

REMDi

The



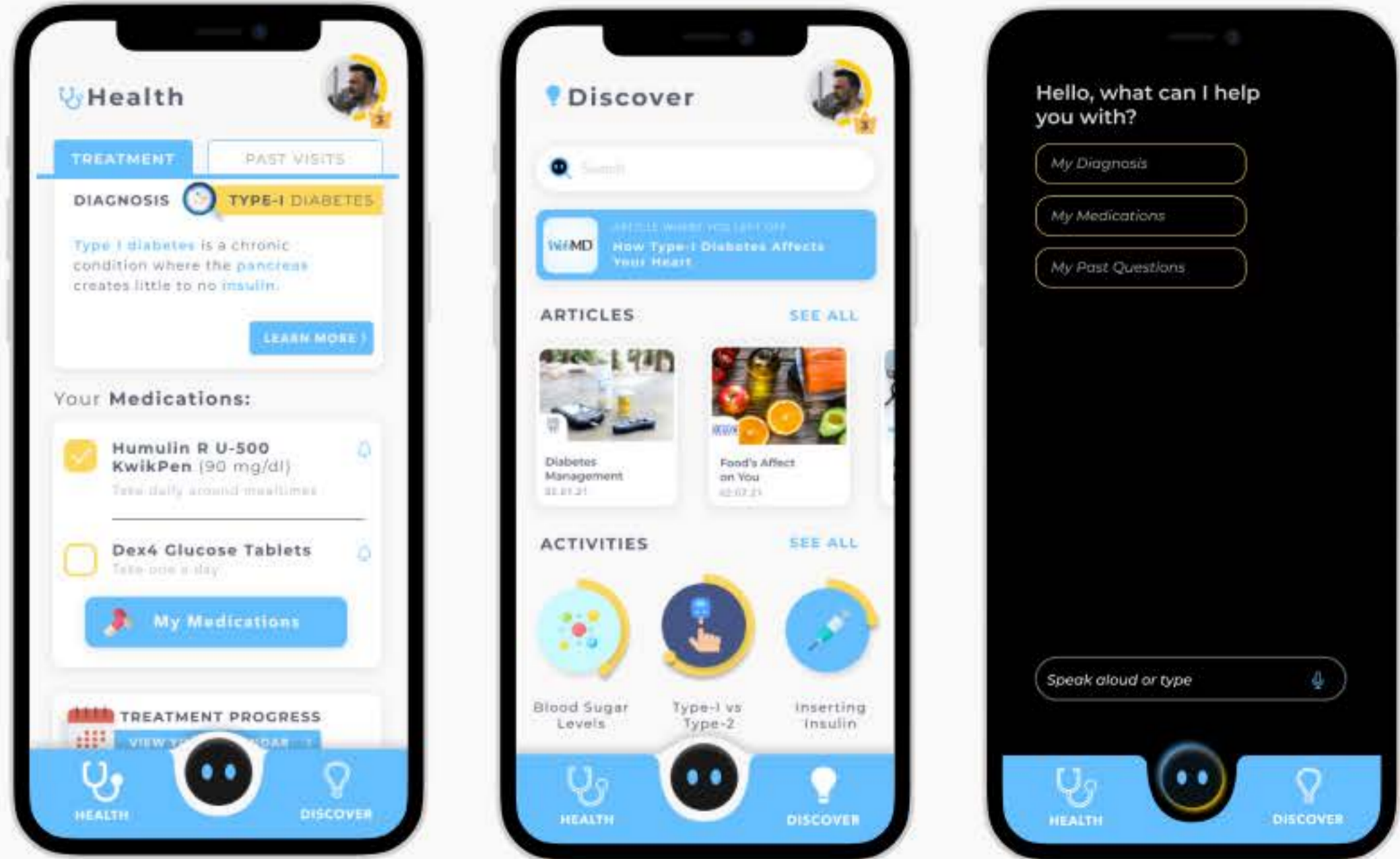
Medical Network

The **MO** Medical Network  
Educating. Understanding. Healing.



### Problem

One third of Americans have low health literacy and face difficulties understanding their doctor, struggling to read medication labels, or misunderstanding discharge instructions leading to a rise in preventable deaths and emergency room visits.



### Solution

MO is an AI healthcare companion that educates patients about their health through catered explanations and learning material, comforts and entertains patients during their hospital stay, and helps patients keep track of their treatment plan and medications at home.



## BRIEF

Solve a meaningful problem in the world with design to disruptively improve human life using the most innovative, useful, and meaningful technologies.

## REQUIREMENTS

In the first of two senior design studios, students produce innovative user experience solutions to real design problems and generate working prototypes. Following state-of-the-art processes and design methodologies, students identify valuable opportunities and conduct thorough research that informs the ideation stage. Students envision and document a range of potential solutions for refinement in the next studio.

## DELIVERABLES

1. Prototype Product
2. Companion App
3. Vision Video
4. Lookbook
5. Poster
6. Processbook
7. Prototype Software
8. Executive Summary
9. Product Website



MEET THE  
**team**



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# The Problem At Hand

Low health literacy affects over a third of adult patients in the US and can lead to higher mortality rates, longer-lasting health issues, and increased medical costs. They are also 3x more likely to have emergency room visits.



# Target Users

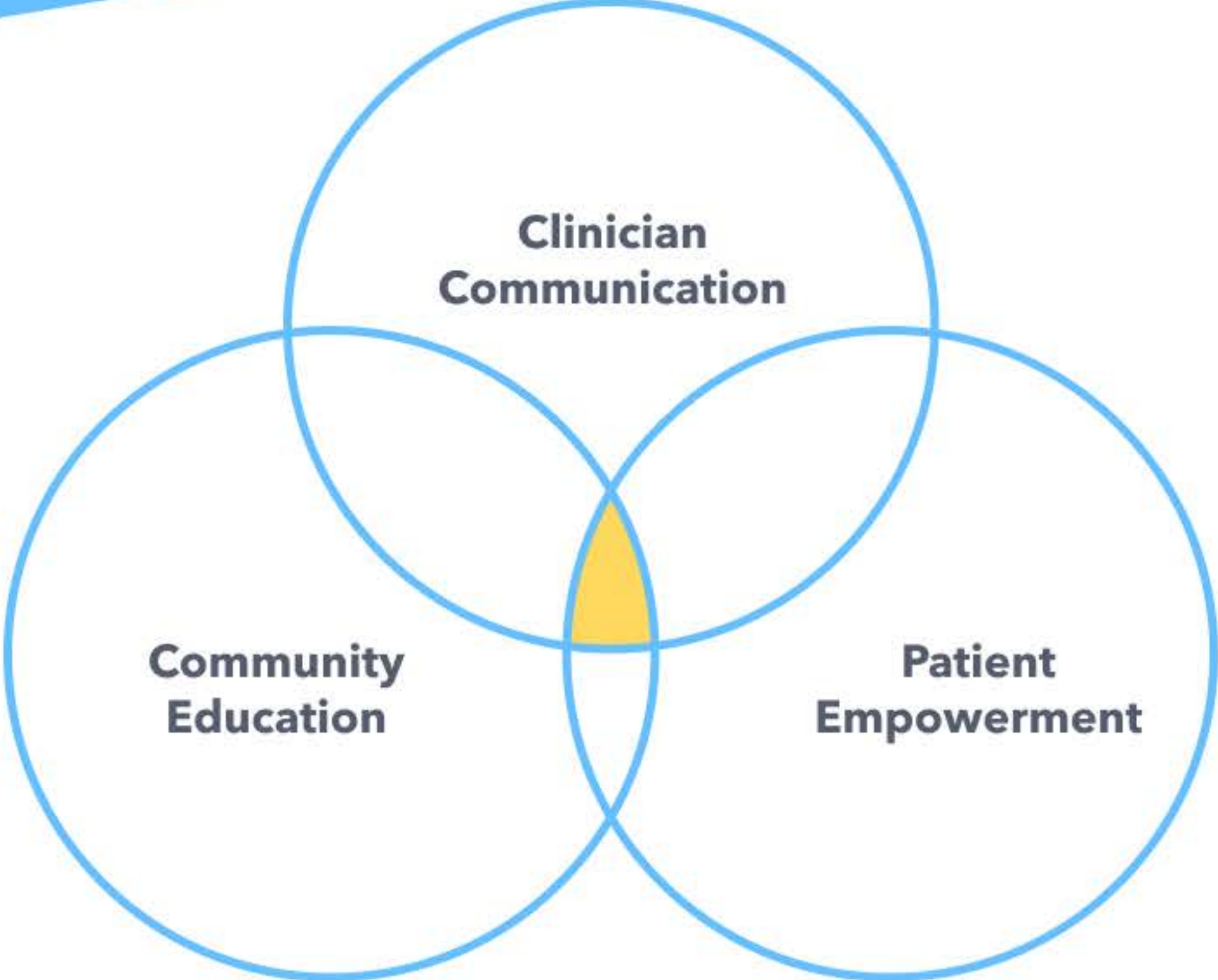
- **US Adults (+18)**  
and/or
- **Of minority groups**  
and/or
- **On Medicaid, Medicare, or uninsured**  
and/or
- **Have a basic or below basic health literacy**





# Design Goal

Create a solution that falls in the center space of clinician **communication, patient empowerment**, and **community** education through the outreach of various target users.





# Expected Outcome

Reducing healthcare costs, risks, and concerns by fostering better communication and understanding between patient and clinician and increasing health literacy both at home and the clinic.





Discover

**Research**

Look into issues with literacy in the US

Define

**Insights**

Scope down to health literacy

Develop

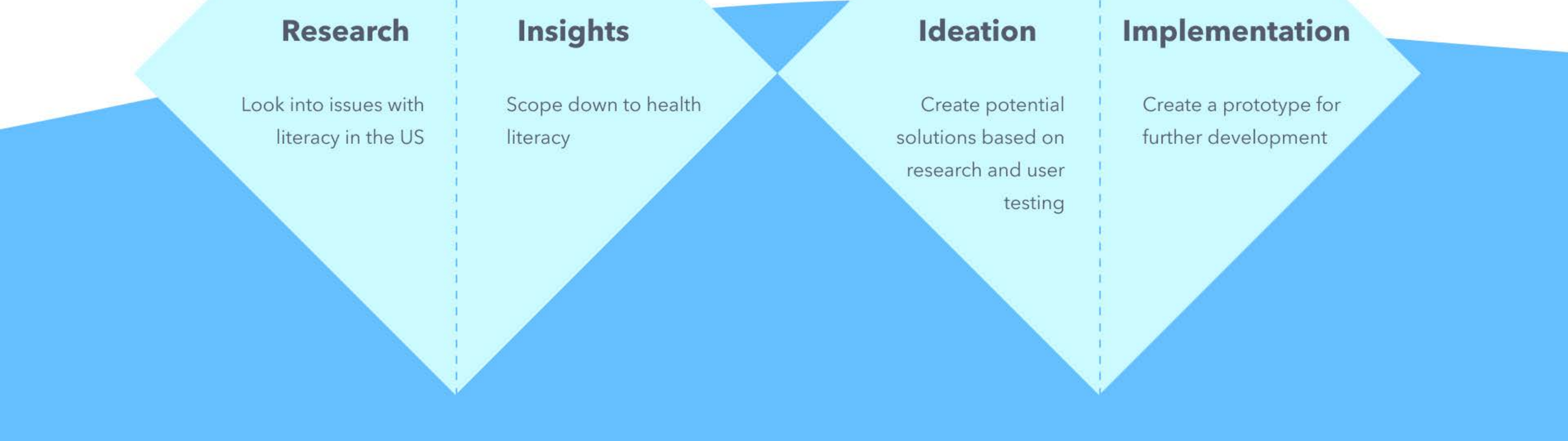
**Ideation**

Create potential solutions based on research and user testing

Deliver

**Implementation**

Create a prototype for further development





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THE  
**Research**

Secondary Research

Competitive Analysis

Primary Research

Affinitization

Persona Building



# What Is **Health Literacy**?

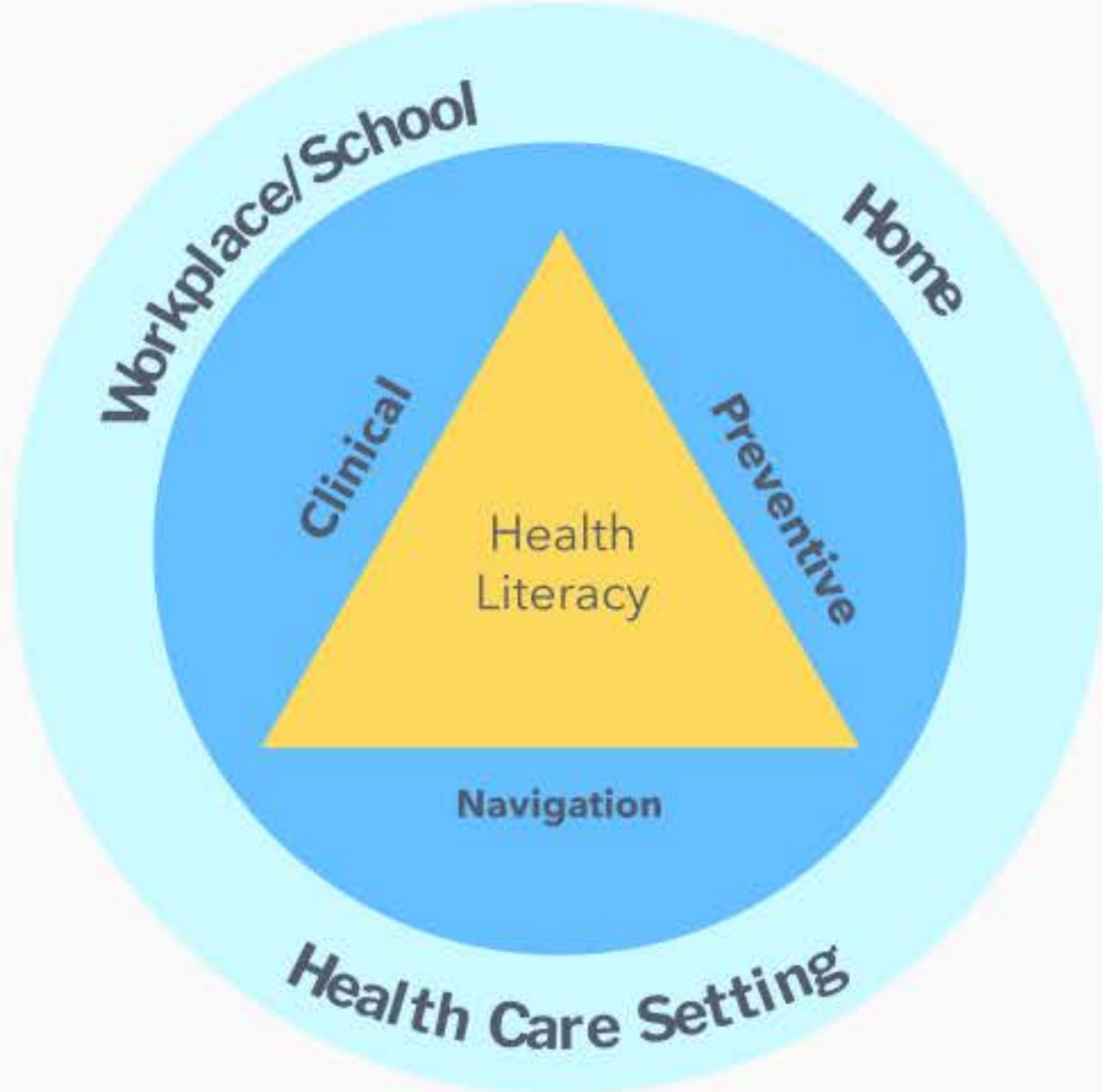
Personal Health Literacy is the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

## Put Simply...

Health literacy is the ability to understand and use healthcare information in order to make decisions and follow instructions for treatment.

# How **Health Literacy** Is Measured?

The CDC uses the National Assessment of Adult Literacy (NAAL) which has its own section for measuring health literacy.



<https://www.cdc.gov/healthliteracy/researchevaluate/measure-peoples-skills-experiences.html#:~:text=Sp%20onsored%20by%20the%20National%20Center,health%2Drelated%20materials%20and%20forms.>



# Health Literacy Ranking

Illiterate

**Level 1**

Third grade and below; will not be able to read most low-literacy materials; will need repeated oral instructions, materials composed primarily of illustrations, or audio or video tapes. Can locate simple pieces of information.

Basic

**Level 3**

Seventh to eighth grade; will struggle with most patient education materials; will not be offended by low-literacy materials. Can integrate information from relatively long or dense texts.

Proficient

**Level 5**

Medical Training; will be able to read and retell medical journals. Can demonstrate proficiencies associated with long and complex documents and text passages.

Below Basic

**Level 2**

Fourth to sixth grade; will need low-literacy materials, may not be able to read prescription labels. Can generally be able to locate information in text and make low-level inferences using printed materials.

Intermediate

**Level 4**

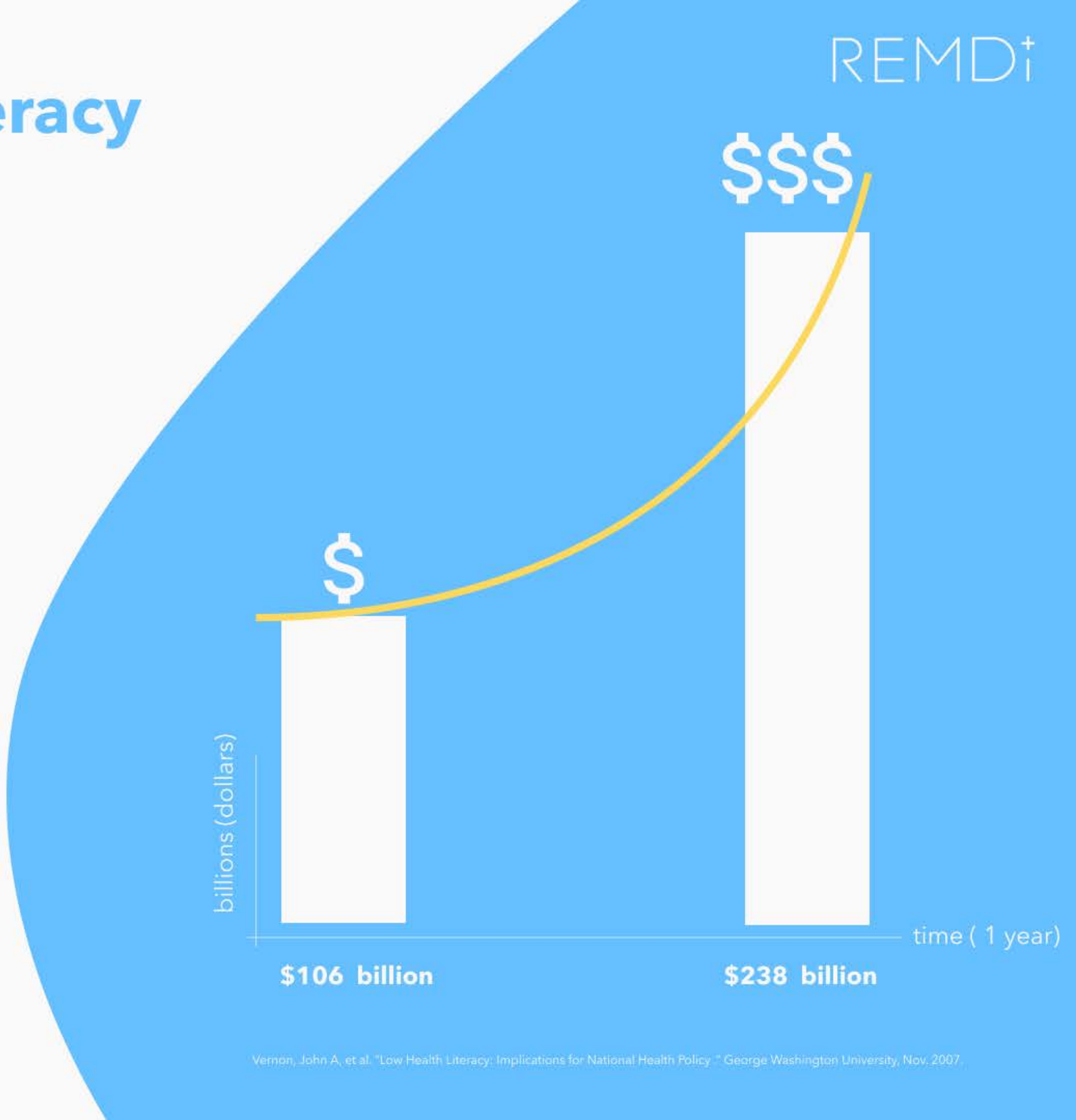
High school; will be able to read most patient education materials. Can demonstrate proficiencies associated with long and complex documents and text passages.



# Comparison Of Health Literacy

1/3rd of Americans have basic to below basic health literacy. Those with basic or below health literacy have a difficult time understanding basic health concepts and applying them to themselves. Compared to those with intermediate health literacy, adults with below basic health literacy will face a higher mortality rate, a 3x more likely to experience a poor health outcome, and are 3x more likely to return to the ER.

Most people with low health literacy come from minority groups and are uninsured or are on government healthcare plans such as Medicaid and Medicare. Due to their increased chance of going to the emergency room, both from not having a primary healthcare provider and not fully understanding healthcare instructions, leading to misuse of treatment and possible overdose, the annual cost of healthcare ends up rising, ranging from \$106 billion to \$238 billion.



U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (2010). National Action Plan to Improve Health Literacy. Washington, DC: Author.

Vernon, John A, et al. "Low Health Literacy: Implications for National Health Policy." George Washington University, Nov. 2007.



# Research Goals & Methods



## Goals

- Understand the patient's journey
- Understand clinician's journey
- Understand current in-clinic methods to aid health literacy



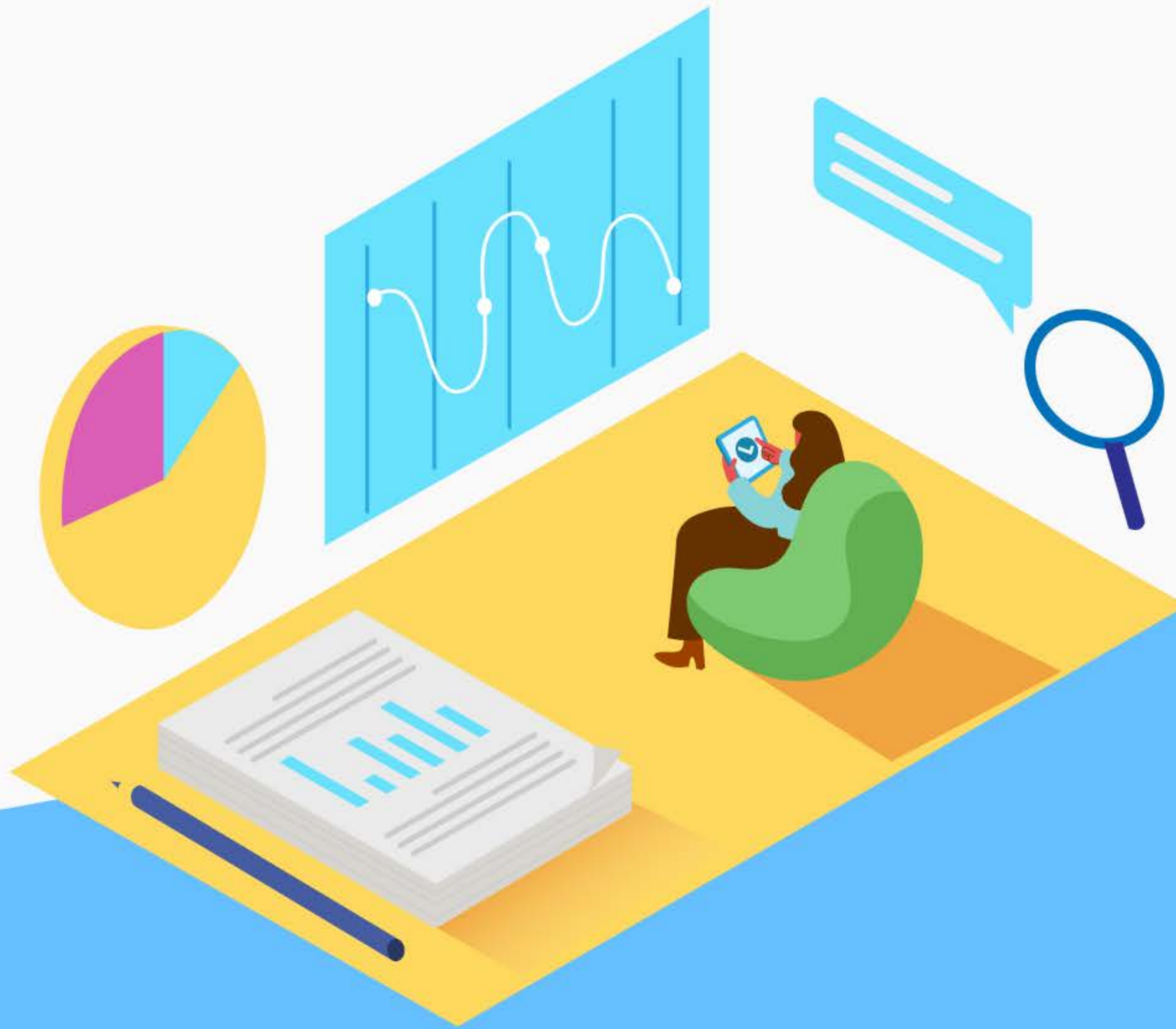
## Methods

- Interviews
- Digital cultural probe
- In-depth secondary research
- Virtual observation (if possible)
- In-person observation (if possible)
- Shadowing (if possible)



# Secondary Research

The root cause of a patient's health literacy level is integral to their future understanding of medical information. Addressing these causes is the key to effective communication with clinicians.

