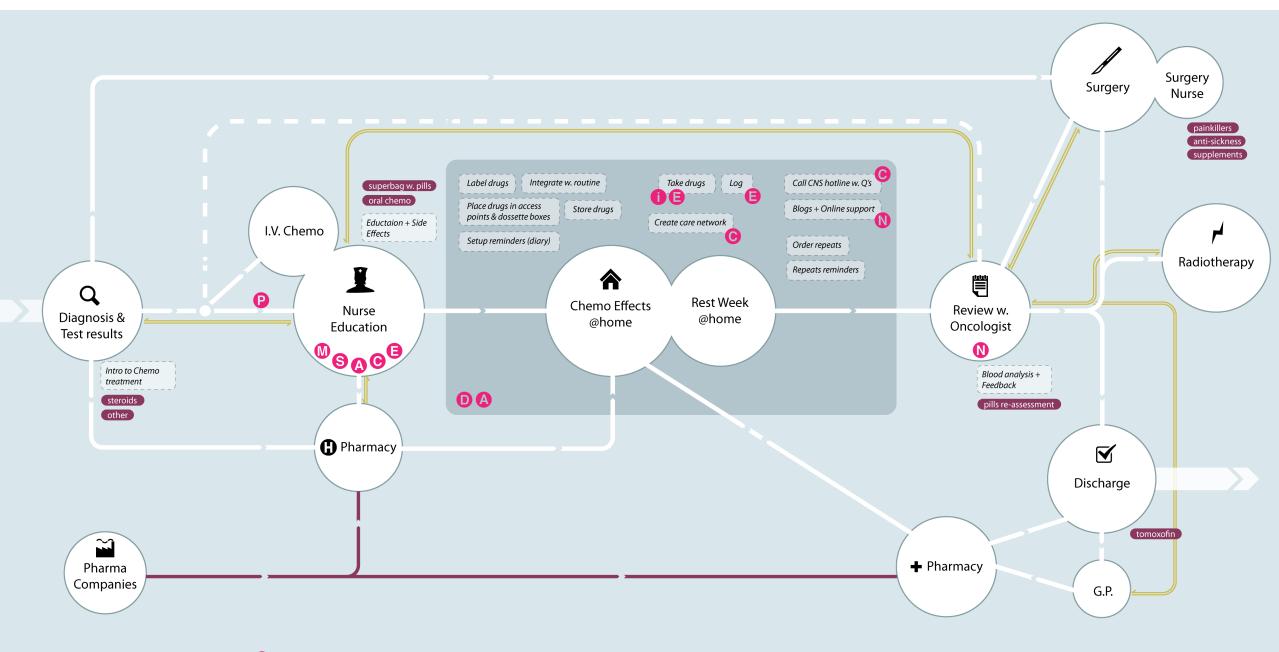
Case Studies of Inclusive Design impact on the front line