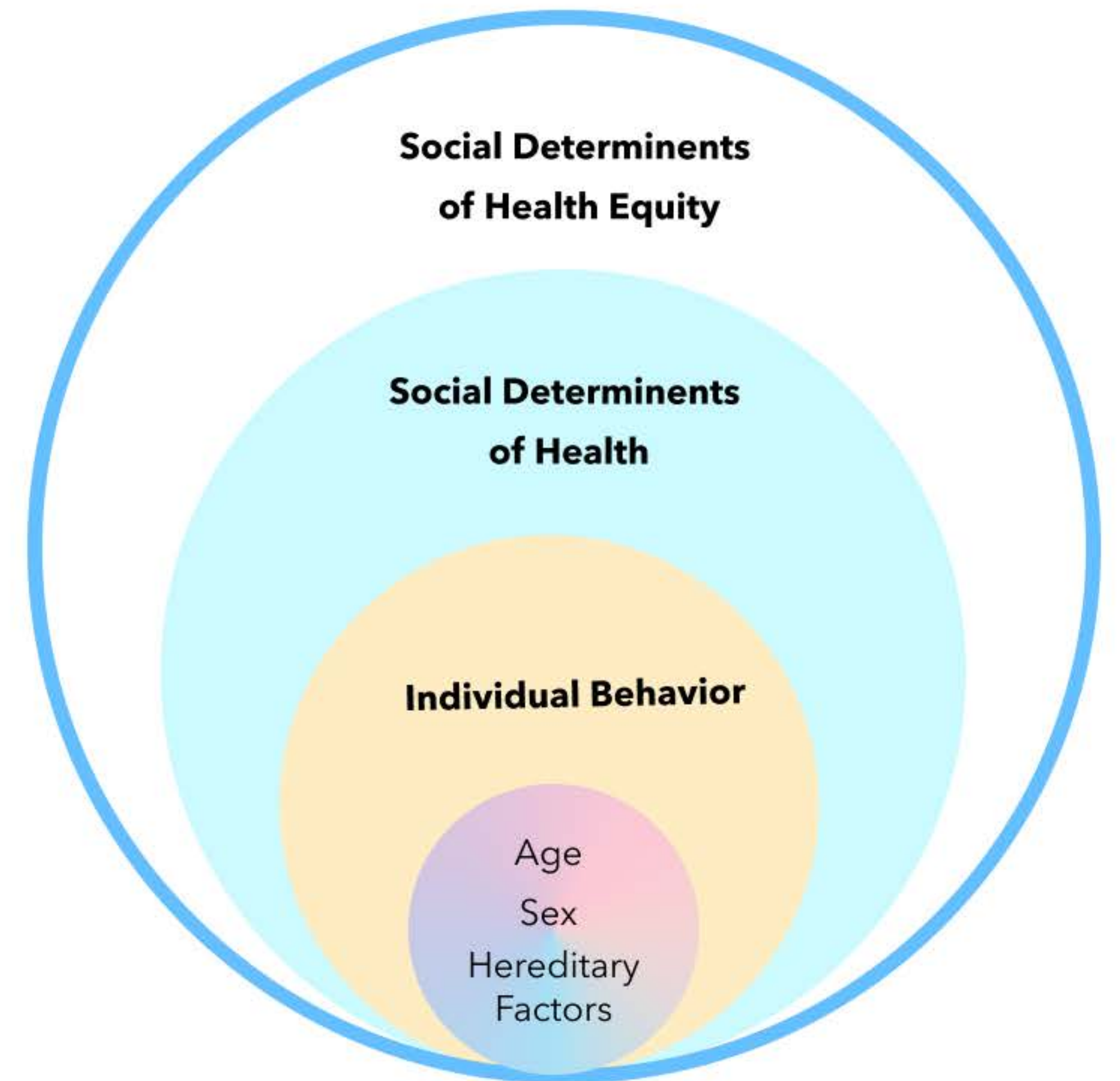




# Causes of Low Health Literacy

Health literacy is caused by four major components that can be split into two sections: patient-sided issues and medical field ended. On the patient side, we have the social determinants of health, and patient shame and clinician-inspired shame that leads to health literacy. In the medical field, physician's lack of communication and patient education material not being accessible also has a great effect on individual health literacy.

The social determinants of health are factors that determine the quality of someone's overall health. The factors focus on their ability to access healthcare (health equity), cultural view of health (social determinants of health), a person's individual behavior, and unchangeable personal factors (age, sex, and hereditary factors). These factors can affect how someone approaches health; for instance, if someone views HIV and AIDS as a curse from God due to cultural belief, they may be less likely to seek medical care, or if someone has a family history of diabetes, they might have different knowledge regarding certain healthcare.





# Patients Feel Ashamed While At The Doctor's

**Patient shaming occurs when a doctor doesn't believe a patient or isn't interested in what a patient has to say. Many patients feel shamed when they think a clinician is rushing through their appointment or seems inconvenienced by their time. Patient shaming, done on purpose or not, can lead to patient neglect and can ultimately be life-threatening.**

## Physician-Inspired Shame vs Personal Shame

There are two main types of shame in the healthcare field.

Physician-inspired shame is caused by physicians shaming patients for their condition. Over half of patients have experienced a shaming encounter from a physician, and women are statistically more likely to experience shame from a physician.

Patient personal shame derives from patients feeling ashamed of their own low health literacy. 40% of patients with low health literacy expressed feeling shame when they have trouble reading, while 68% of patients with low health literacy never share their feelings of shame with their significant other.



# Current Approaches

All current solutions to patient shaming are purely on the patient's side, which leads to clinicians not being held responsible for how they make a patient feel.

The two main solutions are:

- Leaving the current clinician to find a new doctor.
- While at an ER, a patient must demand to see an attending physician.



## Physician's lack of communication

Research shows that medical students' communication skills decline the further they are in school, and clinician's communication skills decline the longer they work in the medical field. Clinicians speak with multiple patients throughout the day with various communication styles and levels of understanding. But what determines good communication with such a diverse group of people?

## Patient education material and inaccessibility

The average level of Patient Education Material is written at a 9th-grade level despite the national guidelines encouraging Patient Education Material to be written in a 6th-grade level. The average American reads at a 7th-grade level.

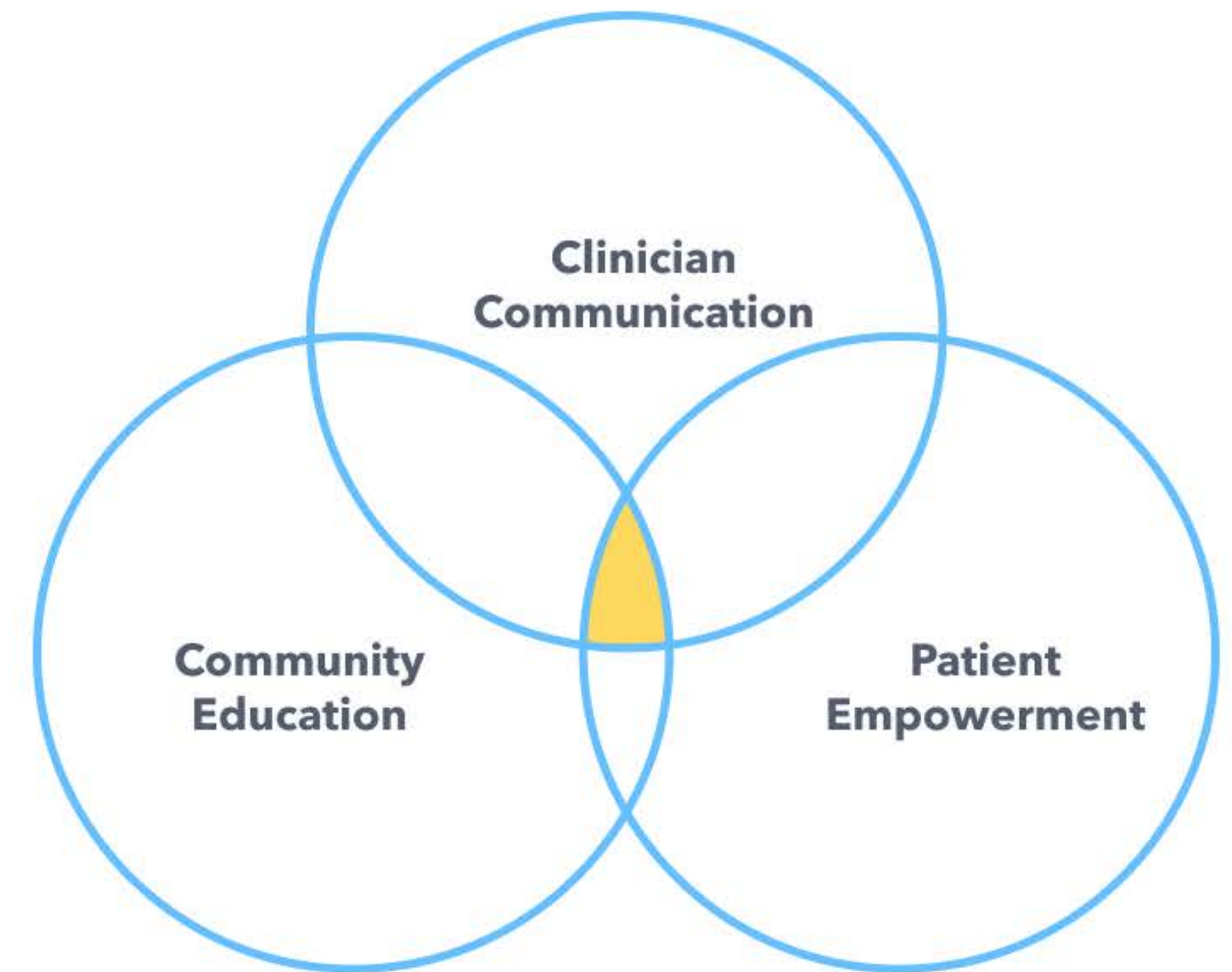


# Current Solutions For Health Literacy

Current solutions focus on three major targets: community education, clinician communication, and patient empowerment. Community education solutions focus on educating various communities both in large groups and individually. Either educational focus greatly impacts overall community health knowledge.

The second is patient empowerment; patient empowerment focuses on improving a person's personal health knowledge, a person's ability to stand up for themselves through the health field, and increasing a person's ability to properly care for themselves.

Lastly is clinician communication. Clinicians receive extensive training on communicating with patients; however, communication is still the main cause of misunderstanding with health literacy. By focusing on improving the way clinicians speak and approach their patients, patient's health literacy will increase.





# Common Medical Technology

## Whiteboard

Whiteboards are the most common and direct way for clinicians to communicate critical health information with their patients while in a hospital or office.

### Pros:

- Simple and versatile
- Reusable

### Cons:

- No interactivity or personalization for each patient

## Internet

There exist many websites that provide information on medical conditions, medications, as well as communication with those experienced in these things. Sites such as Mayo Clinic and WebMD provide general information on whatever a patient is looking for.

### Pros:

- A wide variety of standardized health information
- Easily accessible

### Cons:

- No personalization of information to patient
- Potential misinformation
- Only available to those with internet access





# getwell: network®

The GetWell Network provides information to patients at every step of the medical process. It utilizes apps and webpages to deliver content to and from patients and clinicians.

The “Adobe Creative Suite” of medical information, consisting of multiple platforms designed to simplify the caretaking process at every step of the way.

## Pros:

- Holistic solution that addresses all patient information needs.
- Usable in both hospital and at home.
- Eases burden of caretakers by simplifying communication between patient and staff.

## Cons:

- Large potential for information overload.
- Wealth of features may be more of a burden for patients or clinicians who need only one or few.
- Dated interface.





# Doctella

Doctella is a cloud based RPM solution that includes patient engagement and education, and allows doctors to more effectively interact with patients.

The application allows doctors to more easily communicate with patients and manage their patient needs, while engaging their patients to grasp their own needs better.

## Pros:

- Allows doctors to more effectively lay out treatment plans for patients.
- Doctors are able to keep patients up to date with what they should expect.

## Cons:

- The interface is incredibly dated and ineffective.
- The product is very intensive on the doctor; at the same time it requires the patient to do very little, and gives little incentive to the patient.





The Health Care Education Association is an organization to promote health education throughout the medical field.

They create medical information, and encourage clinicians to educate their patients in the most effective way possible.

Pros:

- They offer supplies and material to clinicians that subscribe.
- A very large network of healthcare professionals conducting research and making materials to improve literacy.

Cons:

- Purely clinician focused, for the sake of the patients.
- Must subscribe to access resources.
- All educational materials. No technology or physical aids.





Online patient portals such as MyChart allow for patients to contact their providers, along with many other options such as scheduling, viewing health information, and aftercare instructions.

MyChart offers patients access to their own medical information, and allows them to contact their doctor, along with a wide variety of other features to help manage their care.

Pros:

- Direct communication between clinicians/patients.
- Personalized medical information available quickly to patients.

Cons:

- Takes time to wait for a response, sometimes days.
- Content is written by the practice themselves, which can be written poorly and not take into account patient literacy.



# Research Hypothesis (Primary)

Changing clinician behavior will directly affect their communication with patients and has the potential to create a more empathetic and effective environment for patient needs.





# Primary Research Goals

Our overall goals for our primary was to gain an understanding of common communication methods that clinicians use, examine how these experts are applying information to current known medical services and resources, and we wanted to estimate an individual's understanding of their own health literacy.

We wanted to look into this to have MO act in an opportunity space when looking at the clinician and patient interactions.

78

Health Literacy  
Survey Responses

9

Patient Interview  
Participants

4

Expert Clinician  
Interviews

20

Health Expert  
Survey Responses

3

Medical Expert  
Interviews





**75+**  
responses

## Screening Survey

First, we sent out a screening survey to ensure that we were targeting people with low health literacy. We used the Short Assessment for Health Literacy English (SAHL-E). The SAHL-E is a CDC approved rating test used to determine how well someone comprehends basic health concepts

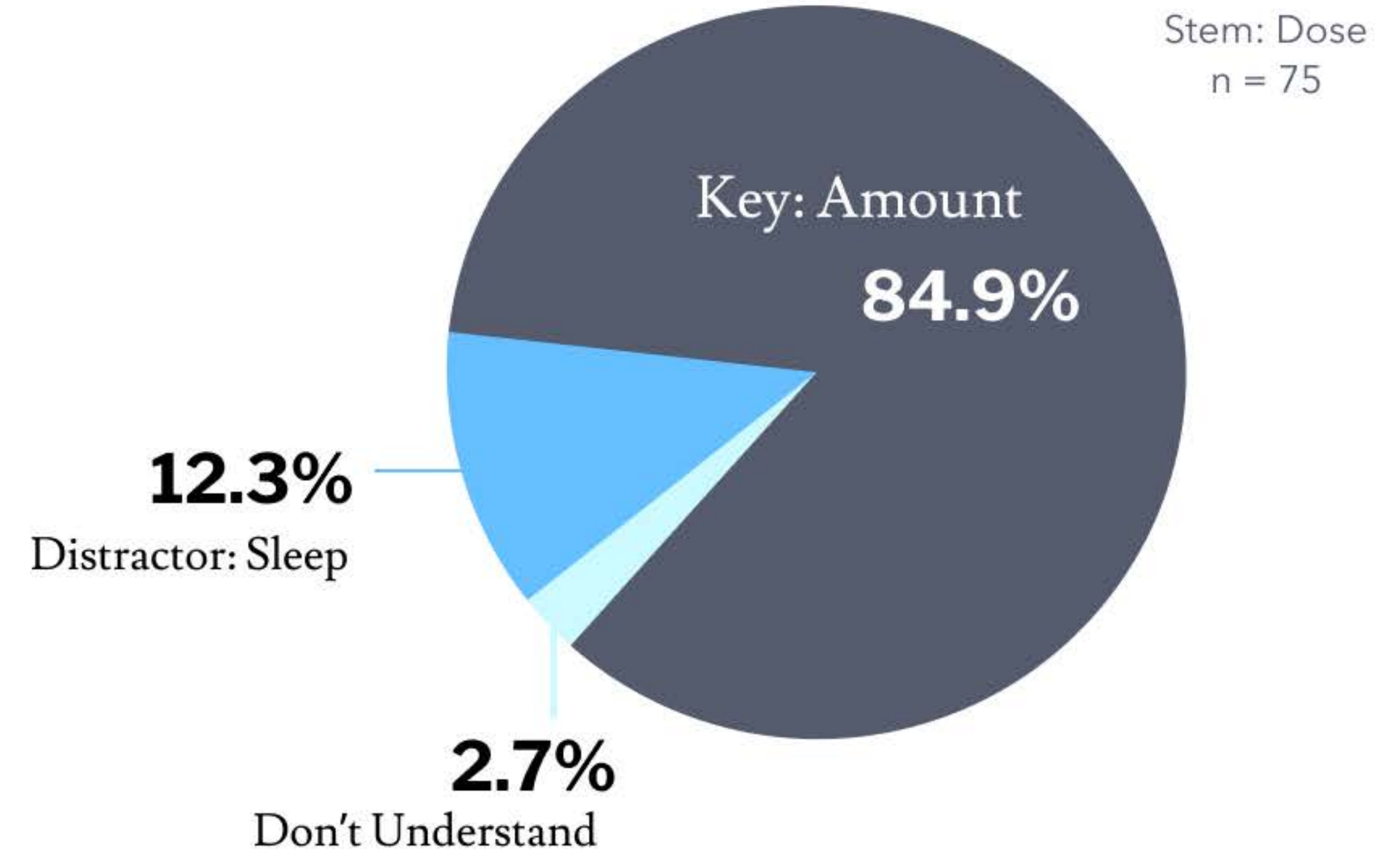
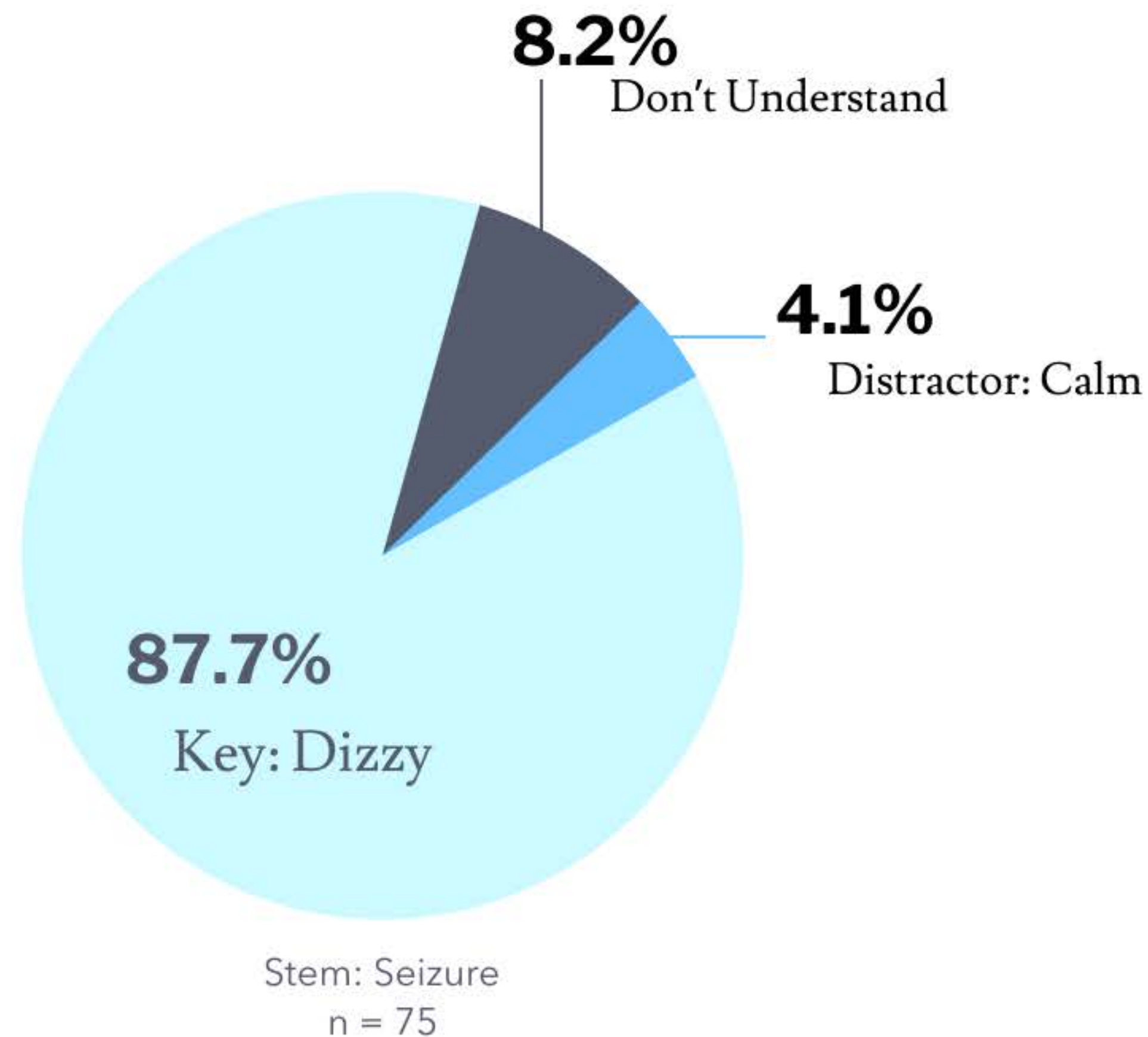
## We Found That...

Most patients who took our screening survey believed they had higher health literacy than they actually do.



# Screening Survey

The questions included a stem word, and the task was to match it with the key. The distractor word was another word placed to confuse the tester. We also added an option of "Don't understand" for users who may not understand the significance of the original stem word.





# Expert Survey

We believe that, when answering truthfully, experts will express their personal emotions, whether negative or positive, regarding patient communication and their own opinions on their patients.



20+

This is the survey that we included that we sent to experts:

**Have you ever felt pressured to diagnose a certain way?**

**How do you determine that a patient is being non-compliant?**

**Have you ever felt rushed through seeing a patient for any reason? If so, what was the situation?**



# Expert Interviews

We believe that by interviewing experts, we will learn about current techniques used by medical professionals and their effectiveness. We also believe that we will learn about the situations and beliefs of clinicians.

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\*clinicians and medical experts

Are you aware of what health literacy is and how it is used?

What level of health literacy do you believe most of your patients are at?

When discussing the health of your patient with them, do you feel that you have a full understanding of your patient's needs? Medical? Emotional? Mental?

When discussing the health of your patient with them, do you feel that they have a full understanding of the situation and what is being discussed?

Can you describe a situation where you have noticed your patient is not understanding you or what is happening?

Have you had difficulty in the past explaining the situation to a patient so they have a full understanding?

How often do your patients ask you to explain words that they do not understand?

Do you use any tools or aids in the workplace in order to benefit patients in the understanding of their health?

How do you determine that a patient has low health comprehension?



# Interview Insights

## Clinicians & Health Industry Professionals



Clinicians try to use clear verbal or written instructions.

Patients tend not to read instructions on medication due to confusion and instead use visual cues.

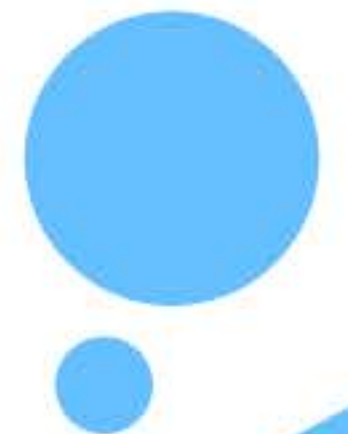
Clinicians have various tools for a variety of patients and find that drawings are often more helpful than verbal explanation.

Clinicians can often pick up the emotion of the room quickly, because it plays a role in every patient interaction.

Clinicians suppress their emotions and sometimes take it out on patients or those in their personal life.

Clinicians believe that it's a patient's responsibility to be willing to learn and educate themselves.

Clinicians often do not expect responses from patients who were unsatisfied with their care.





# Expert Interviews



"There's a combination of where I feel like I'm lacking the materials to give them all the information that they need, but also just as a nurse, you have a lot of tasks going on."

**- Lizzie Gafford**  
**23, Nurse RN**

## Current push for change

Large pharmaceutical companies such as Eli Lilly & Co. and Merck & Co. are creating their own patient education material based on health literacy guidelines created by the CDC.

**- Lori Hall**  
**Director of Global Health**  
**Literacy at Eli Lilly & Co.**





# Patient Interviews

We believe that by interviewing patients we will gain greater insight into patient's feelings and personal opinions on the interactions they have with their clinician and where patients believe there are flaws.

9

## Communication

- Once you've stepped into a clinic, do you find yourself having any struggles?
- Are you understanding the forms you are given? Are you able to communicate your symptoms? Do you understand why they're giving you specific tests? etc.
- Can you recall a time when you had to communicate with a healthcare professional? If so, can you explain how you felt throughout that process?
- What type of communication was it? (email, through phone, in-person, through nurse)
- Do you feel that your doctor understands your concerns?
- How did you explain your concerns in order to be understood?
- When discussing your health issues, do you have any problems understanding what your healthcare provider is saying? Can you recall an instance where you've had a misunderstanding?
- Are there some terms your doctor has used or actively uses that you have trouble understanding?
- Do you use any tools or resources that help you when communicating with your doctor?



# Patient Interviews

We believe that by interviewing patients, we will gain greater insight into patient's feelings and personal opinions on the interactions they have with their clinician and where patients believe there are flaws.

9

## Preliminary Understanding

How often do you visit your doctor or the hospital?

Are you always encountering the same doctor or has it been multiple?

Can you go through step by step a general visit to your doctors?

## Personal Understanding

Are you aware of what health literacy is?

What do you consider your health literacy level (below basic, basic, intermediate)?

What level of satisfaction would you say you feel once leaving an appointment?

When you have left your appointments, do you feel that you understood what was discussed during the appointment?

Do you feel you are able to fully understand healthcare instructions from your medical professionals?

Once you've left an appointment, do you feel that you have a full understanding of the instructions left for you and why you're taking certain medications?

How effectively do you feel you are able to follow instructions from your doctor?



# Interview Insights

## Patients

Pleasant interactions with clinicians, where the clinician addresses the patient's concerns and asks about them as a person aside from the patient's health, make the patient feel cared for and safe.

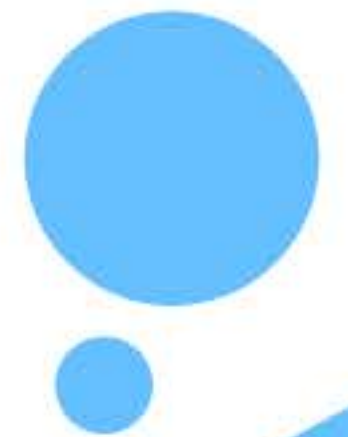
The clinicians answered the patient's questions before, during, and after my appointment and even wrote down their responses to ensure the patient felt safe.

The clinician makes the patient feel stupid and humiliated because of their own bias and the patient is being advised to see another clinician.

The patient felt safe and comfortable in their appointment because of the positive environment the clinician made.

The doctor uses language the patients do not understand and withholds information from patients, which leads the patient to leave appointments feeling like they still don't have a full understanding.

When the patient is speaking with their doctor, they feel annoyed that they have to defend themselves.





# Patient Interviews



"I didn't understand anything that was going on for about 10 months, from there they had people who specialized with kids and explaining what's happening...before that it was the worst year of my life."

**- Jason Castleberry**  
**20, AMPS patient**

**"There are times when walking away from the appointment that I have to Google stuff afterwards and figure out what they were trying to tell me."**

(24, Female)

**"I didn't understand what was wrong with me."**

(21, Male)



# Opportunity Area

Our decided on opportunity area is to be:

- An institutional solution
- Target basic and below basic health literacy patients
- Accessible and inclusive to all

Stakeholder Matrix





# Primary

REMDi†

## TARGET USERS

- Patients
- US adults (18+)
- Low health literacy



## TARGET AREAS

- Emergency Room (ER)  
Departments

## HMW

For Patients

Help patients positively interact and communicate with their clinician?

Encourage patients to take charge of their health and healthcare?

Ensure patients feel comfortable with their clinician?



# Secondary

## TARGET USERS

- Clinicians
- Healthcare Providers

## TARGET AREAS

- Outpatient offices



## HMW

For Clinicians

Help clinicians stop patient non-compliance?

Encourage more positive communication between the patient and the clinician to prevent the patient from feeling ashamed?

Assist clinicians in feeling less rushed so patients feel heard and fully understood?

Aid clinicians in communicating information in a way the patient understands?



# Overarching HMW

How might we help patients take charge of their health and feel comfortable with their clinicians through the use of education and patient empowerment?

## Ideation Methods

- Crazy 8s
- Affinitization
- Wishes

## Product Goals

**Educating** patients of their personal health.

**Empowering** patients to take charge of their health.

**Understanding** clinicians and medical jargon that applies to them.



The



Medical Network

OUR

## Concepting

3 Top Concepts

What Did We Choose?

Key Features and Functions

Concept Ideation



# Concept 1 **Wearable Patient Companion**

A wearable AI companion with a corresponding app that records patient-clinician conversations and transfers the recording to an app for later review. The wearable allows a patient to tap each time they have a question or are confused. Taps get sent to the app, and an AI generates a transcript and potential questions for the patient to ask their clinician.

**HMW** Encourage patients to take charge of their health and healthcare?

Aid clinicians in communicating information in a way the patient understands?

**Features**

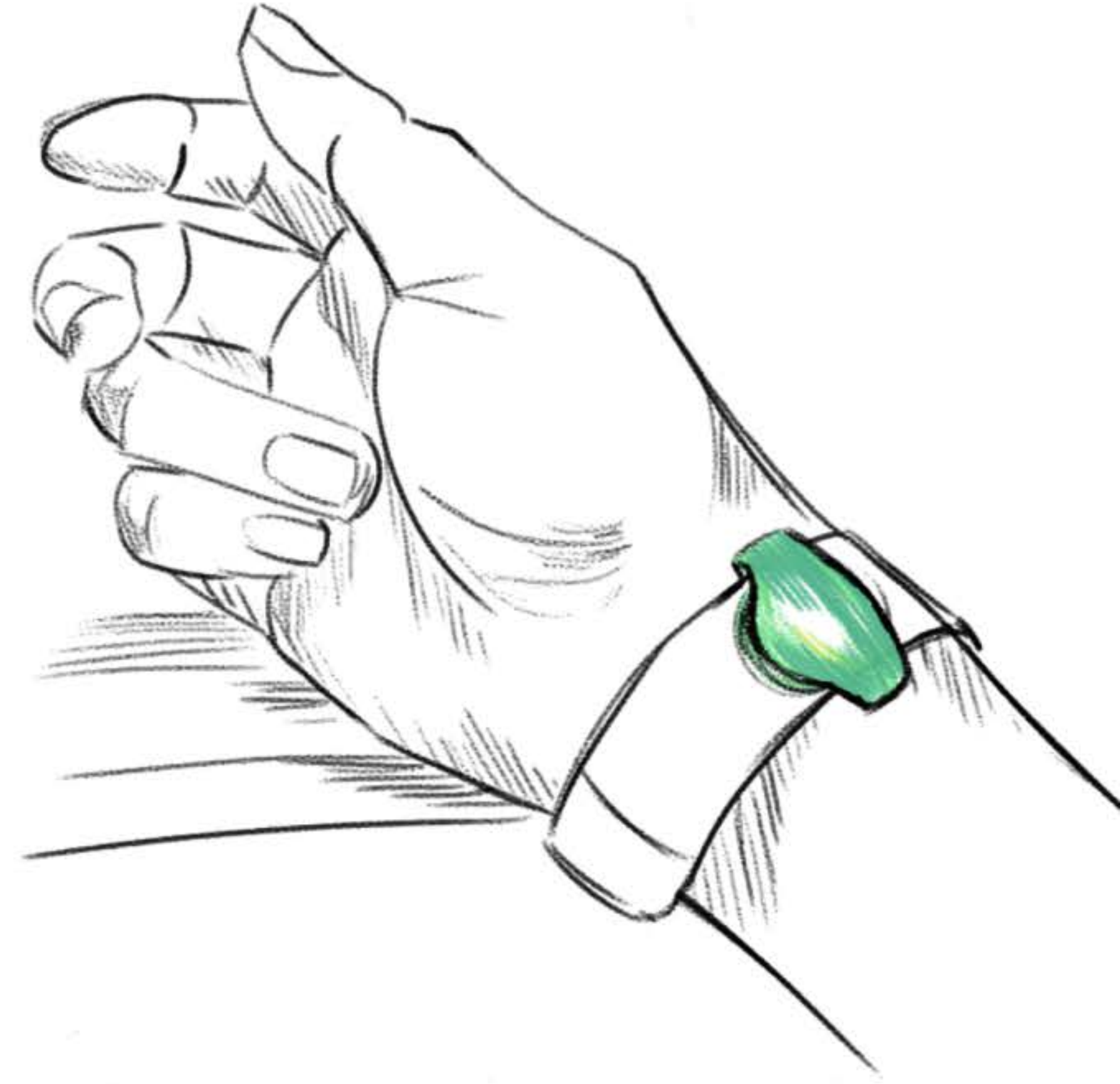
- Touch Sensor
- Microphone
- Transceiver
- AI

**Functions**

- Notifies AI when patient has questions
- Records conversation with clinician
- Sends conversation to app
- Generates questions based on recorded conversation

## **Rationale**

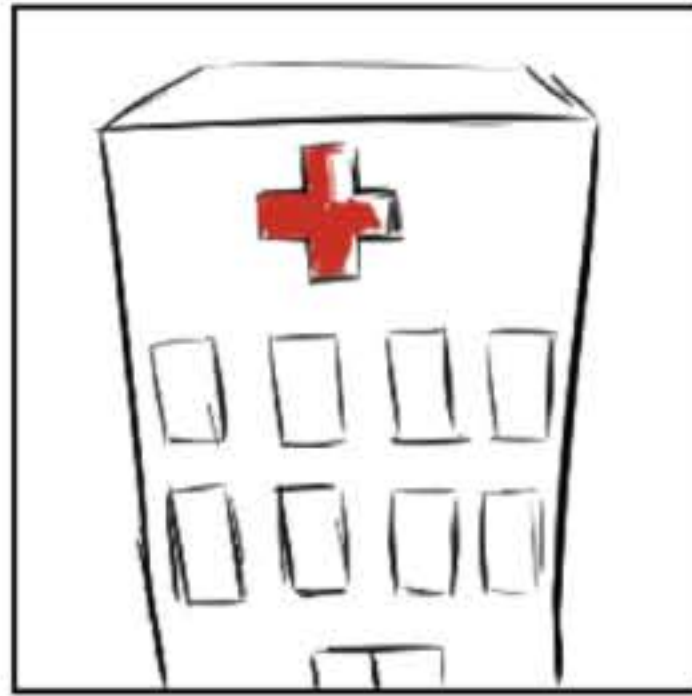
Patients are often confused about medical instructions and information but are unsure of what questions to ask or forget the information once discharged. By creating a platform that advises patients on questions to ask and enables patients to return to recordings of previous sessions, patients can have more control of their medical encounters.



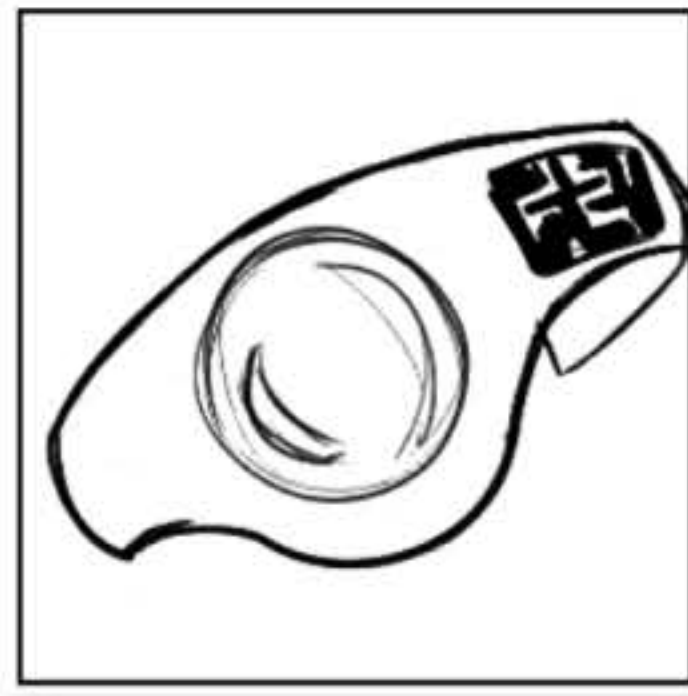


# Wearable Patient Companion

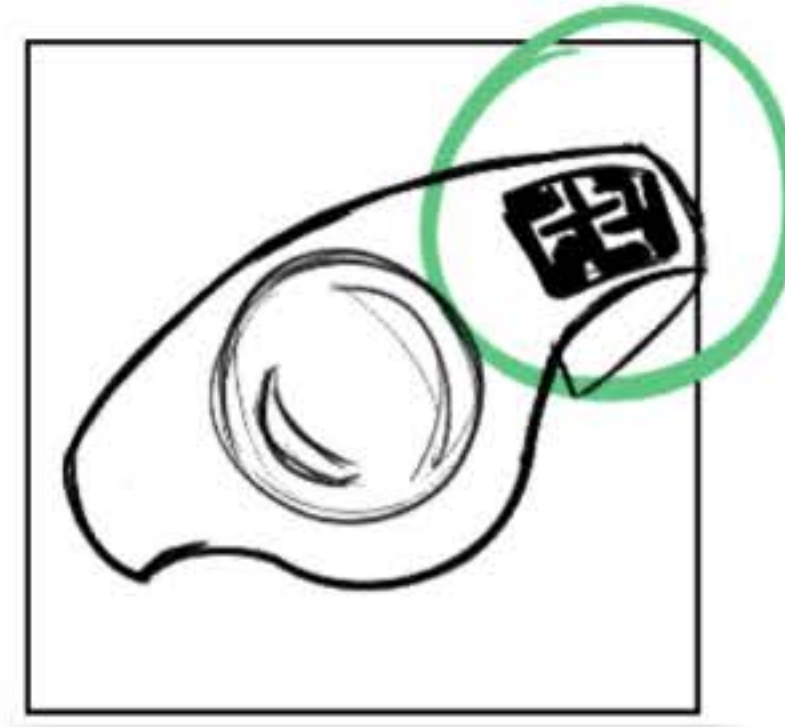
## Storyboarding



Isaac goes to the emergency room because he begins feeling sharp abdominal pain.



After getting checked in at the ER and examined by a nurse, Isaac is given an electronic clip that attaches to his ID band or sleeve.



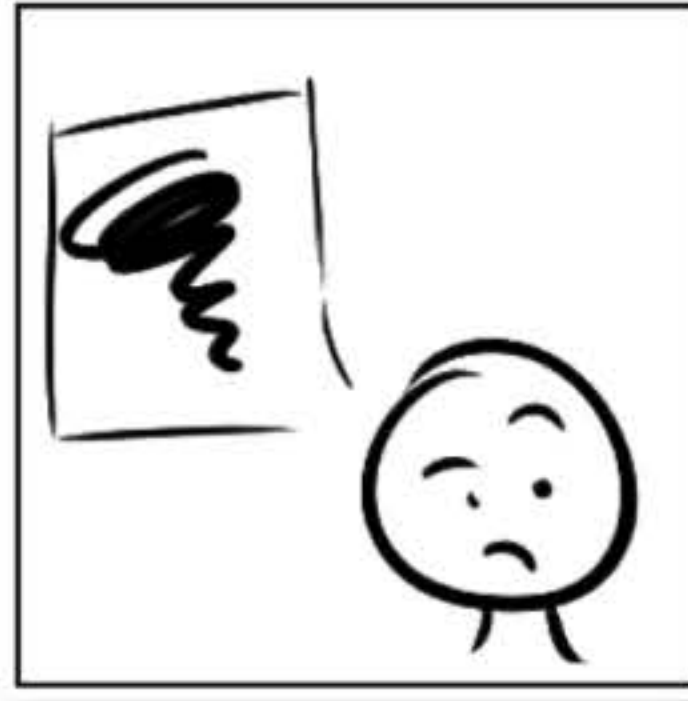
The device will record the conversations that he has with his clinicians, and he can click the button on the clip to bookmark the last few seconds of the conversation in case he has any questions for later. He then scans the QR code on the clip.



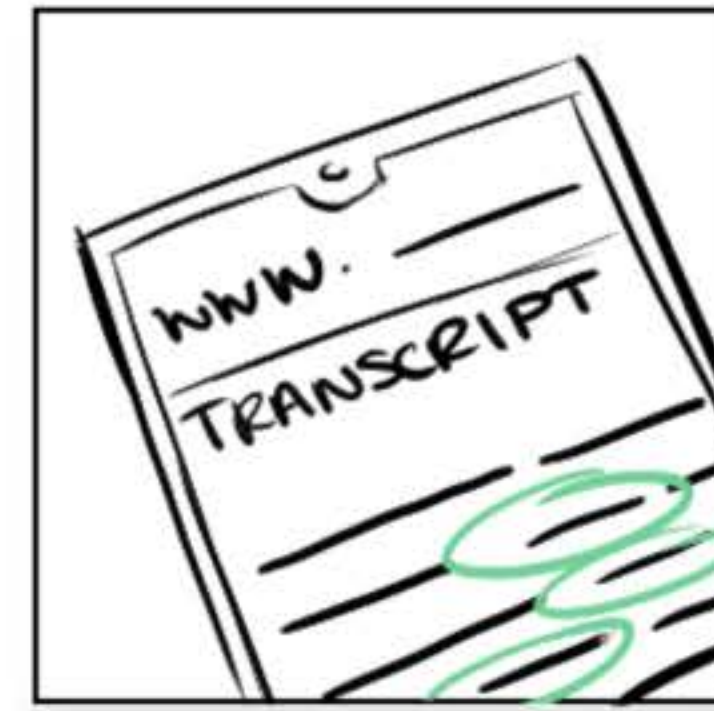
He is brought to a website that shows a transcript of the conversations he's had since putting the clip on. It also educates him on how the ER works. This helps him to relax and know when he can expect to see a doctor.



Isaac is guided through the appropriate scans with his doctor, after being diagnosed with pancreatitis. The clinician uses many words that Isaac doesn't understand.



However, the clinician needs to leave the room before Isaac can ask all of his questions. This leaves Isaac feeling confused about what happened to him and what his next steps are.



After receiving treatment and going home, Isaac reviews the transcript that shows him the parts of his conversation that he bookmarked. The app highlighted and defined complicated medical terms that aren't commonly known.



Isaac feels more informed about his health, and has a reference to review whenever he wants about his time at the hospital.



# Concept 2 Health Literacy Crash-Course

An app and product that gauges your initial health literacy level and creates customized lessons to help increase your health literacy for both short-term and long-term conditions. The physical device allows users to scan various parts of their bodies and displays information about common medical issues and procedures. The app involves consistent and gradual practice and trains users on their health, thus empowering them during clinician encounters.

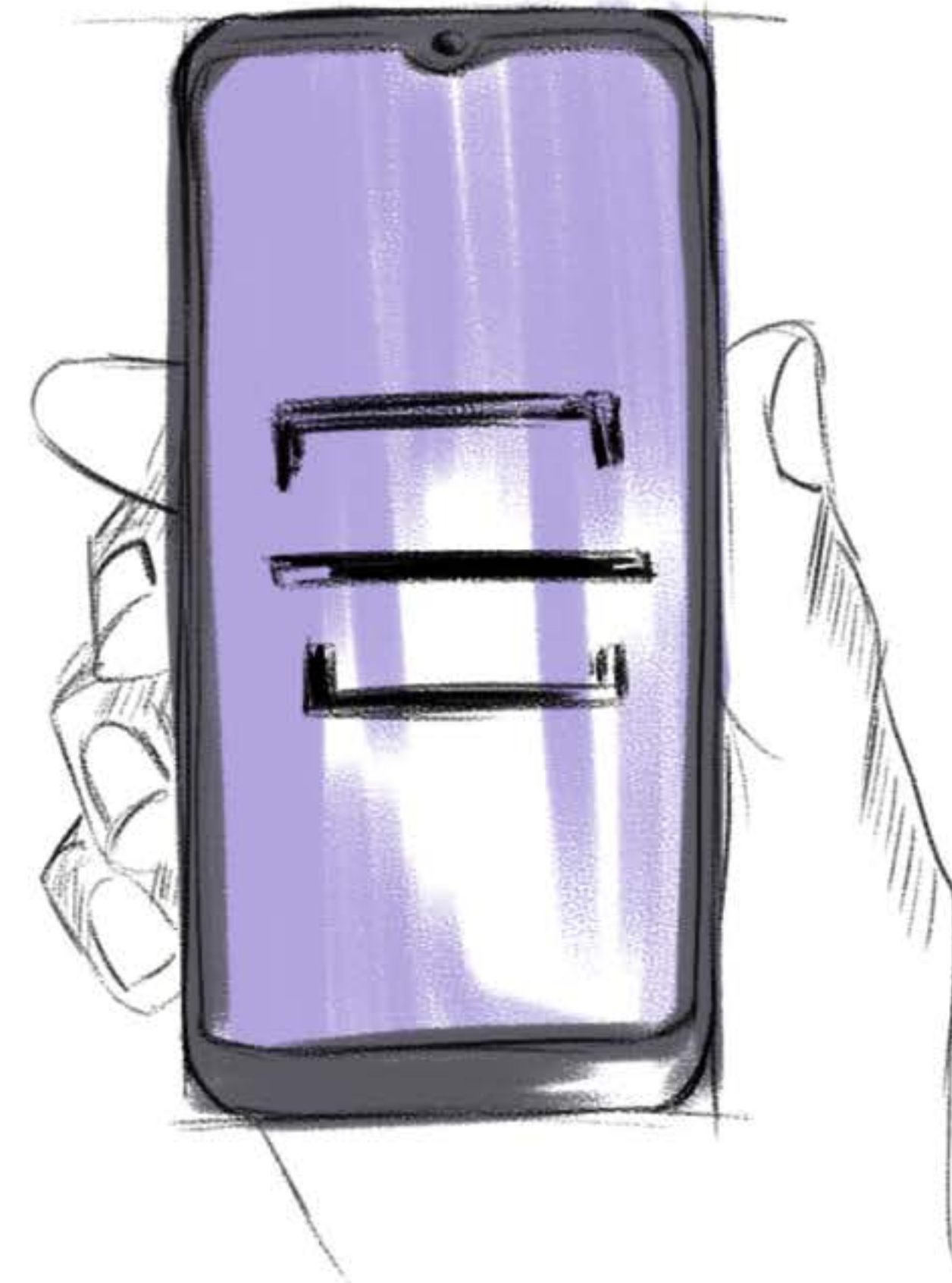
- HMW** Help patients positively interact with their clinician?  
Encourage patients to take charge of their health and healthcare?  
Aid clinicians in communicating information in a way the patient understands?