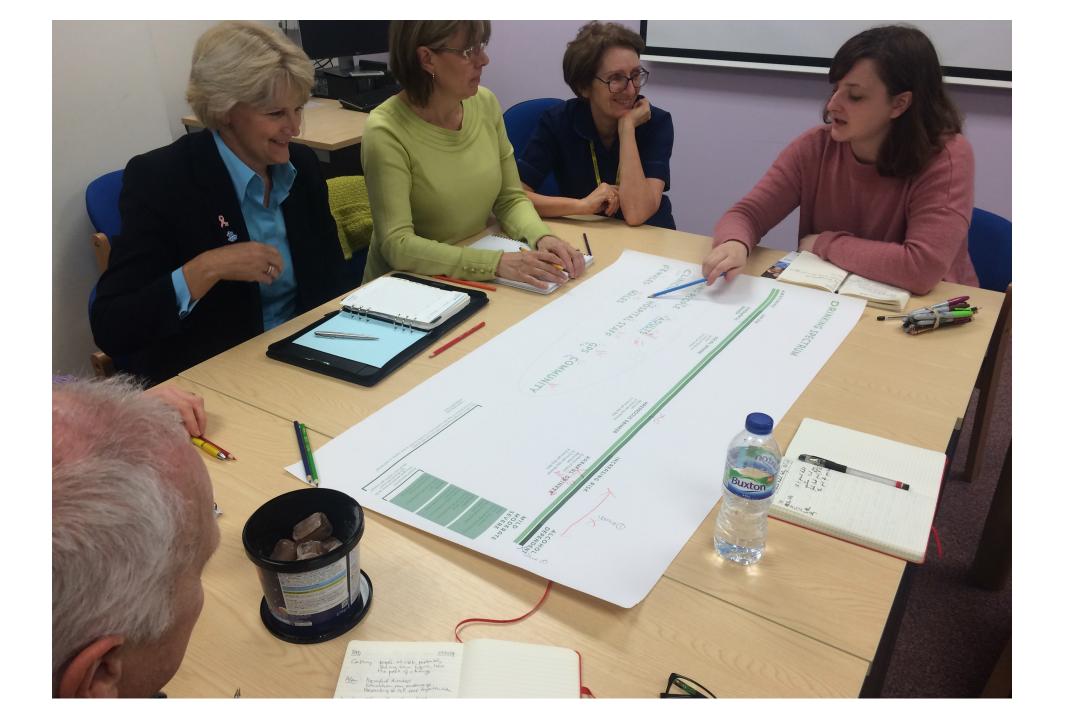
Methods for application - conclusions



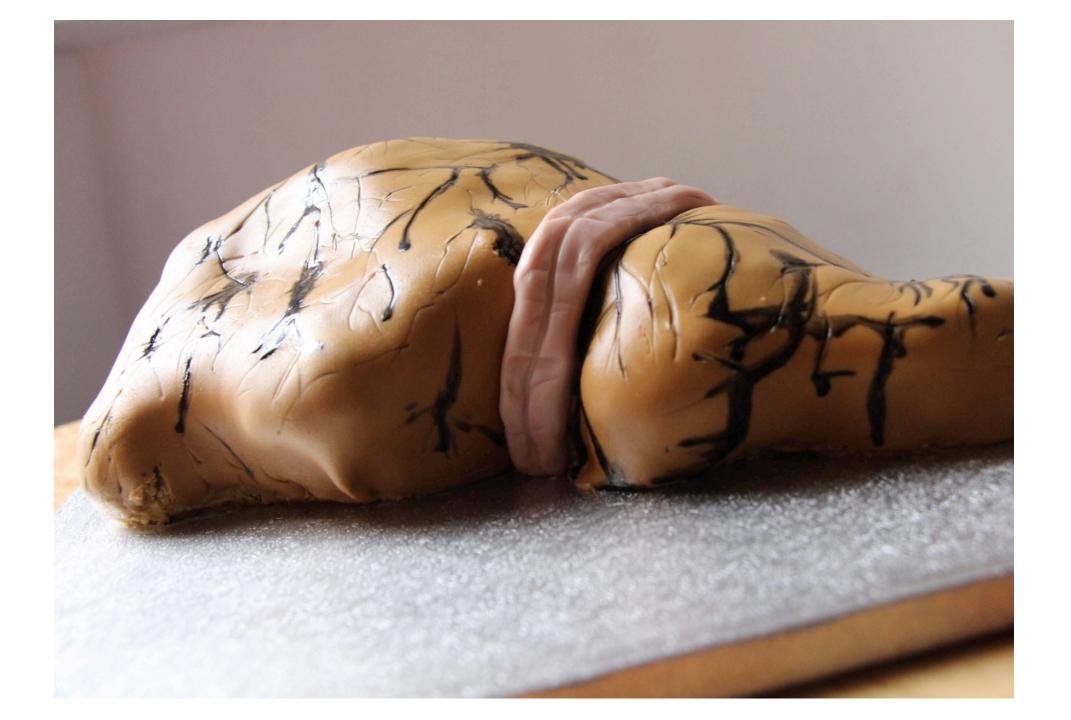


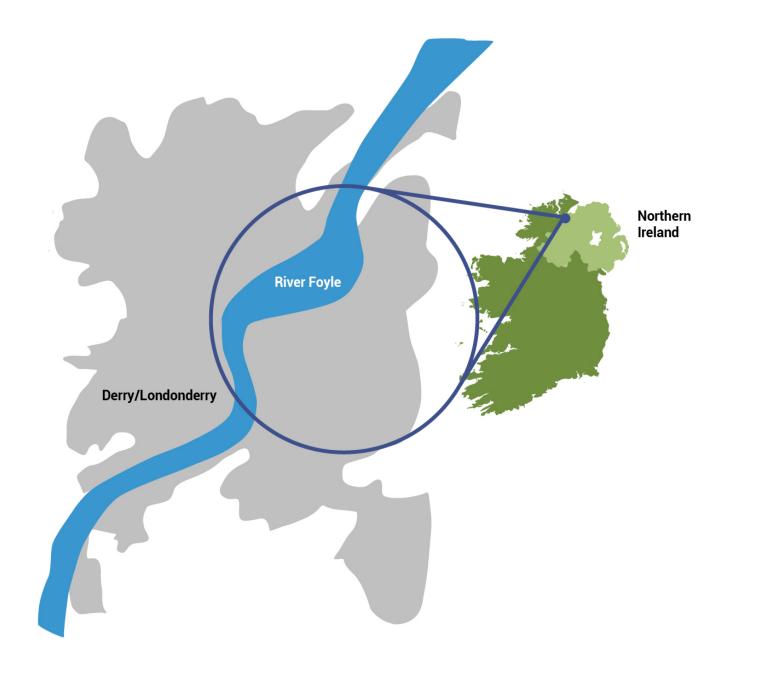
Stakeholder analysis - front line, economic, regulatory, commercial









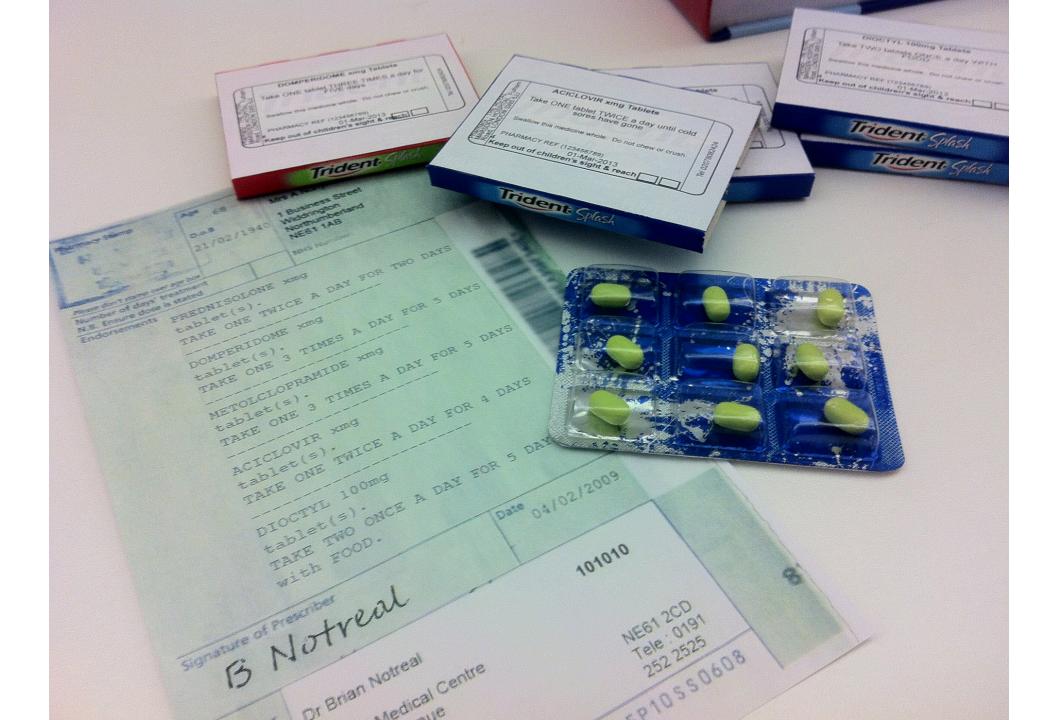












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Violence & Aggression in A&E

clinical care

mount

30

SRO/Andy Smith 2011

patient needs



You will find information points throughout the A&E Department. You will find informat happens in each area of the department. These explain what happens in each area of the department.