- Features** Patient Literacy Test  
Gamified Health Information  
Empowerment Courses  
Body Scanner

- Functions** Educates patients on health conditions they have or want to learn about.  
Lessons on patient empowerment.  
Quizzes on content.  
Physical interaction with body scanner.

## Rationale

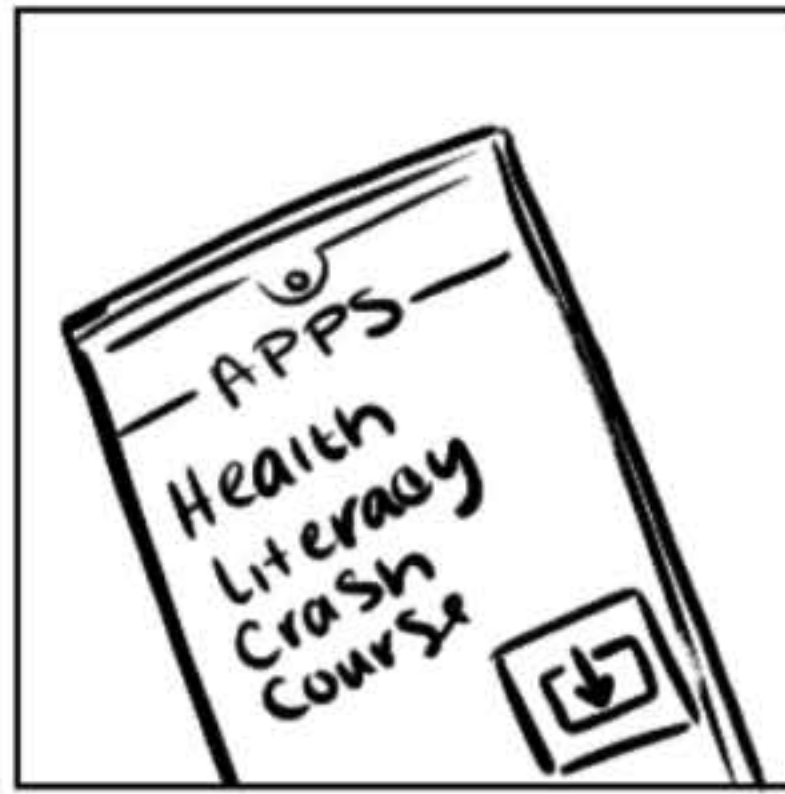
By creating a catered and progressive curriculum for patients, patients will increase their health literacy and become more empowered regarding their health.





# Health Literacy Crash-Course

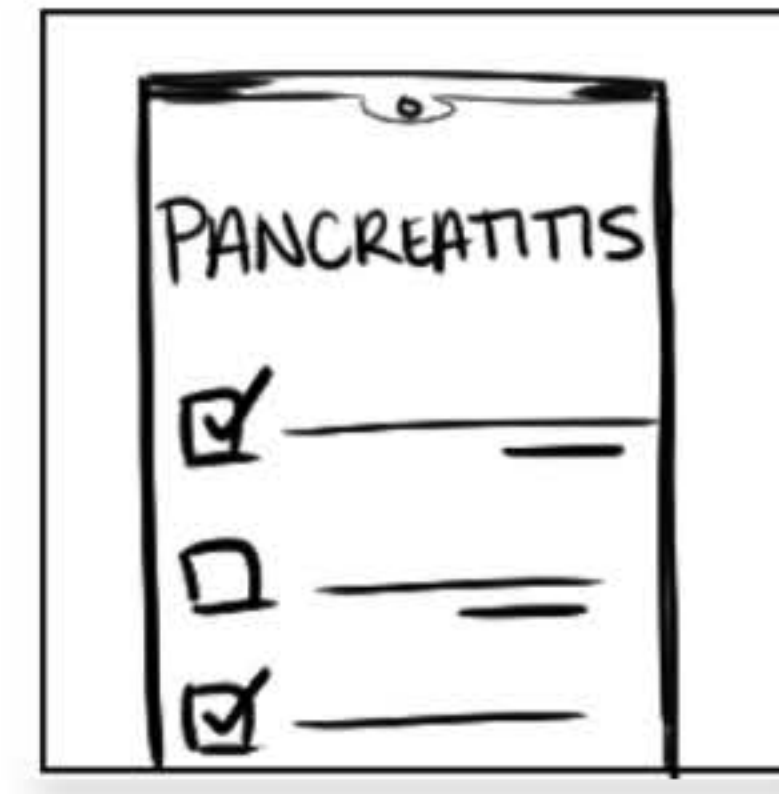
## Storyboarding



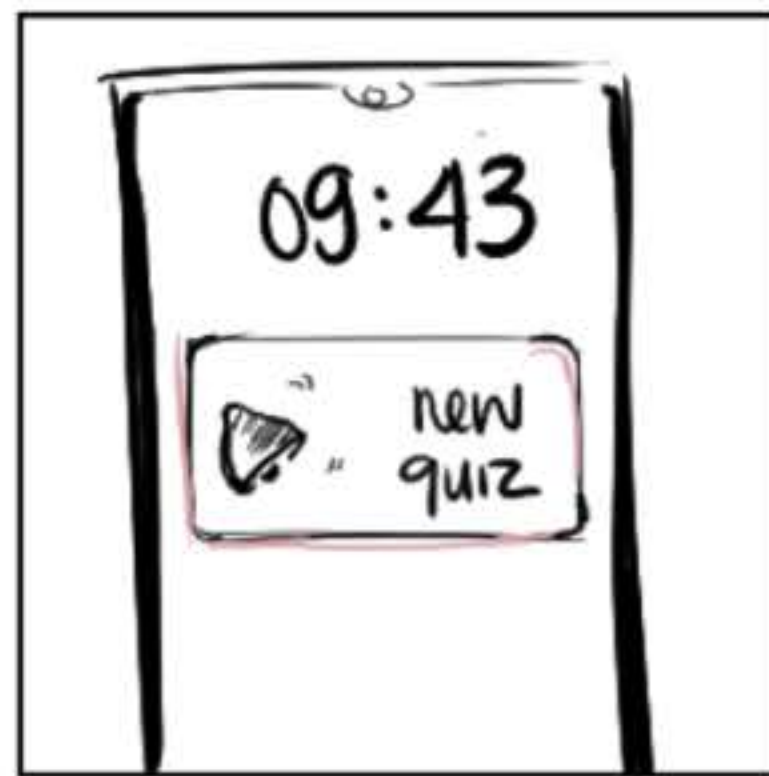
Isaac was recently diagnosed with pancreatitis and was told by his doctor to use Health Literacy Crash Course to learn more about his condition and any others.



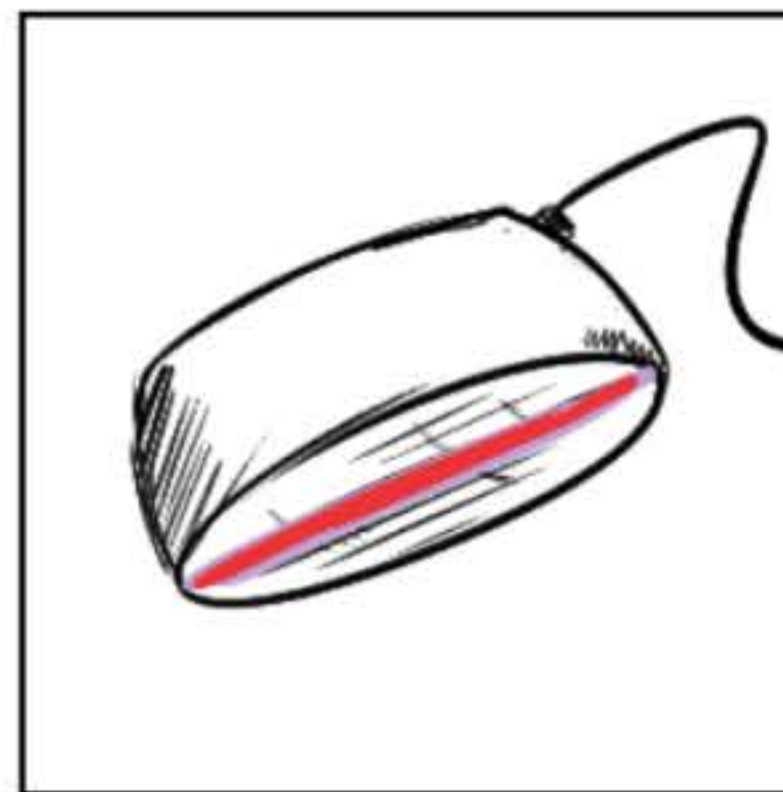
He completes the initial health literacy quiz to set a baseline for the level of information provided to him.



Isaac can select the conditions that he has been diagnosed with. In his case, it is pancreatitis.



Over time, the app begins sending Isaac daily quizzes and bite-sized pieces of information about his body and condition.



Using the additional body scanner companion device, Isaac can complete extra lessons by scanning parts of his body.



Isaac now attends appointments with more confidence and can have more informed conversations with his clinician about his health.



# Concept 3 Health Care Playing Cards

Cards that split up the healthcare plan process into digestible segments to create a collaborative experience between patient and clinician. Cards will help create a plan that both patient and clinician agree upon and are scannable into the corresponding app that will create a formulated outline and progress tracker for the patient.

## HMW

Ensure patients feel comfortable with their clinician?

Encourage patients to take charge of their health and healthcare?

Help patients put more effort into their healthcare and keep them from refusing to communicate with their clinicians?

## Features

- Physical Card
- QR Code

## Functions

- Segment the healthcare planning process into digestible portions.
- Scannable with the app to show expanded planning information.

## Rationale

Patient health plans are critical for patient education and by creating a collaborative and digestible experience, patients will be more motivated to take an active part in their health.





# Health Care Playing Cards

## Storyboarding

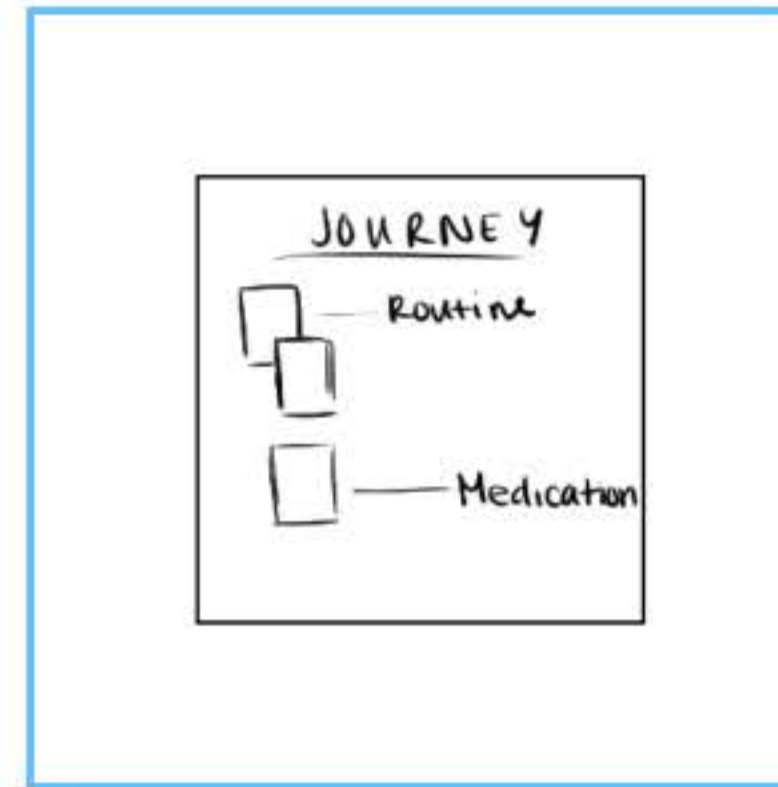


Isaac has recently been diagnosed with Type-2 Diabetes. When consulting with his doctor, Isaac has many questions about what his life will be like now.

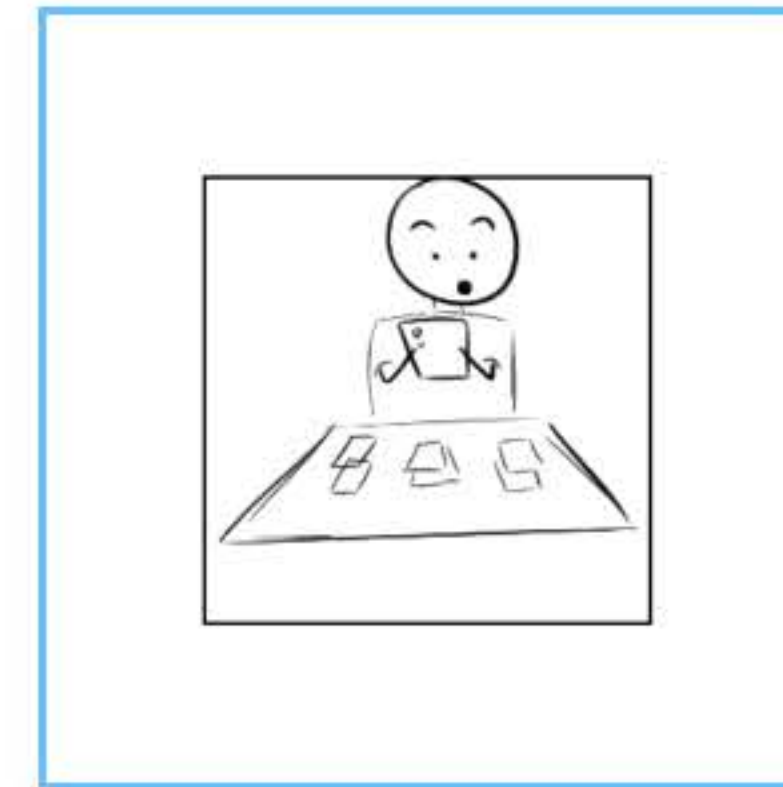
His clinician has a lot to cover and knows that the education process will take some time.



The doctor takes out a set of cards to show Isaac. The cards have blank spaces to write in the next steps of Isaac's health journey.



Together, Isaac and his doctor fill out his next steps regarding his care and address questions along the way.



After creating a plan that Isaac is comfortable with, the doctor instructs Isaac to scan the cards using his smartphone in a companion app.



The app creates a digital record of his treatment plan and helps break it up in a convenient and easy-to-read way that he can refer to at any time.

This helps Isaac feel more informed about his health and simplifies his next steps in a way that is easy to follow.



# Chosen Concept

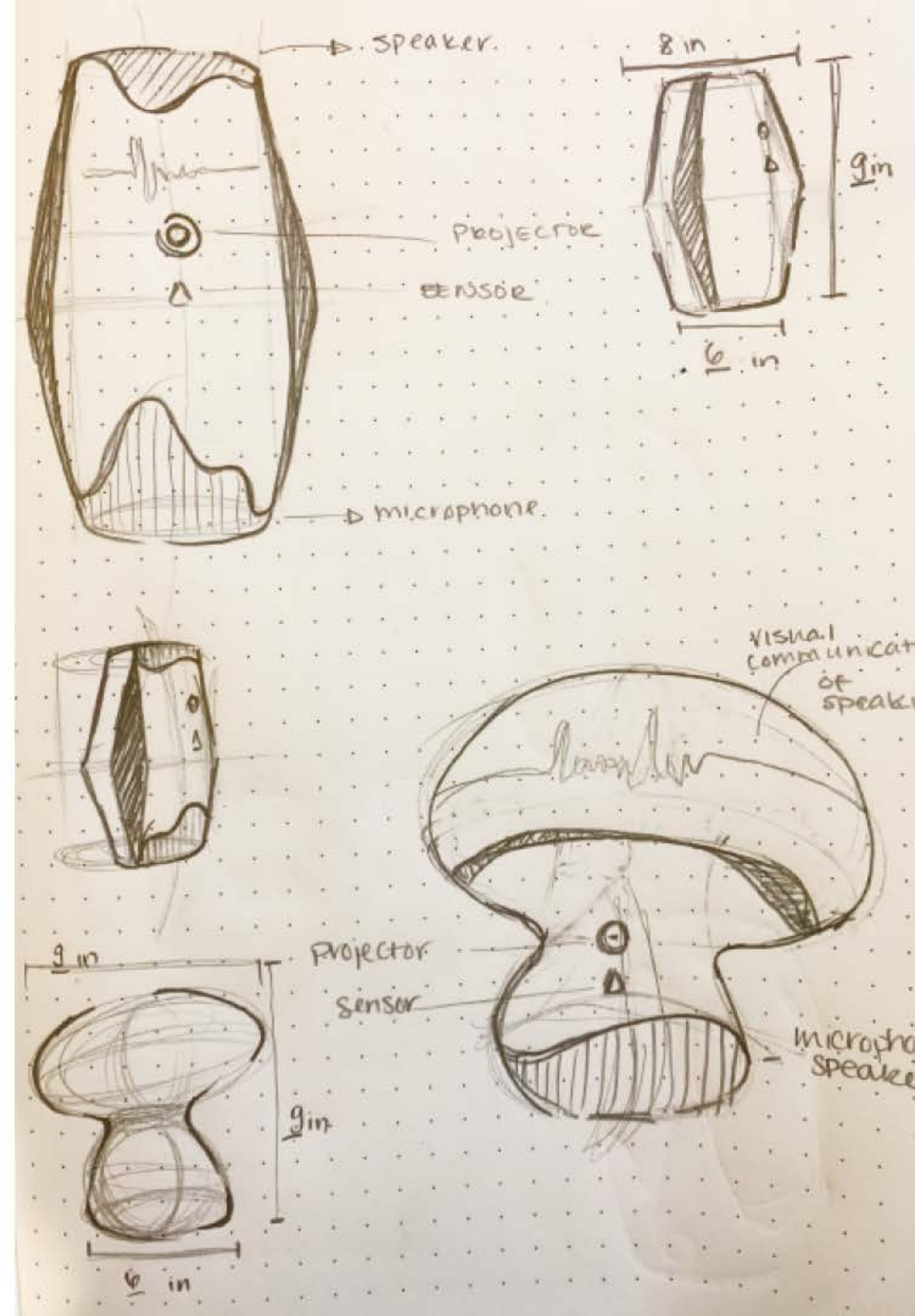
## MO Introduction

MO is a bedside companion that interacts with patients by speaking with them, comforting them, and answering questions they might have through verbal explanations or visuals.

MO has a corresponding app that helps patients review their past questions, view their discharge instructions, ask further questions, and monitor their progress.

## Rationale

- Takes some burden of patient education away from the clinician.
- Helps calm the patient in stressful situations.
- Provides an extra reference for educational resources.
- Physical form adds presence to room.





# Mentor Evaluation Of Concept

Mack is a designer at IBM and the designer of Felo. We used her expertise in social robots and Arduino programming of voice recognition to gain some understanding and a more solid direction regarding MO.

## Feedback

Suggestion for a form perception survey to see what users want and don't want in terms of a physical form. Anthropomorphic forms can be difficult to find the balance between human and robot features.



**Mackinzi Blank**

User Experience Designer,  
*IBM Cloud Developer Tools*



# Key Design Elements

## Physical

### Features

Projector/Screen

Voice Recognition

Speaker

Microphone

Motion sensor/infrared sensor

### Functions

Shows visuals

Analyze verbal instructions

Gives verbal feedback

Receive verbal feedback

Detect when someone is in the room

## App

### Features

Clinical Summary

Medication Lists

Lab and Test results

Medical History

Progress Tracker

Patient Education Material

Secure (HIPAA compliant) messaging

### Functions

Patient profile

Medication functions

Lab and test description and purpose

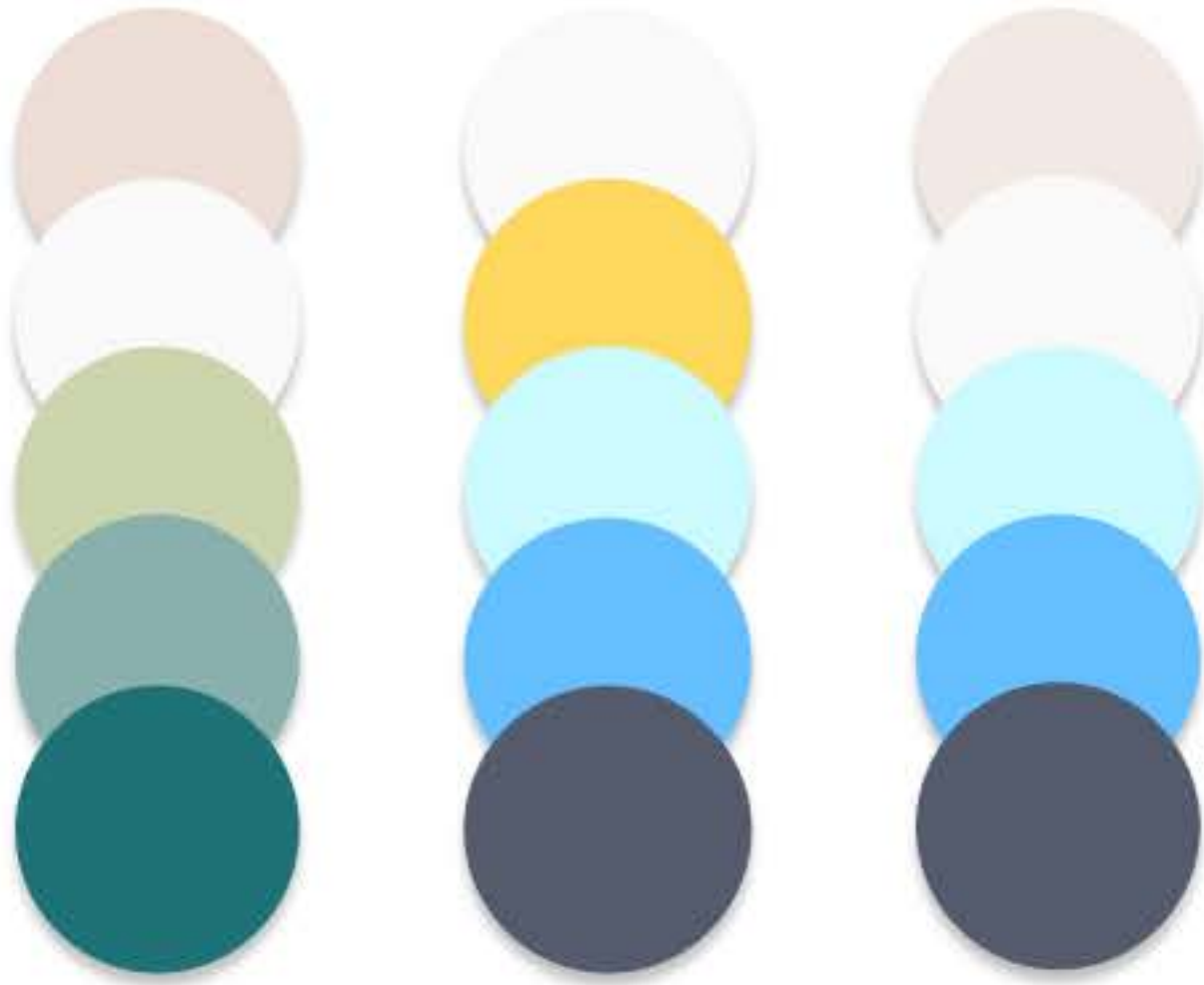
See past visits, issues and medications

Track discharge progress

Learn about condition



# MO Branding Styles



## Header 1

Libre Franklin Bold 18 pt

## Header 2

Sofia Pro Bold 64 pt

## Header 3

Gilroy Semibold 48 pt

## Header 4

poppins semi bold 36 pt, paragraph sub headings

## Header 4

graphik semi bold 36 pt, paragraph sub headings

### Nav Titles – Header 5

poppins semi bold 24 pt

### Nav Titles – Header 5

graphik semi bold 24 pt

### Subtitle – Nested Nav

poppins medium 18 pt

### Subtitle – Nested Nav

graphik medium 18 pt

Body Text  
poppins regular 14 pt

Body Text  
graphik regular 14 pt

**MO**

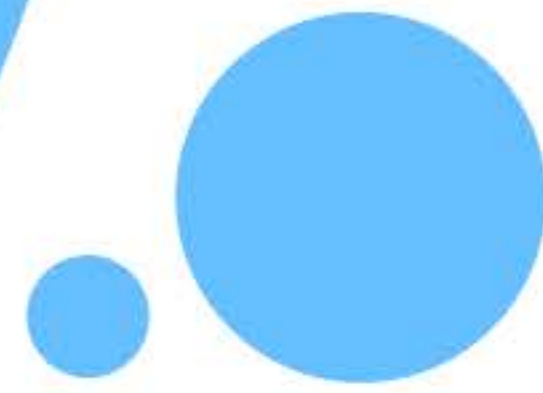
Poppins

**MO**

Graphik



# Form Validation - Survey



REMDi†  
**N = 73**

## Questions

Explain your thoughts and feelings when looking at this robot.

Which robot would you trust more to deliver information?

Which robot is more approachable/comforting?

**Robot 1**



**Robot 2**



**Robot 3**



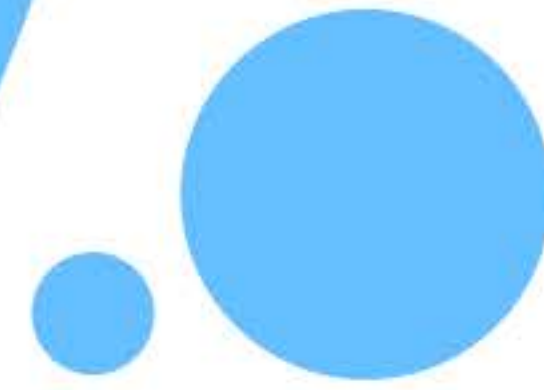
**Robot 4**





# Form Validation - Survey

## Results



REMDi†

**N = 73**

Users found slightly anthropomorphic forms such as eyes to be more trustworthy when delivering information

Users felt comforted by a small, round, and slightly curved form

Eyes are engaging to users without seeming too uncanny

Soft lights and features are more approachable for users



LG Hub Robot

**WINNER!**



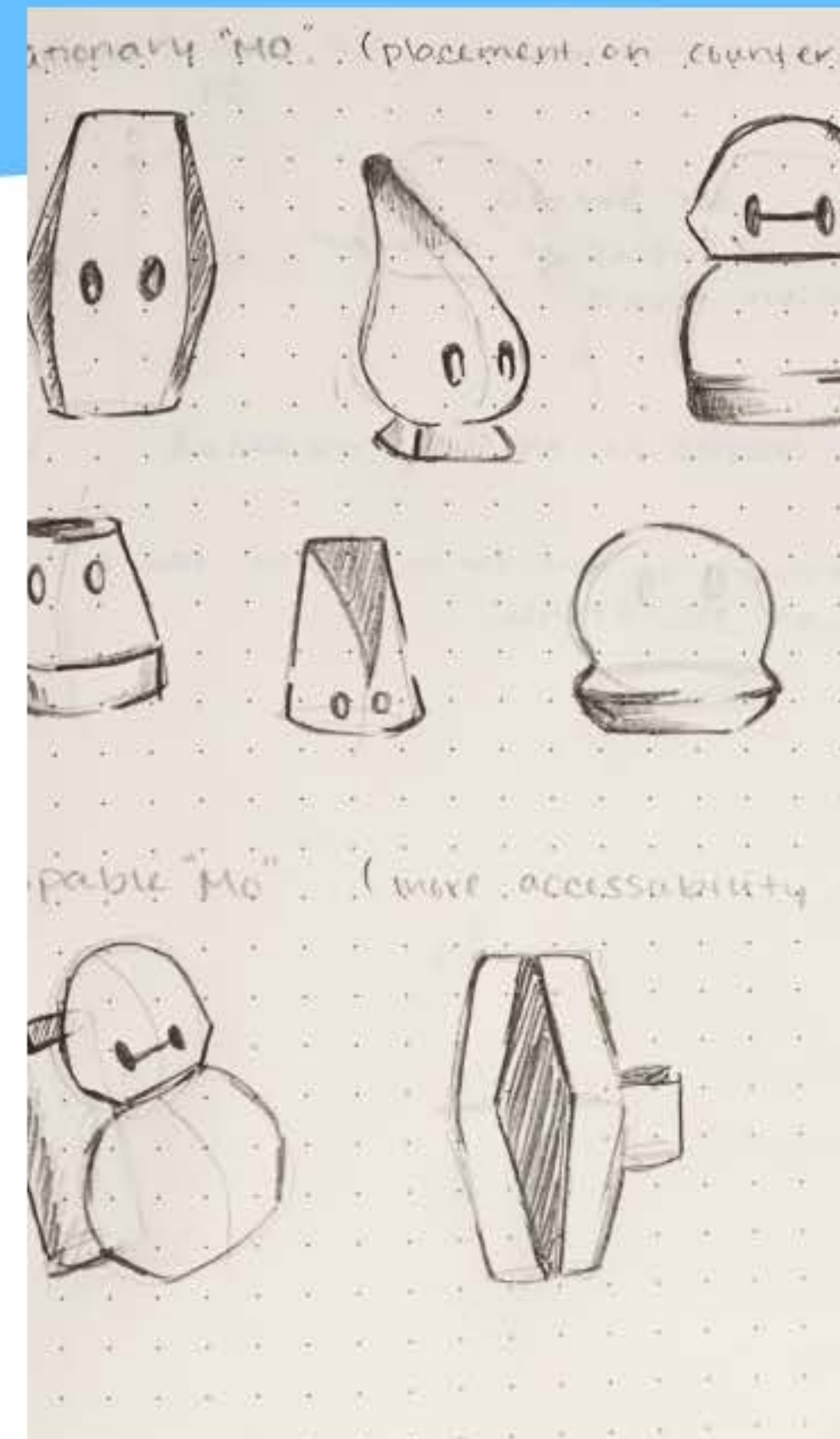
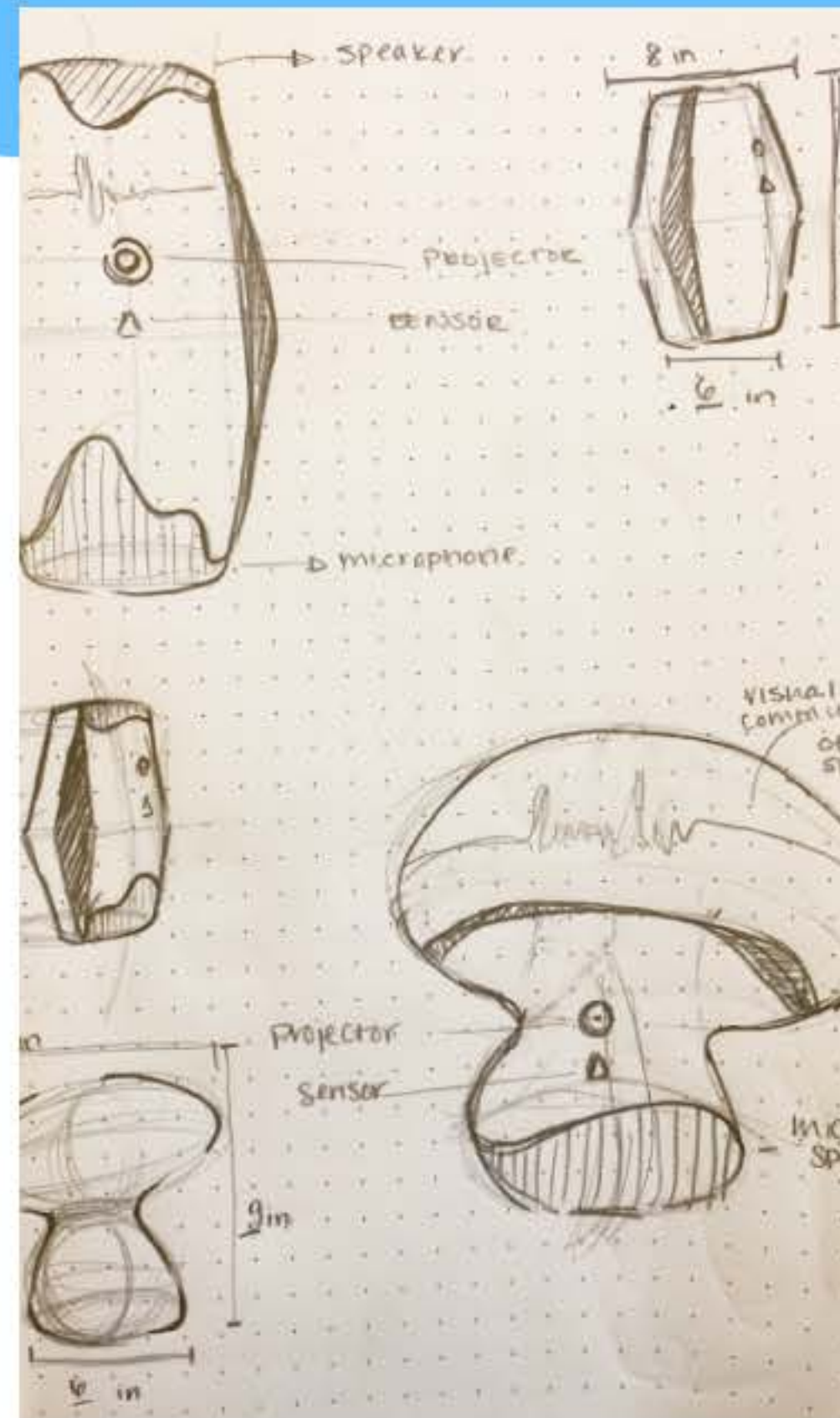
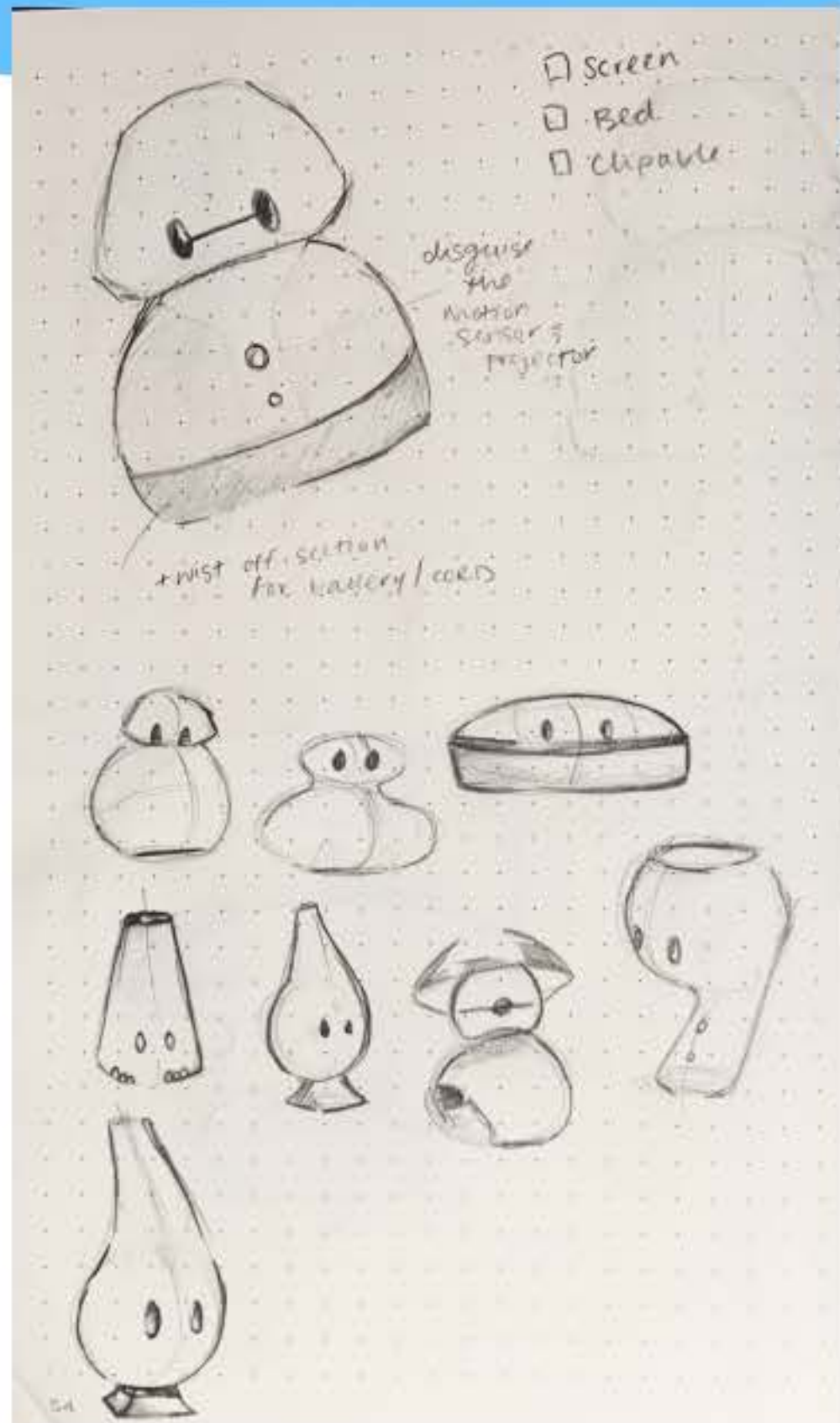
# MO Exploration Of Form

## Rationale

A physical presence in the emergency room may comfort patients who are alone.

Social robots can be more approachable for patients.

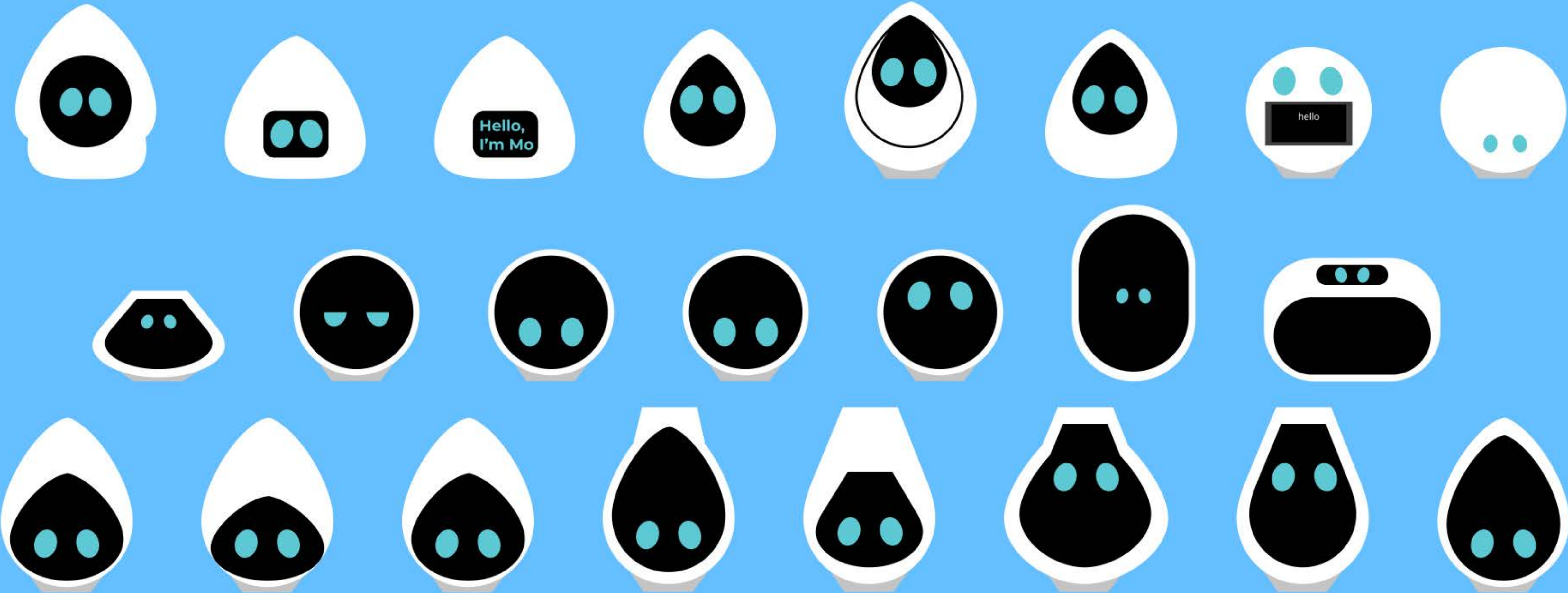
A social robot's positive interaction with a patient will create positive correlation and lasting impact





# Ideation **Physical Form**

By taking into account the results from the forms perception suvey, here are some ideation forms we came up with...





# Ideation **Mobile App**

REMDi†

## **Visits**

Progress Tracker

Ability to see past visits, issues and medications

Treatment Plan

## **Health**

Lab and Test results

Medication Lists

Medical History

Treatment Plan

Medication functions

## **Profile**

Clinical Summary

Secure (HIPAA compliant) messaging

Ability to add family and/or PCP (Primary Care Physician) to your treatment plan and progress tracking