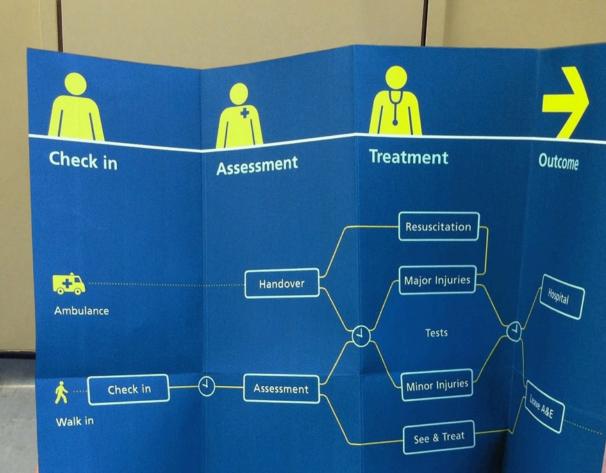
This map shows the 4 different stages of your progress through the A&E Department: Check-in, Assessment, Treatment and Outcome, You can expect some waiting time between each stage. You can expect some to keep track of your progress. Please use this map to keep track of your progress.

Waiting times vary acco We aim to treat everyor that we treat people Thank you for waiting in You will find some this leaflet. Please ten

Ty or illness.

^{be} aware

rour journey through A&E



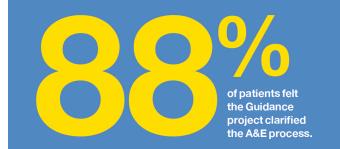






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of patients said the improved signage reduced their frustration during waiting times.

Description of the second seco



For every £1 spent on the design solutions, £3 was generated in benefits.



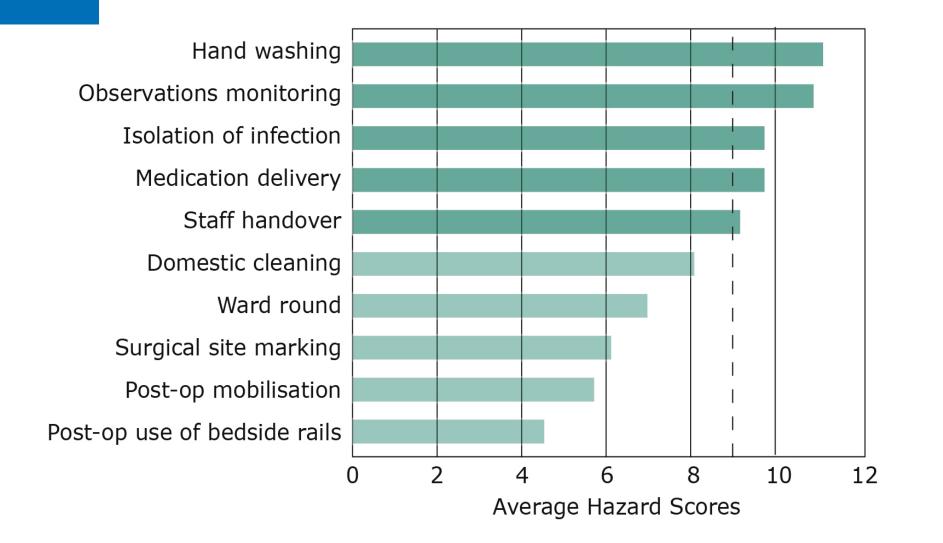
Patients' complaints relating to information and communication fell dramatically post-implementation.