Patient profile

Treatment Plan

## **Learn**

Patient Education Material

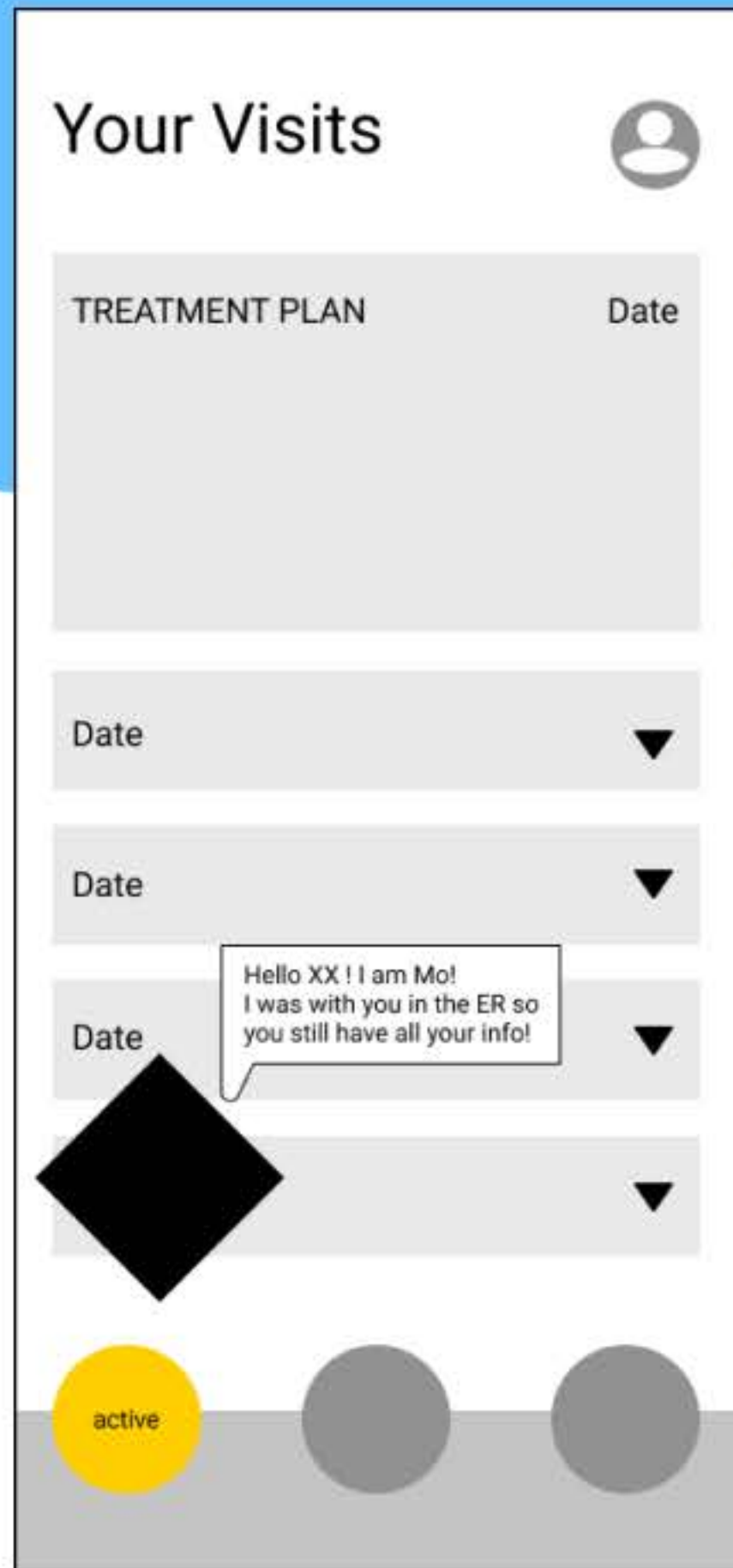
Lab and test description and purpose

Medication functions

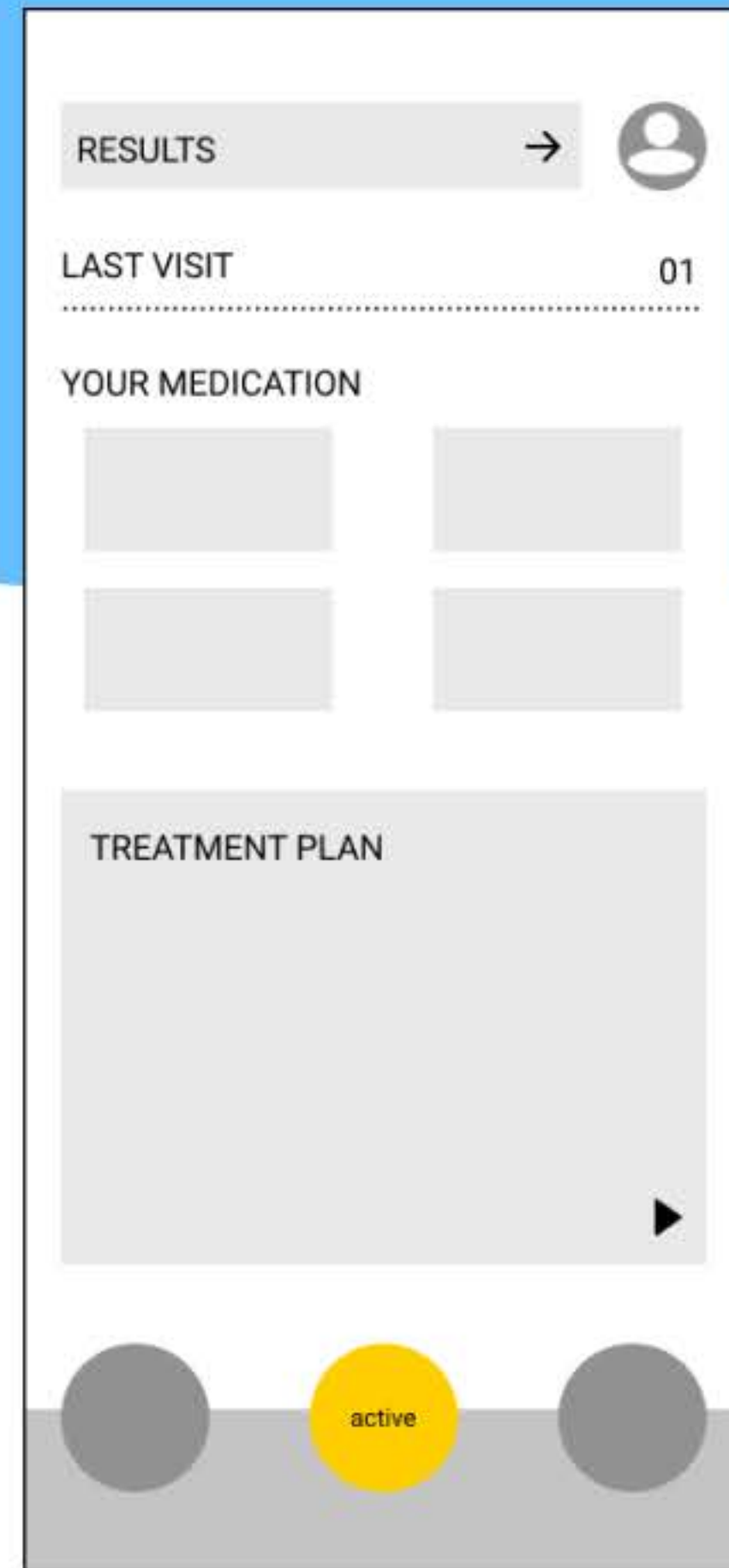


# Mobile App Wireframes

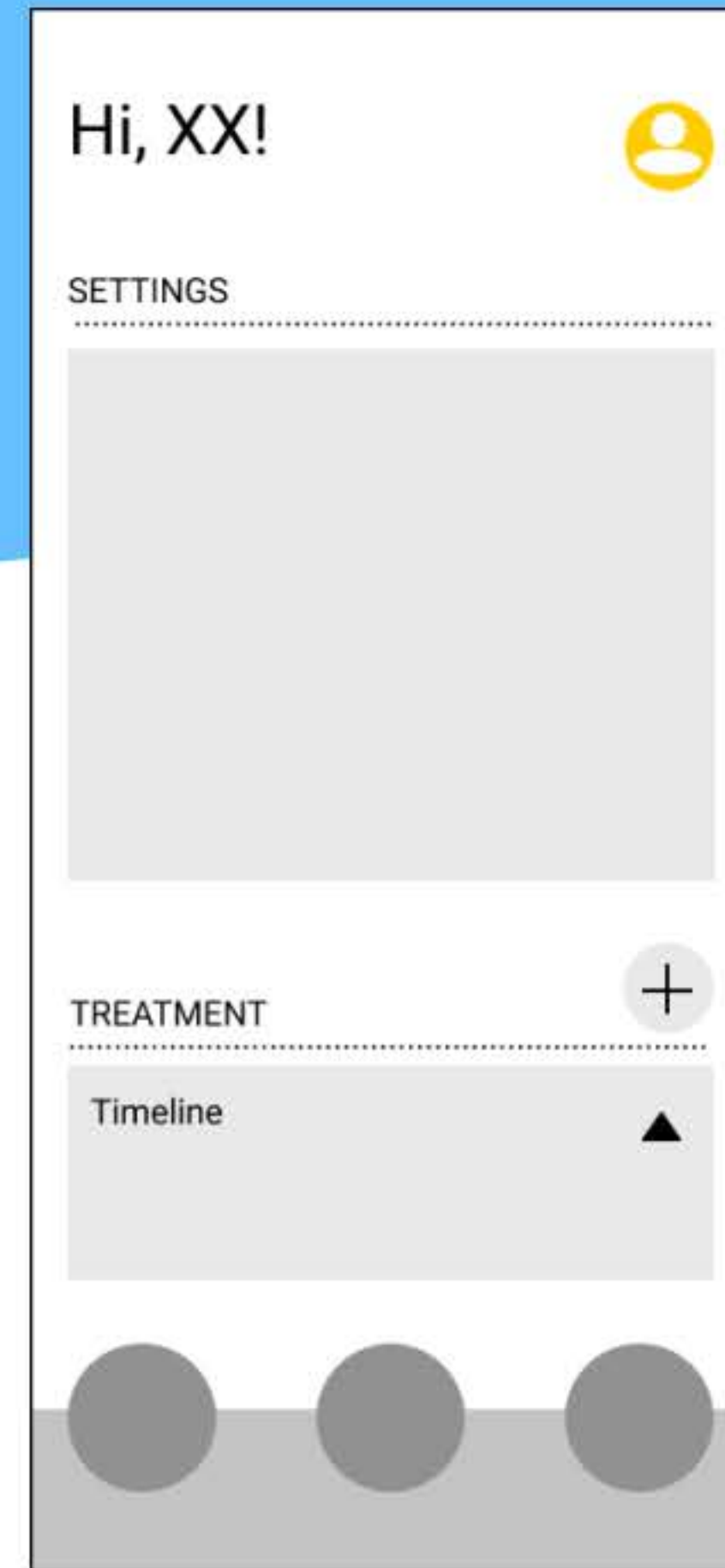
REMDi+



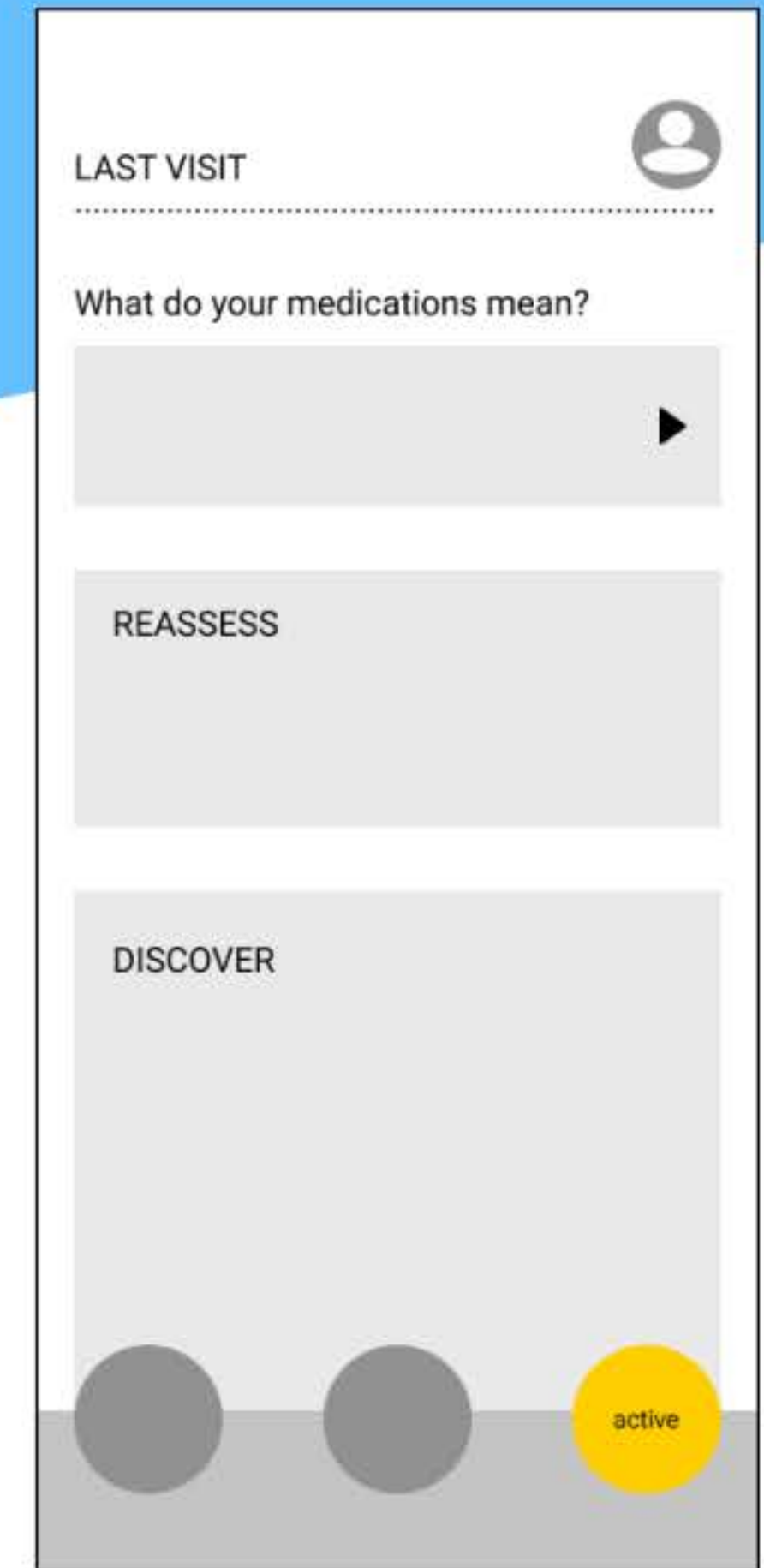
Visits



Health



Profile



Learn



# Interaction Map

## Legend



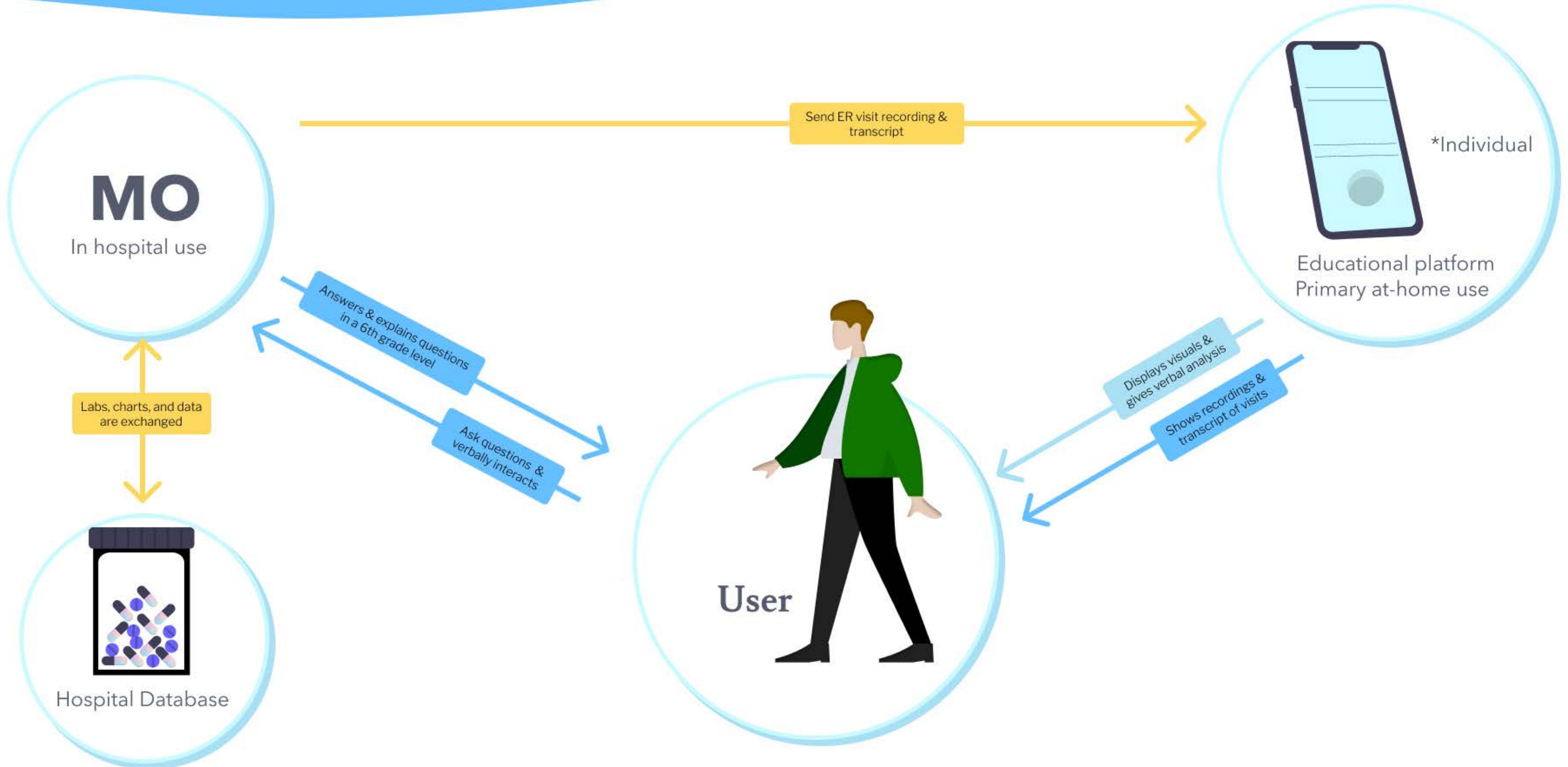
Verbal



Backend

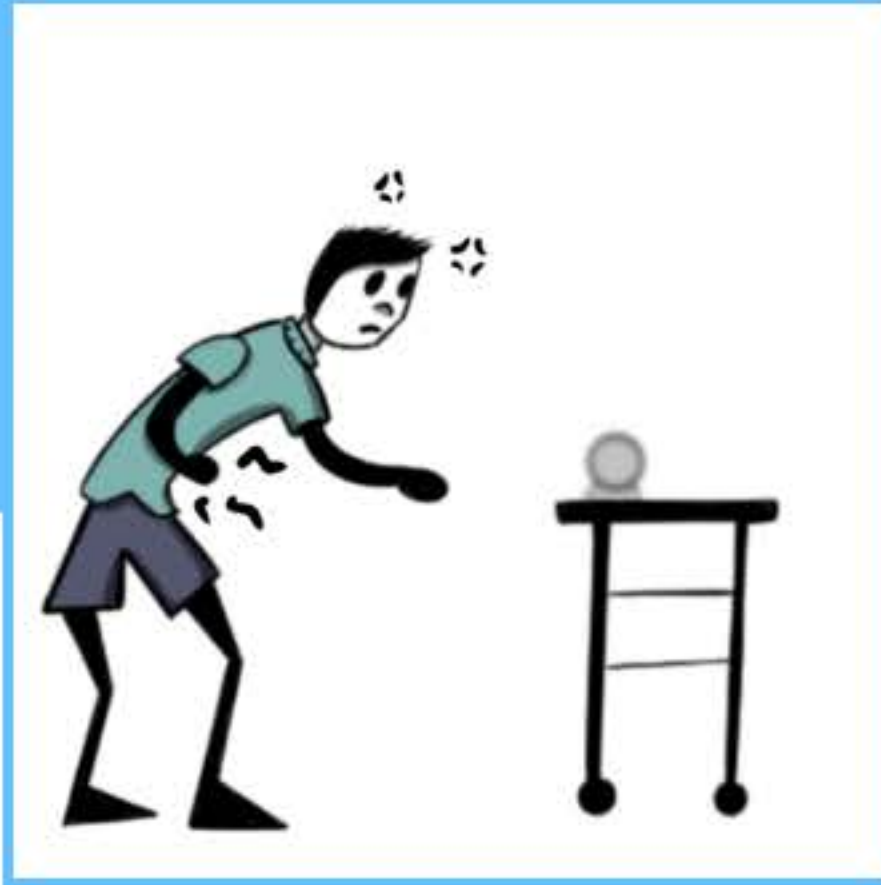


Visual



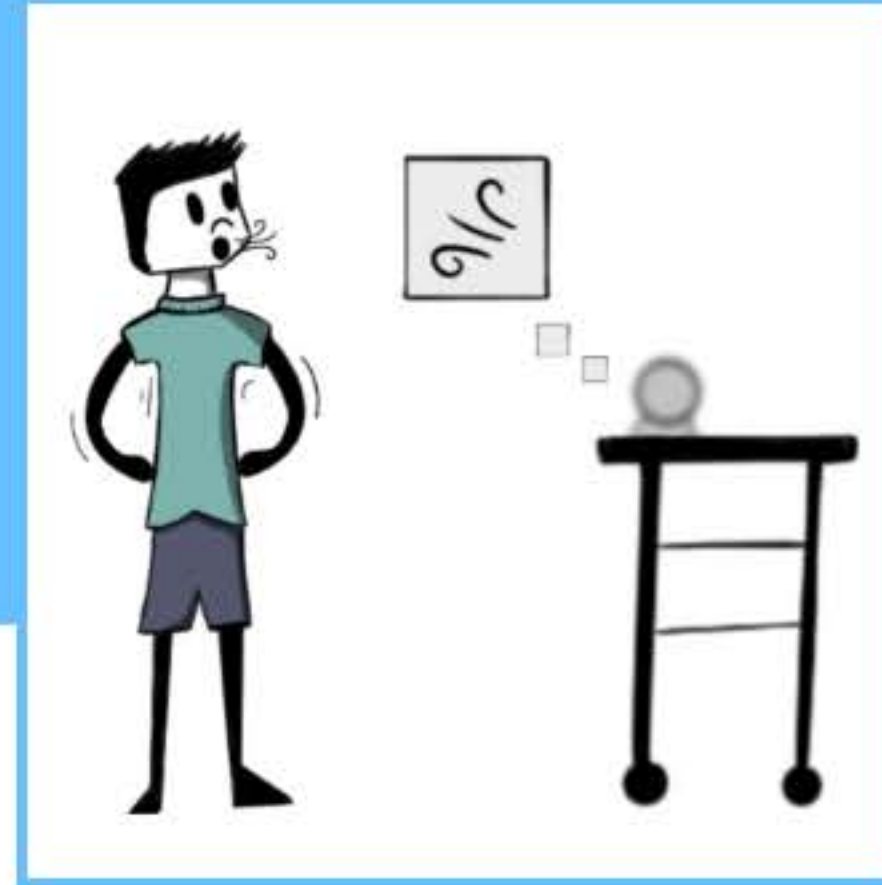


1



User goes to the ER because of sharp abdominal pain. In his room he notices MO.

2



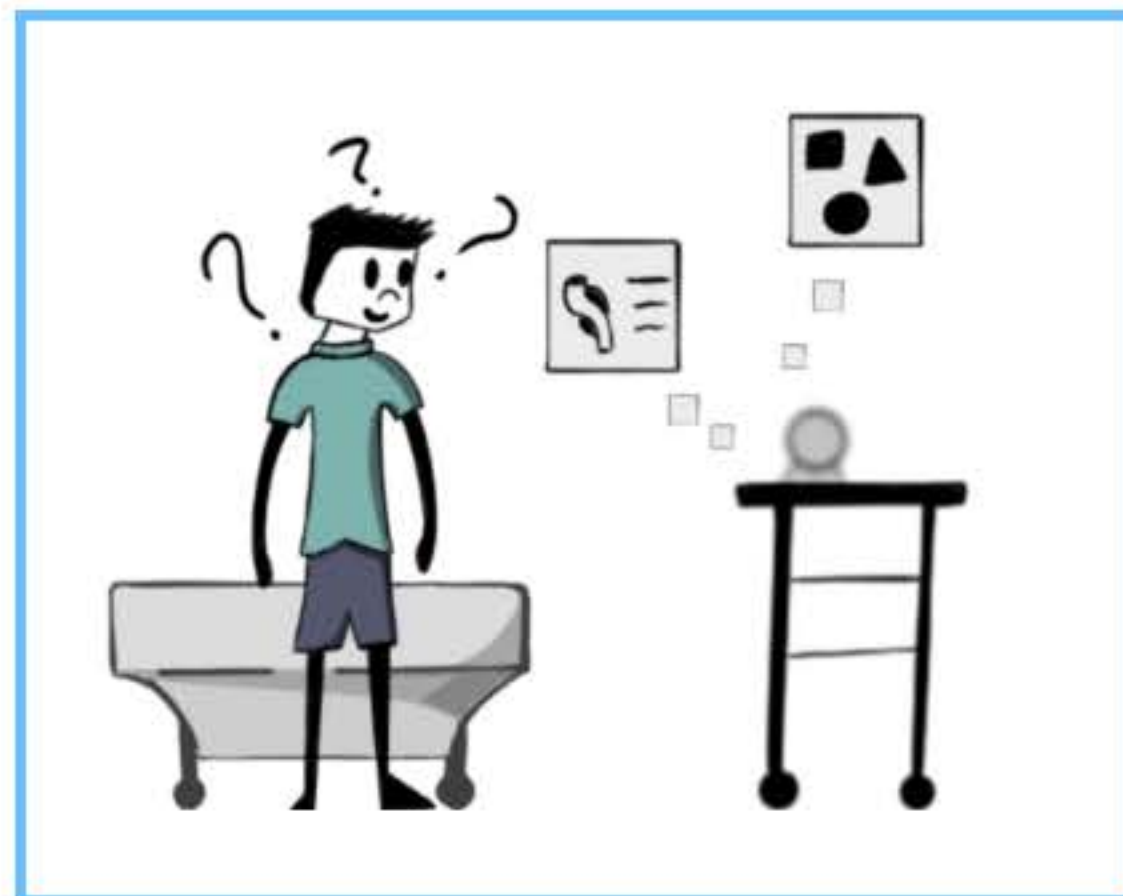
User asks MO to help with his pain, so MO guides User through a breathing exercise.

3



After User relaxes, he asks MO what might be wrong with him. MO lists the common causes of abdominal pain.

4



User receives a diagnosis of pancreatitis from his doctor. He isn't sure what this means, but asks MO and MO helps him understand with an explanation and visuals.

5



Before leaving the hospital, User downloads the MO companion app. It has a record of the conversations that he and MO had while at the hospital and allows him to continue to ask questions regarding his aftercare instructions from home.



# Isaac Schrewber

**Health Literacy** Basic  
**Occupation** Store Manager  
**Home** Cumming, GA



Isaac is beginning to worry that his lack of knowledge about his health is negatively impacting his decisions when it comes to taking care of his body. He doesn't understand most of what his doctors tell him and commonly makes mistakes when taking his medication which leads increasing health issues. Isaac wants to become more knowledgeable about his health, medications and communicate more effectively with his needs to his doctor.

## Current Feelings

Judged

Stressed

Curious

Tired

Anxious

“**My doctor speaks to me like I understand what she's saying but I don't, and it just makes me feel stupid.**”

## Needs

- To understand how to take his medication as the instructions are difficult to understand at times.
- Become more knowledgeable about his needs when it comes to his physical health.

## Frustrations

- Often leaves the doctor with more questions than in the beginning.
- Dislikes not knowing where he is in the ER process.

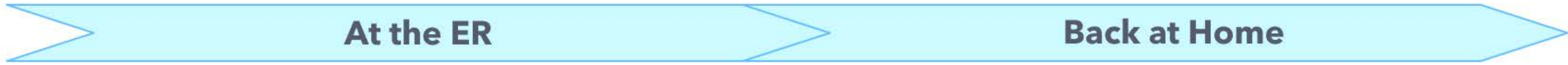


Isaac has been feeling pain in his foot for the last two weeks. He decides to head the ER after prolonged pain for help.

-  Isaac Schrewber
-  Cumming, GA
-  Store Manager

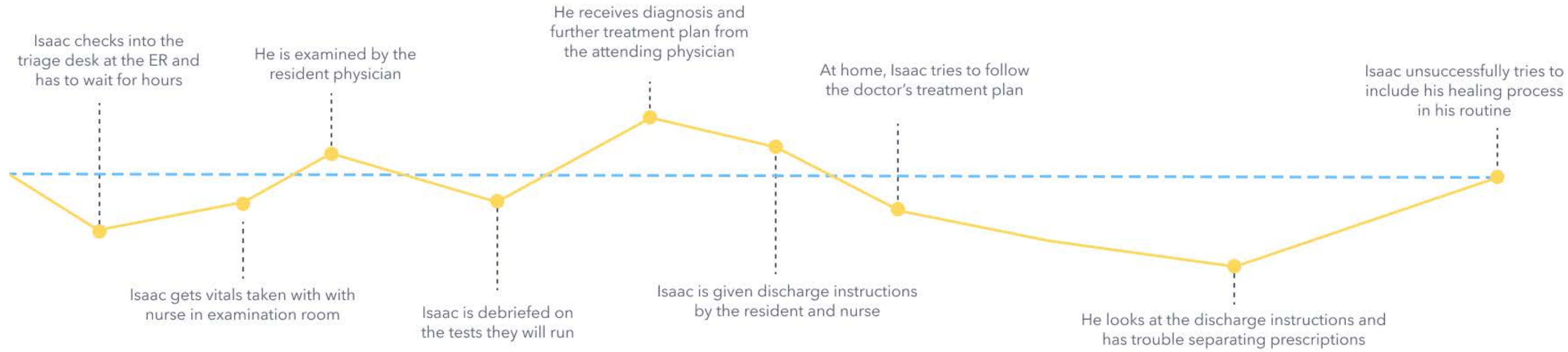


Stages



Satisfaction (+)

Touchpoints & Action



Dissatisfaction (-)

Emotions

Isaac is annoyed with the prolonged wait time.	Isaac is confused and unsure what tests the doctor is discussing, but he is afraid to ask.	Isaac is discharged from the hospital with a diagnosis and a prescription for medication.	Arriving home bewildered, Isaac has trouble remembering what the doctor said.	He has trouble fully comprehending the lengthy discharge instructions and mixes up the medications.	After two weeks, Isaac is not able to prioritize his health and forgets to take his medicine.
--	--	---	---	---	---

Opportunities

Isaac is unsure what is happening to him.	Isaac can be informed about the possible solutions the doctor has for him.	Isaac feels unsatisfied with his experience because he is unsure what happened to him and what his results mean.	Isaac could be reminded of his session with his doctor.	Isaac has difficulty recalling specific terms the doctor used as well as the protocol he assigned.	He has a lack of knowledge for how he needs to consider his health and its importance.
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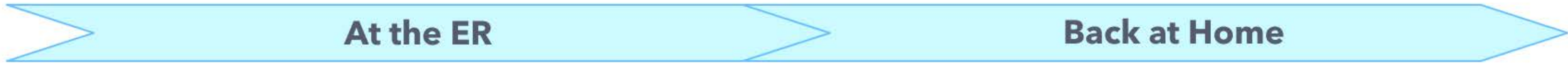
# Combination of Isaac working with MO



+

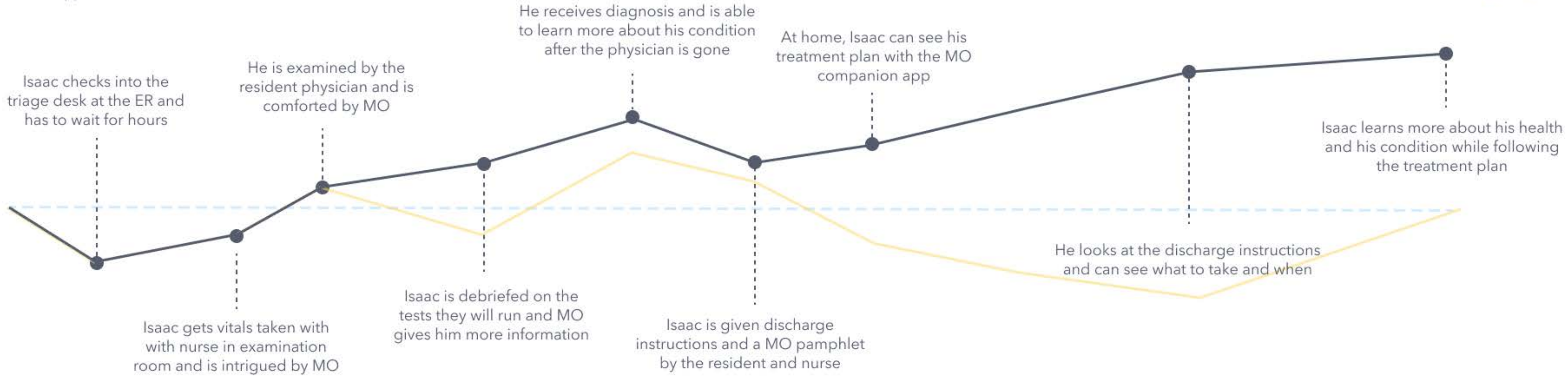


Stages



Satisfaction (+)

Touchpoints & Action



Dissatisfaction (-)

Emotions

Isaac is annoyed with the prolonged wait time.	Isaac is confused and unsure what tests the doctor is discussing, but he is afraid to ask for clarification.	Isaac is discharged from the hospital with a diagnosis and a prescription for medication.	Arriving home bewildered, Isaac has trouble remembering what the doctor said.	He has trouble fully comprehending the lengthy discharge instructions and mixes up the medications.	After two weeks, Isaac is not able to prioritize his health and forgets to take his medicine.
--	--	---	---	---	---

Opportunities

Isaac is unsure what is happening to him.	Isaac is supported by MO and receives more clarity relating to his medical situation.	Isaac feels unsatisfied with his experience because he is unsure what happened to him and what his results mean.	Isaac remembers MO said he would help him with his treatment plan, so he downloads the Mo app.	MO guides Isaac through his treatment plan and sets him up with notifications from onboarding.	Isaac is reminded of checking in with his set treatment plan everyday and sets up his follow-up.
---	---	--	--	--	--



The



Medical Network

THE  
**evaluation**

Initial User Testing

First Iteration

Second Iteration

Third Iteration





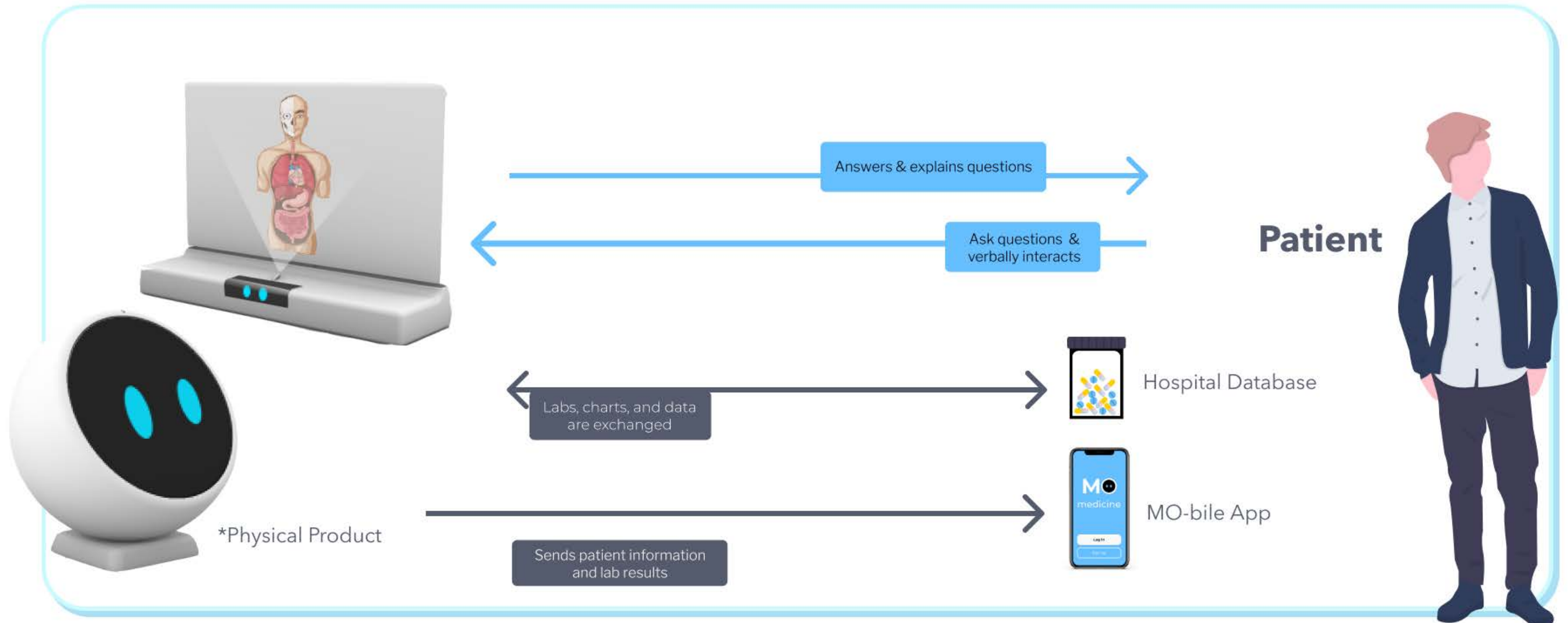
first iteration



# MO Interaction: During Hospital Visit

Legend

- Verbal
- Visual
- Backend

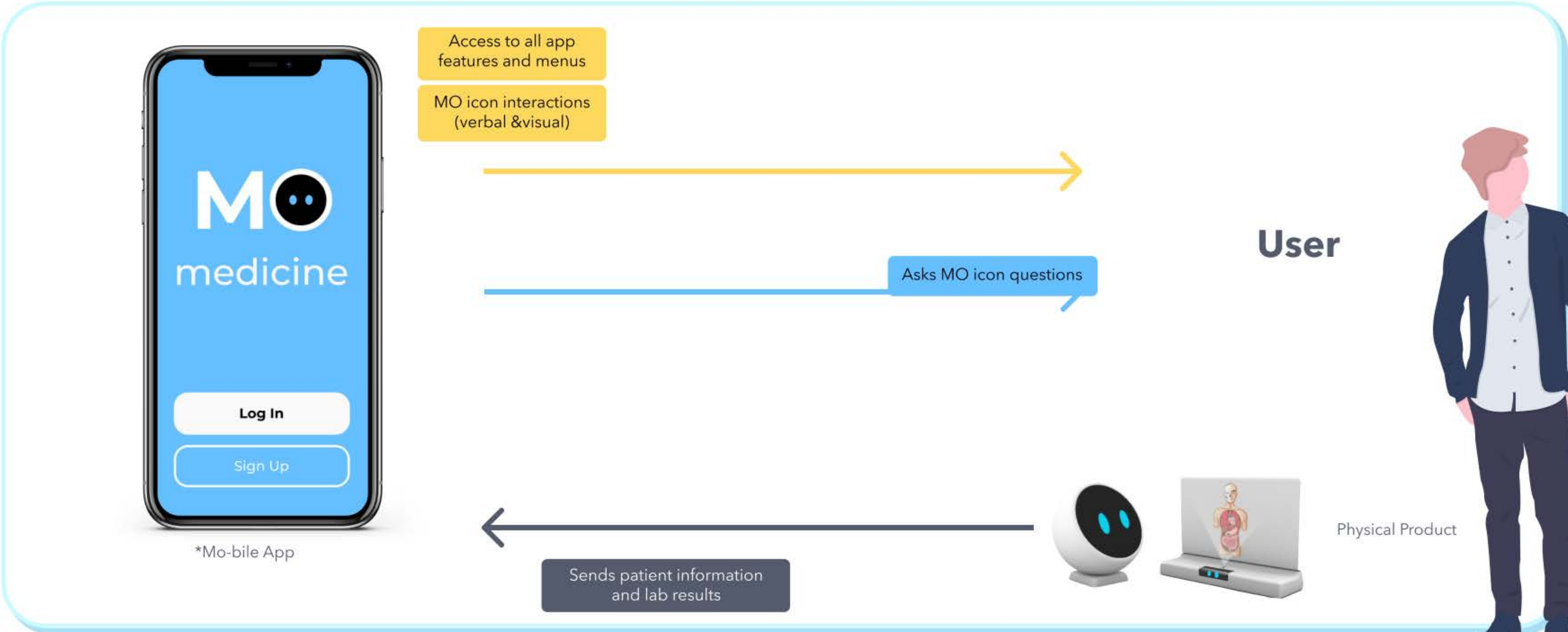




# MO Interaction: At Home Use

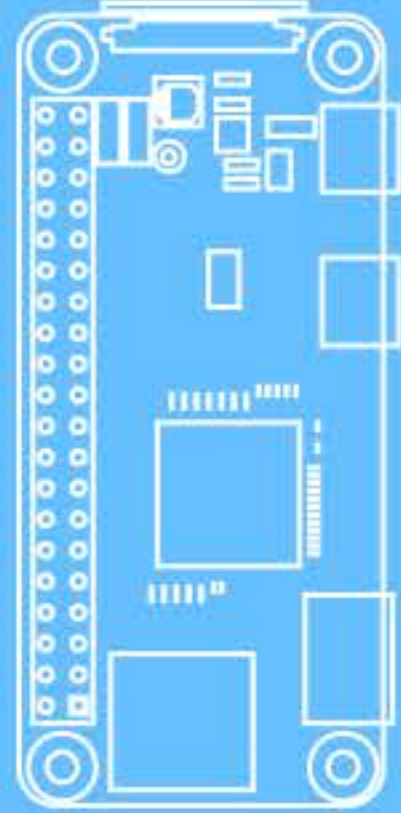
Legend

- Verbal
- Visual
- Backend





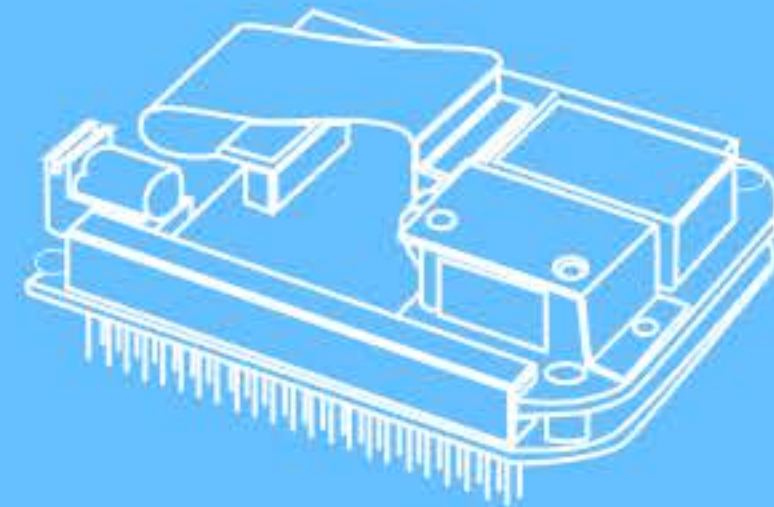
# Initial **Components & Functions**



Raspberry Pi 4 / Raspberry Pi Zero W  
**Arduino is incapable of projecting high quality images**

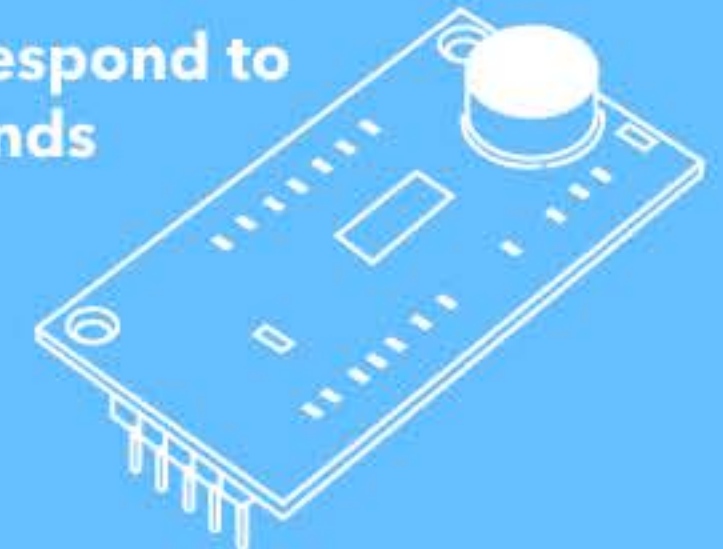


LCD Display  
**Display MO's eyes and encourage interaction**



DLP Pico Projector  
**Projector allows MO to display visuals to the user on any surface**

Voice Recognition Module or Software  
**Train MO to respond to voice commands**



Infrared or Lidar Camera  
**Detect when user enters the room**



Speaker  
**Allow MO VUI (voice ui) to respond to user inputs**



INITIAL MO

# physical form

MO is a bedside companion that interacts with patients by speaking with them, comforting them, and answering questions they might have through verbal explanations or visuals.

- Projector display for visuals
- LCD display for MO's eyes
- Microphone & Speaker for verbal interaction





# Sensory Cue Kit for Form Factors

Users evaluated MO's physical form in a simulated emergency room scenario. They expressed their emotions and thoughts regarding each form as well as ideas for improvement.







**“MO’s face makes me feel comfortable and less anxious.”**

**“I would want a bigger display to see the visuals.”**

**“I would trust MO more if I saw a nurse or doctor using it.”**



# Mobile Platform

Patients can learn more about basic health concepts and how it relates to their own body, by offering a virtual companion that is with you every step of the medical journey, inside and outside of the Emergency Room.