All data from ESRO surveys 2012-13; Frontier Economics analysis

DOME

Designing Out Medical Error

HAZARD SCORES







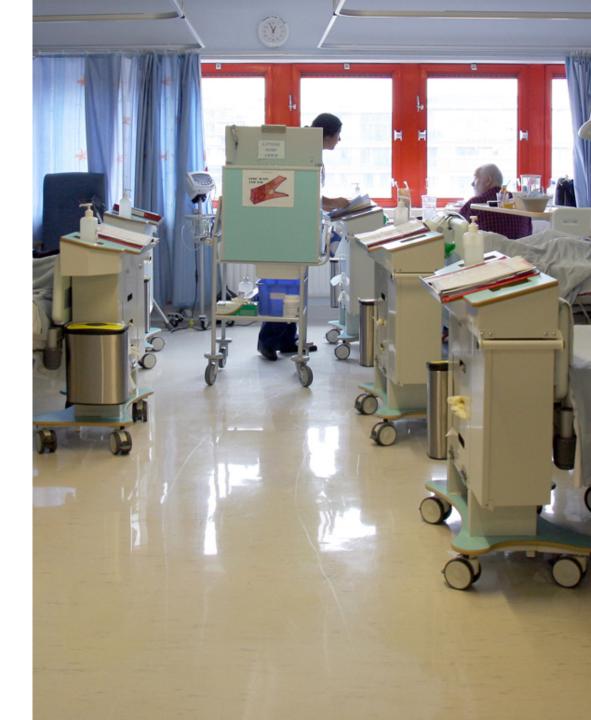
Clinical trial

Hand hygiene compliance increase X3

Correct use of gloves increase X3

Correct use of aprons was 67% with the CareCentre and 0% without

CareCentre implementation will help reduce healthcare associated infections.







FiomarkTM THE DRIP REDESIGNED





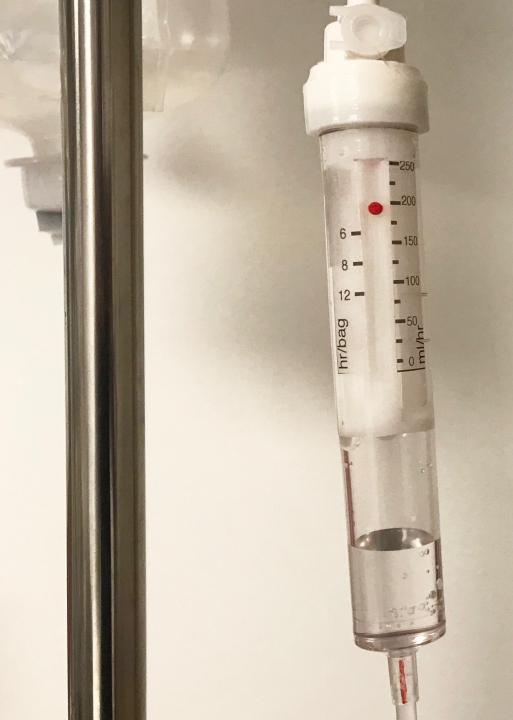
Approximately wastage of US\$ 3.98 per patient per 24-hours infused.¹

Staff time wasted on calculations & inefficiencies

Extended patient stay

1. http://www.varori.co.za/infusion_problem.htm

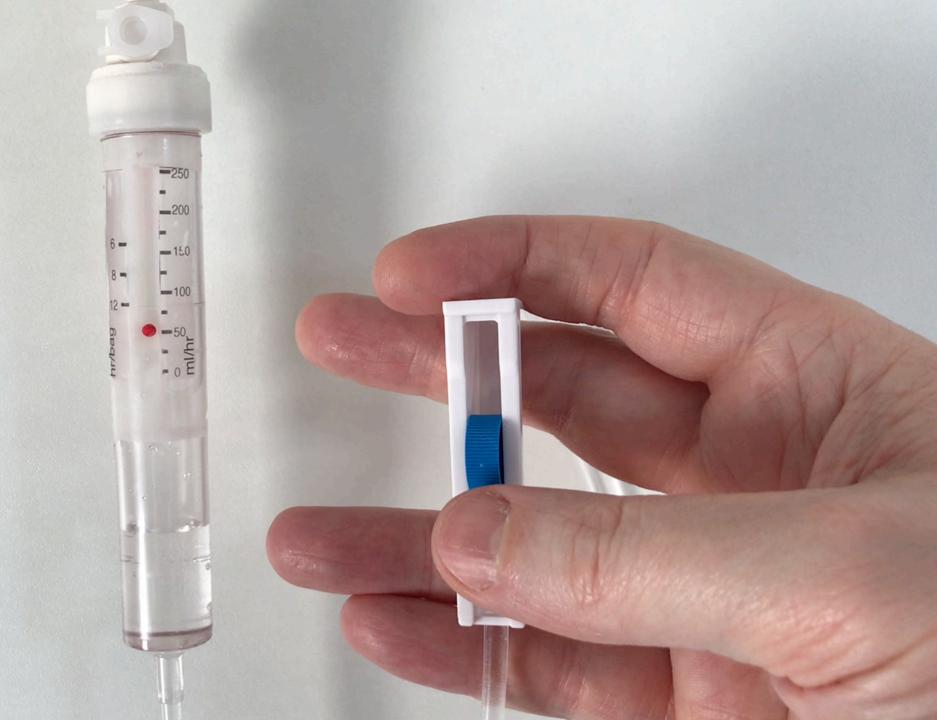


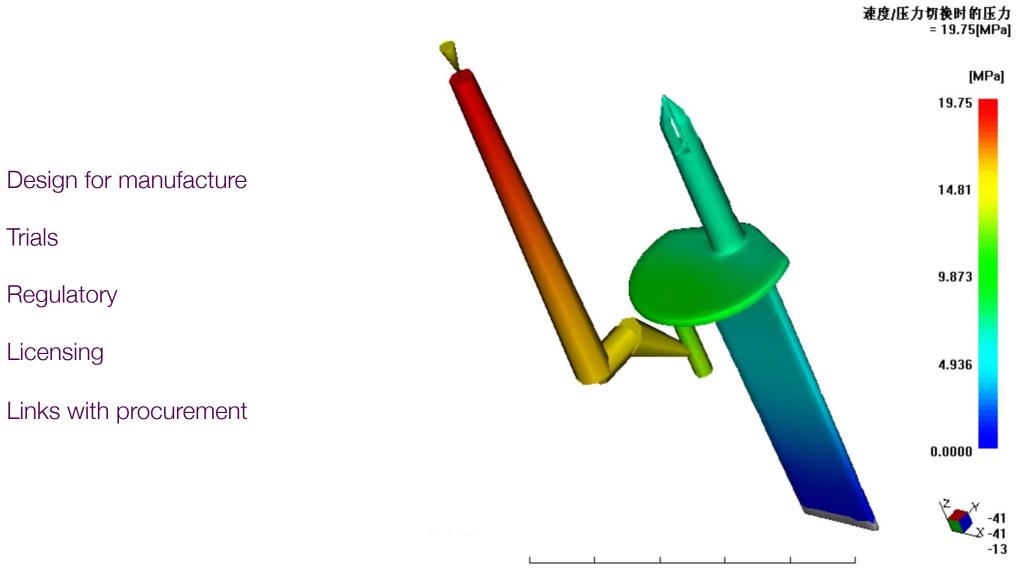


PROPOSITION

IV giving set that easily, intuitively and reliably shows flow rate.







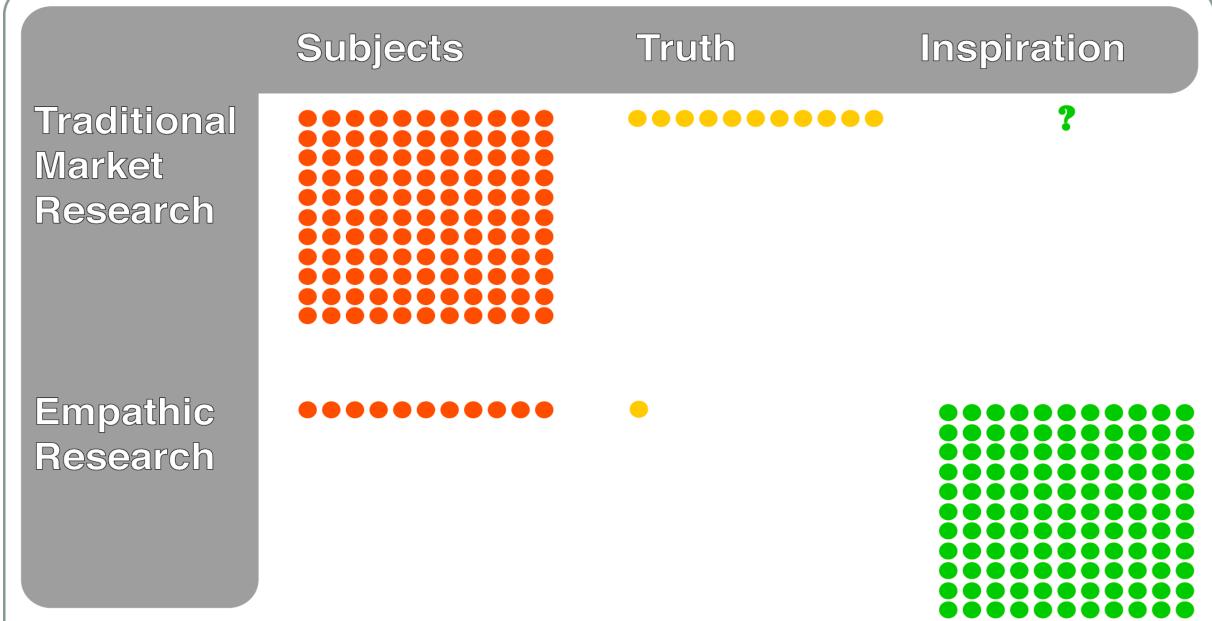
缩放 (50 mm)

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Derived from presentaton by Martin Bontoft (IDEO)

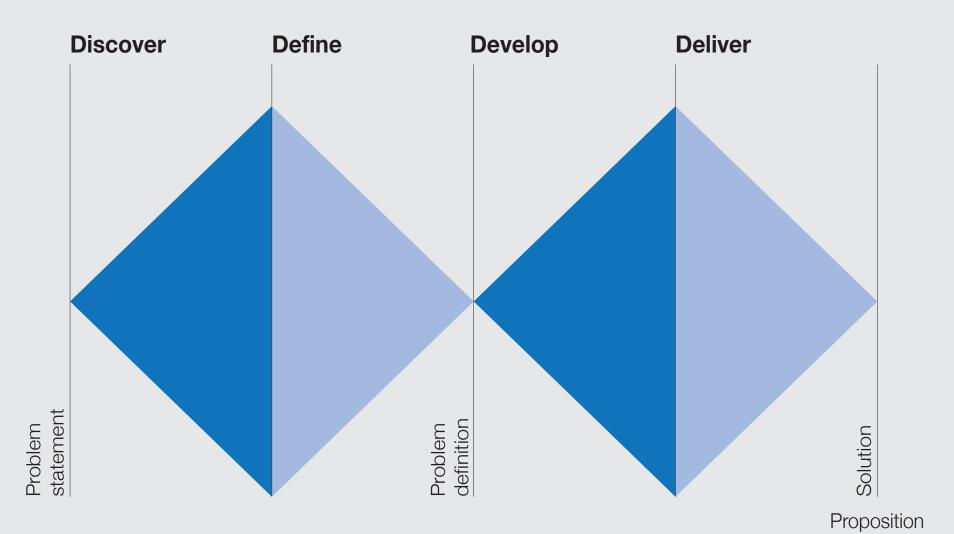
Conclusions

Double diamond approach

Map out stakeholders

Bespoke research tools

Demonstrate economic and clinical value



Thank you



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