*Daily Treatment plans & Tracking*

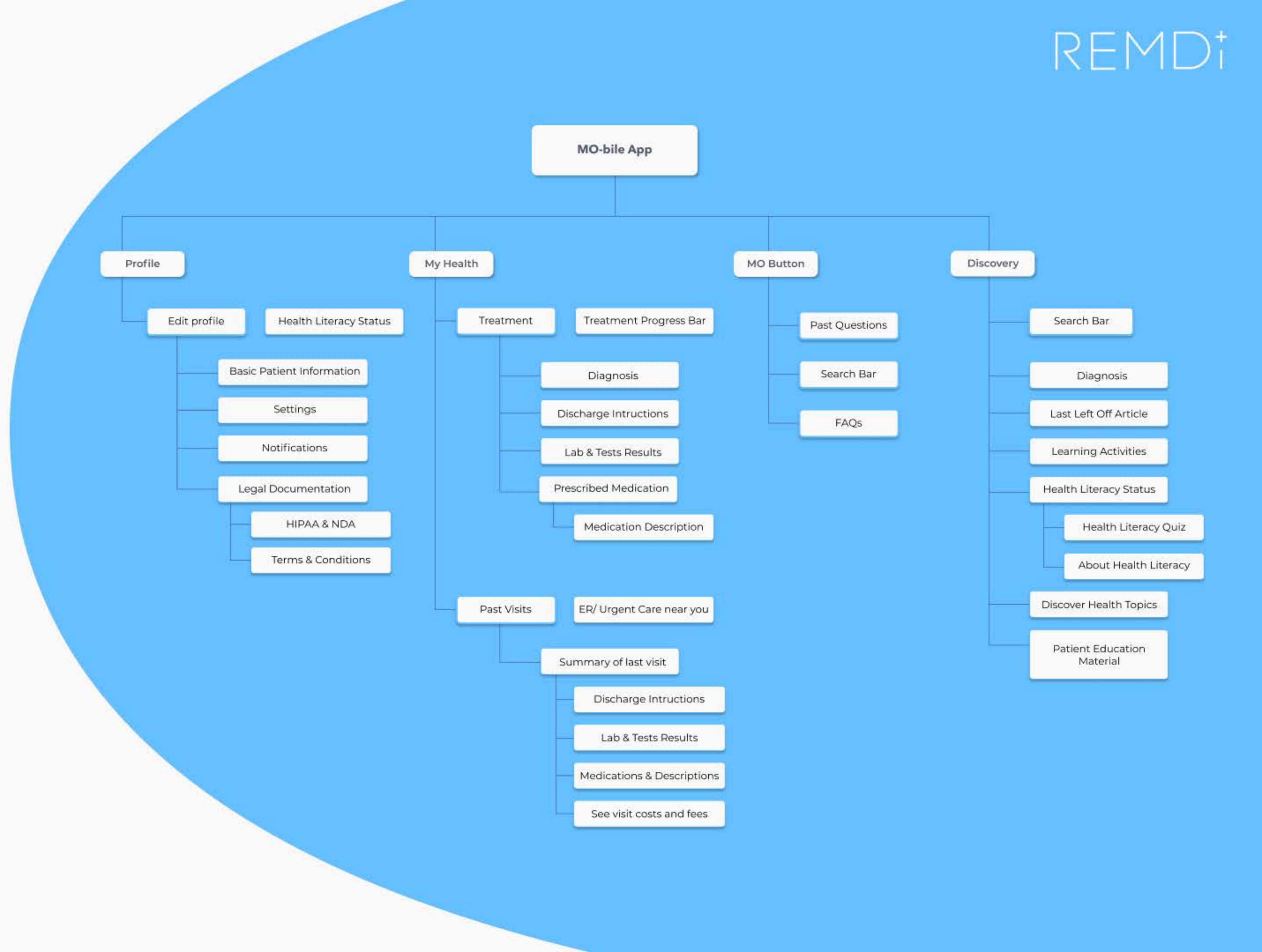
*Visit Summaries*

*Records of MO questions & responses*



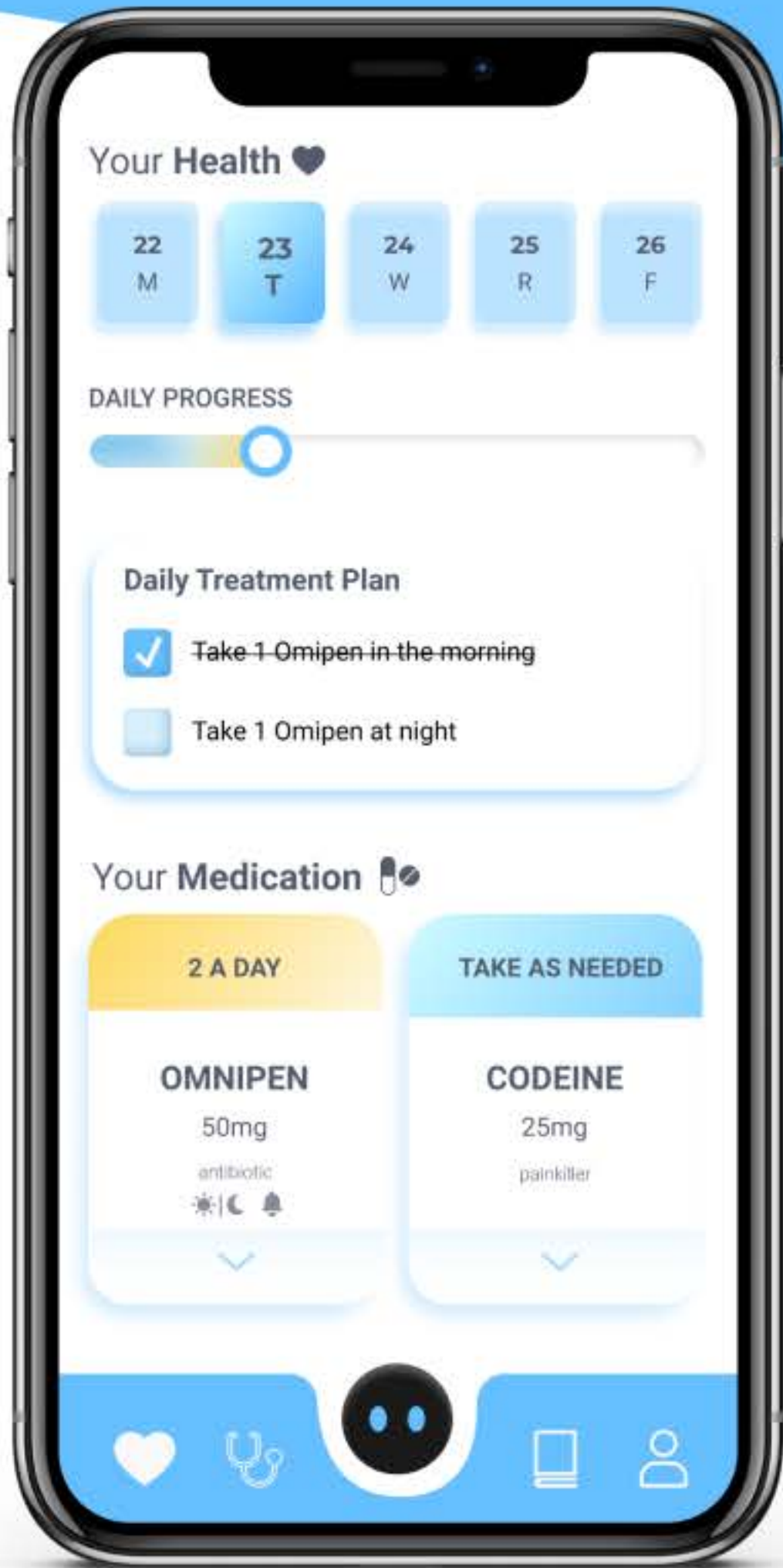
# Information Architecture

V1



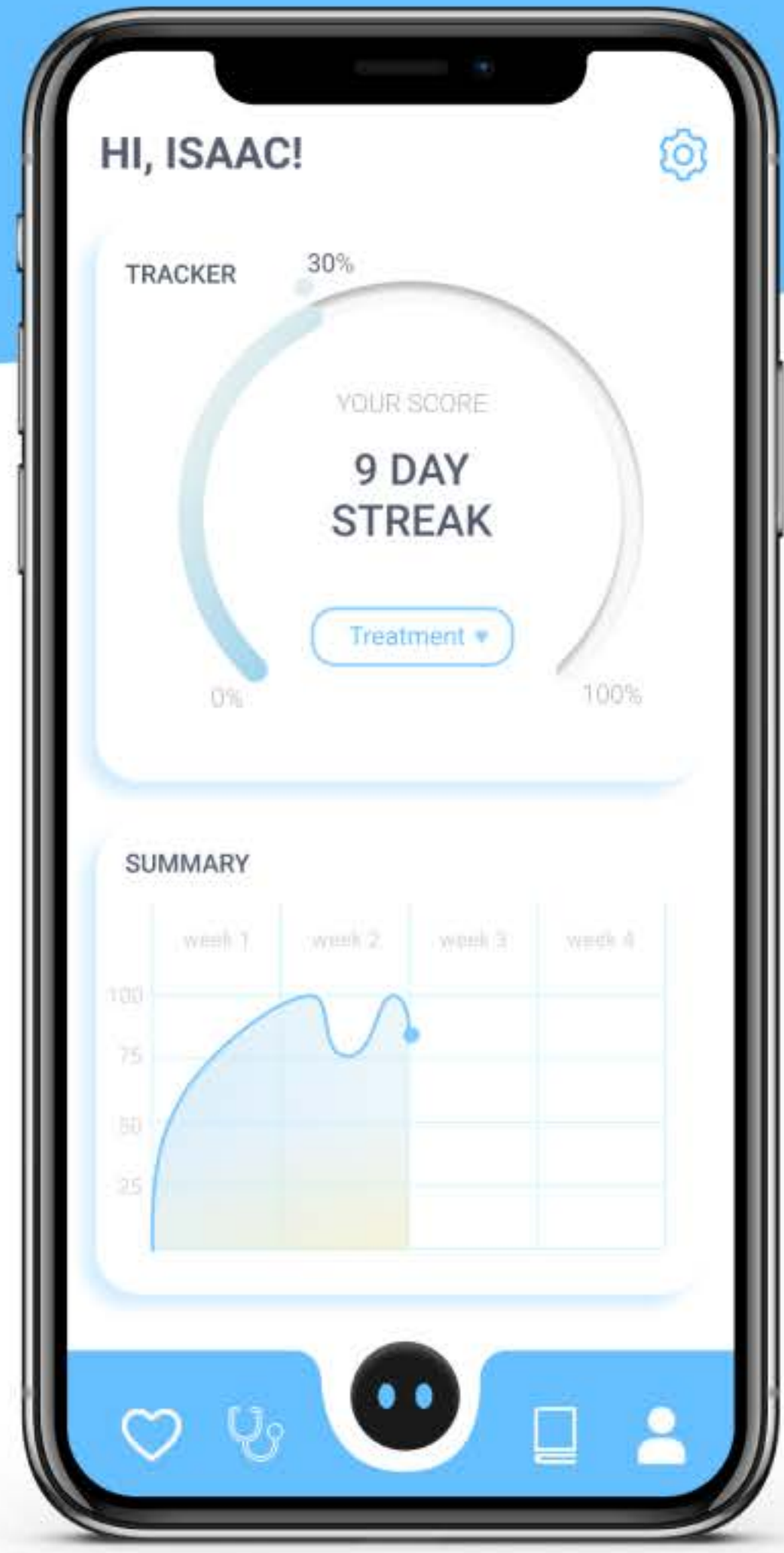


# Mobile App Features



**Keep track of your daily treatment plan and current medications.**

- See medication already taken & medication that needs to be taken
- Stay motivated & on track with your treatment plan

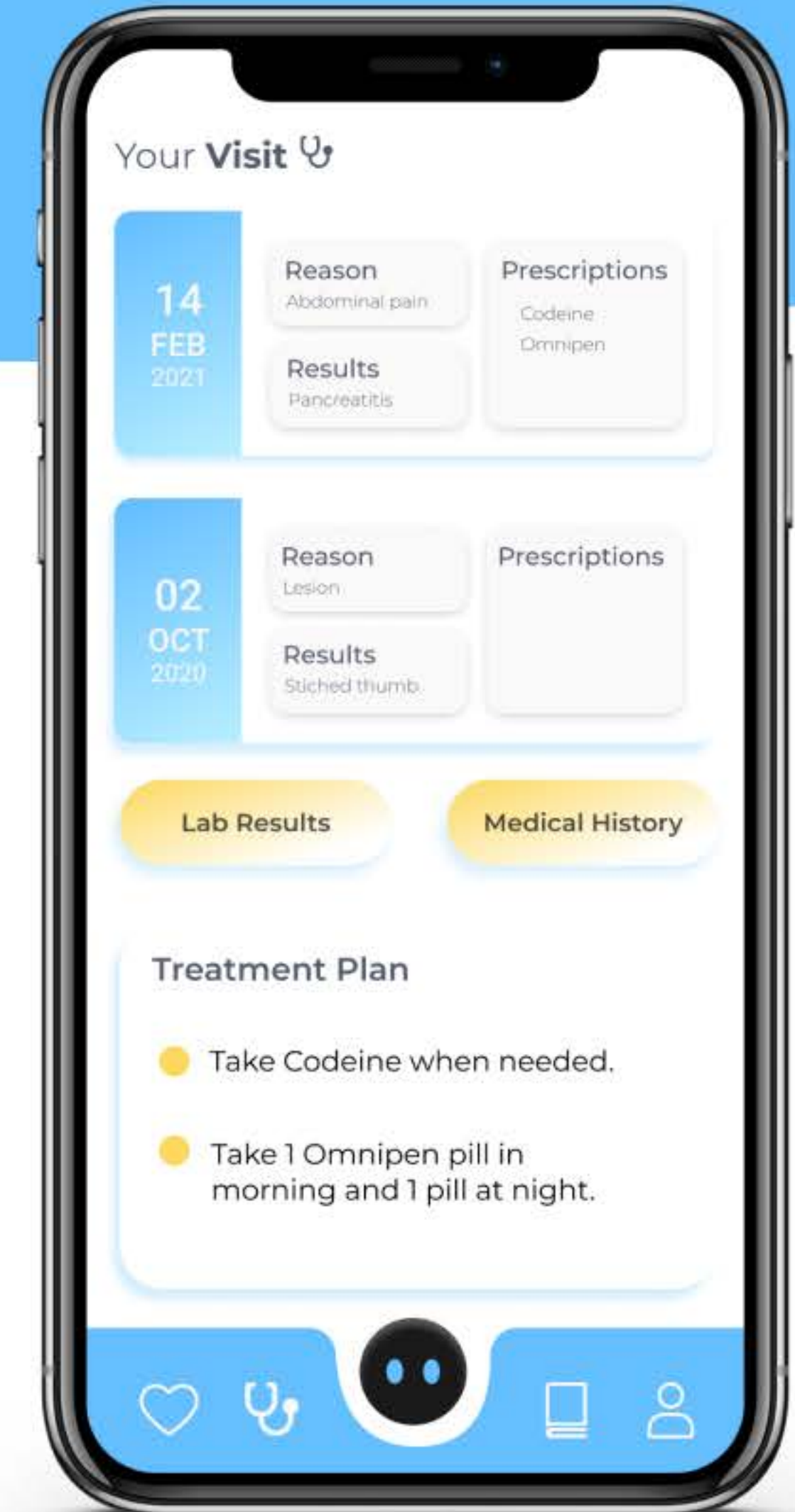




# Mobile App **Features**

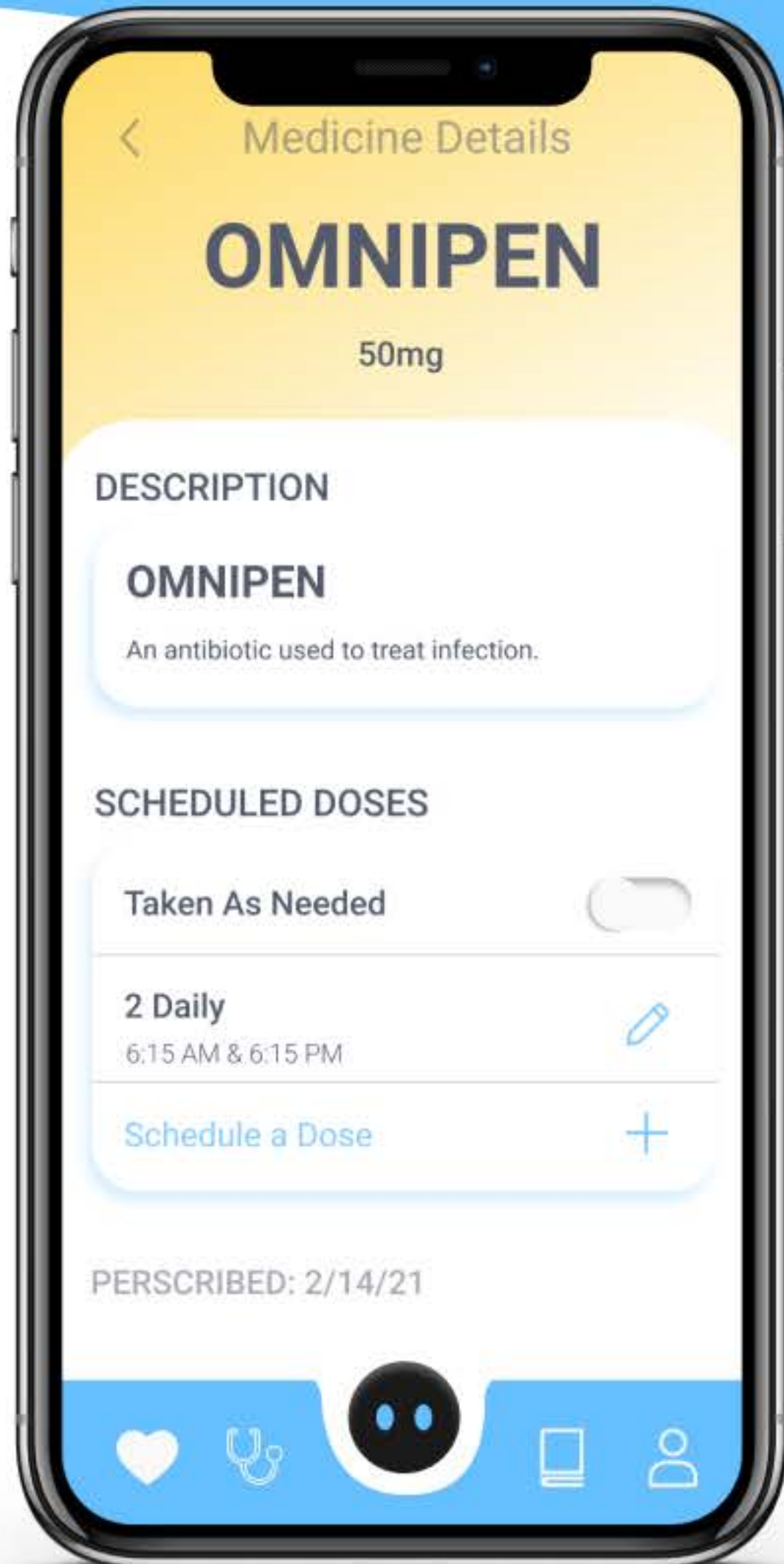
**Look back on your past visits and overall treatment plan assigned by your clinician.**

- Detailed information on all past visits
- Lab & Test descriptions and results
- View medical history from ER charts



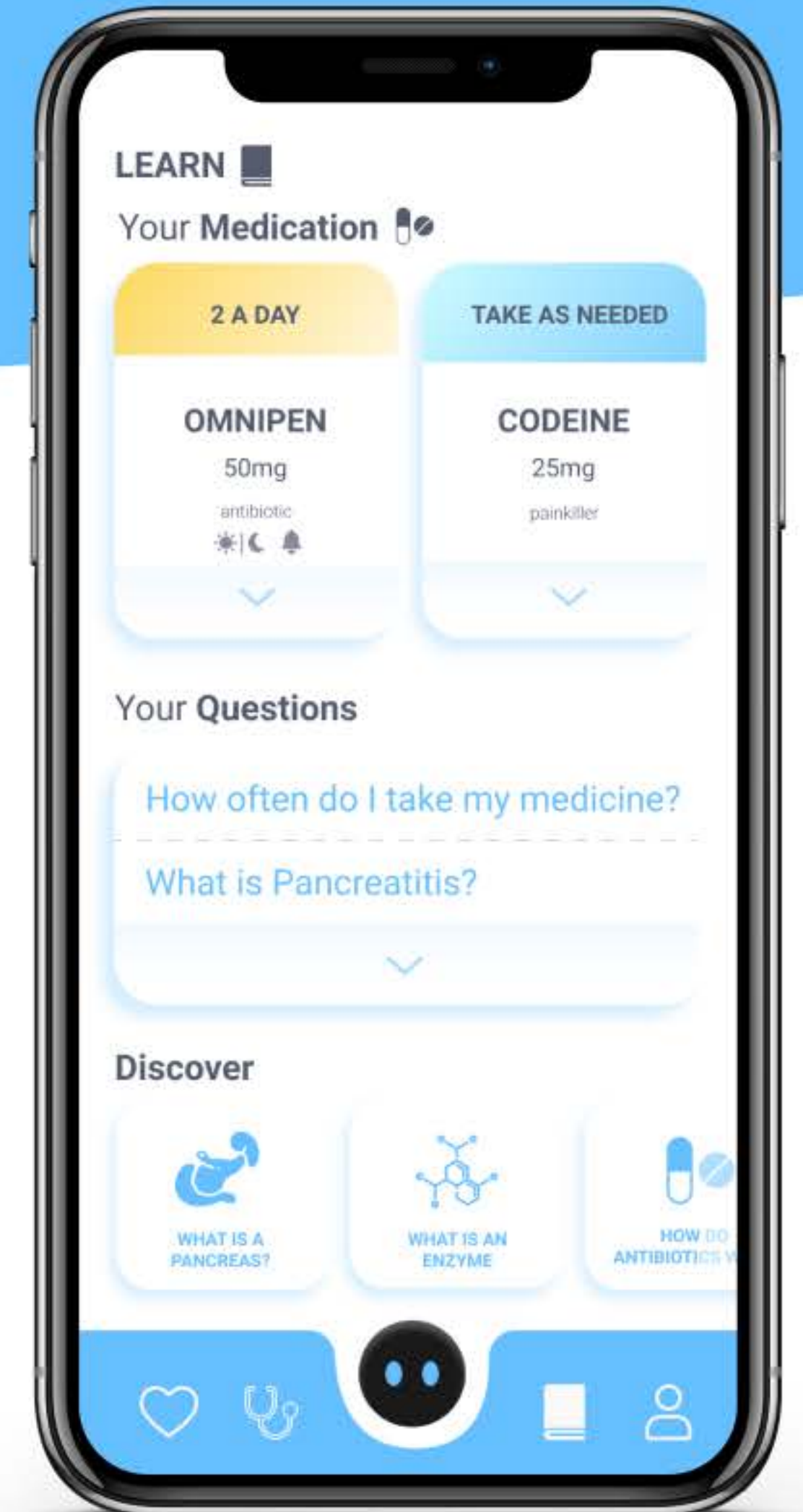


# Mobile App Features



**Learn about your medication, concepts that apply to you, and look back on your previous questions with MO.**

- Detailed information on all past MO interactions
- Opportunity to expand knowledge on related topics
- Medication purpose and functions









# Initial Design

REMDI†



Understand your health







second iteration



INITIAL MO

# in-home app

Patients can learn more about basic health concepts and how it relates to their own body, anywhere they want to. The MO app serves as a companion with you every step of the medical journey, inside and out of the Emergency Room.

- Daily Treatment plans & Tracking
- Visit Summaries
- Records of MO questions & responses
- Activities to learn about relevant health concepts



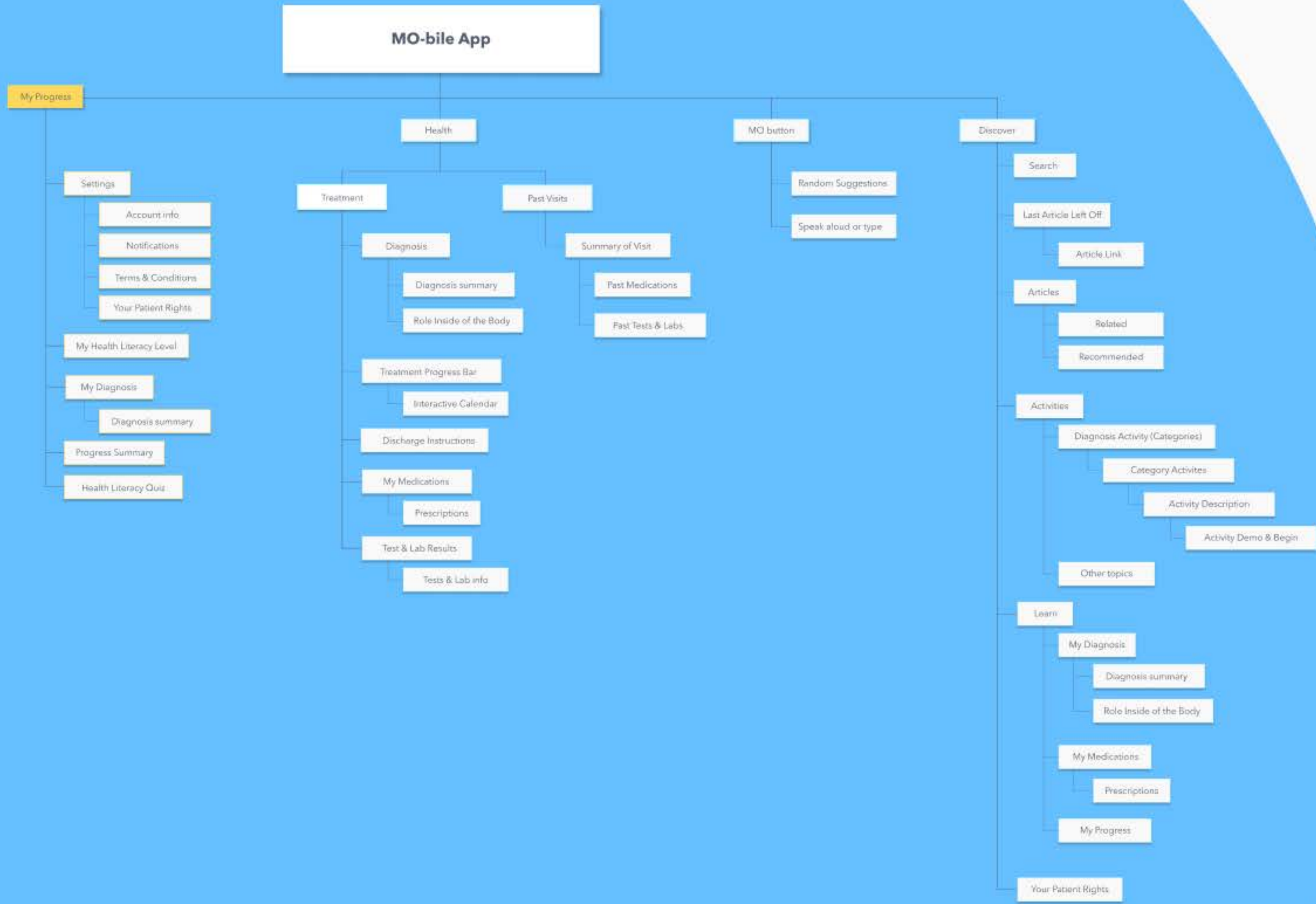


# Card Sorting for In-Home App



6 Females  
3 Males





# Information Architecture

V2



# Card Sorting

## initial navigation

**7** headers

**27** subheaders

**42** descriptions

- MO button**
- Profile**
- Visits**
- Health**
- Learn**
- Explore**
- Empower**

## improved navigation

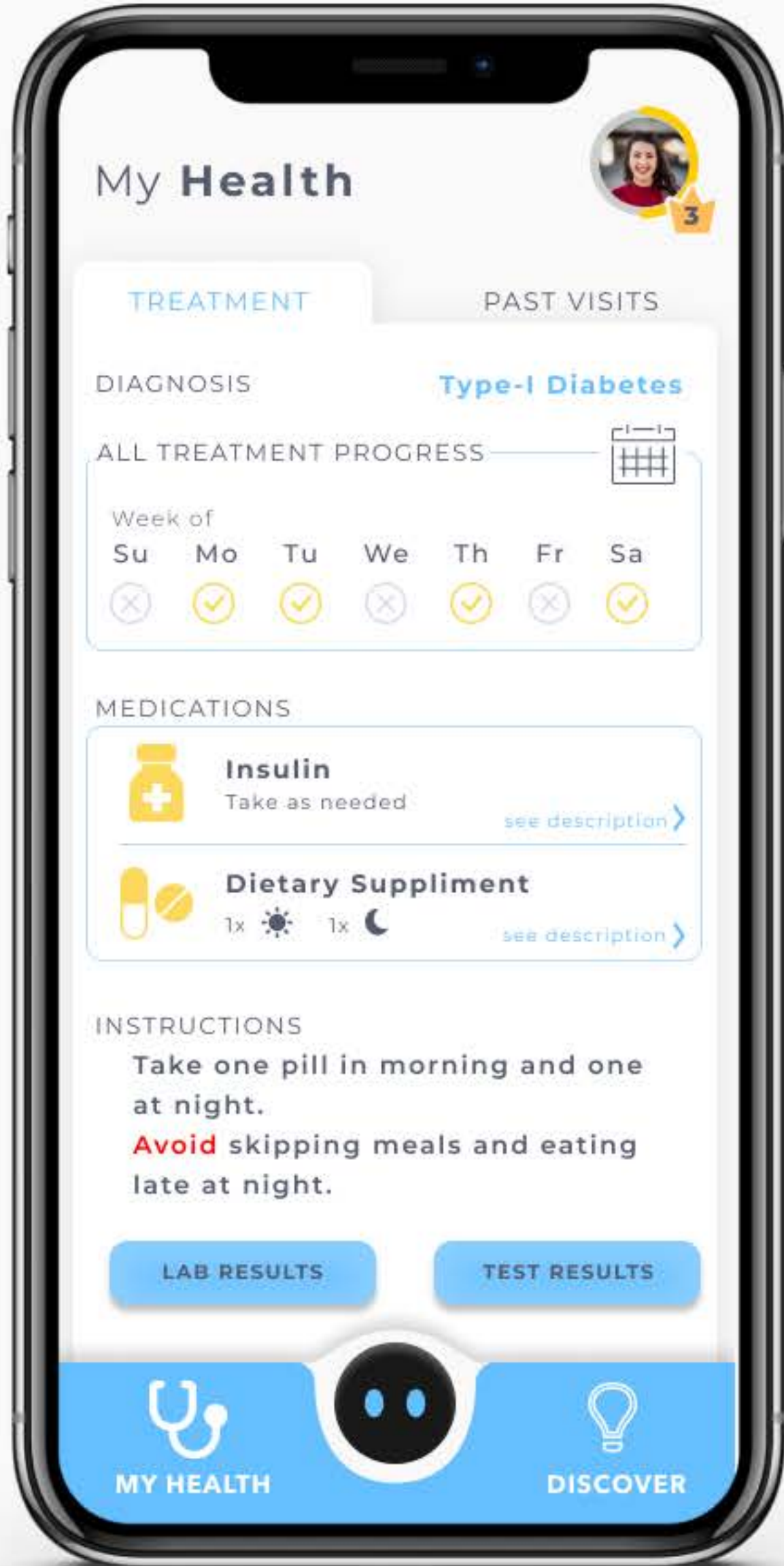
**4** headers

**4-5** subheaders  
\*per individual header

**infinite** descriptions

- MO button**
- Profile**
- My Health**
- Discover**





# Revised **My Health:** Treatment

My Health shows patients their current diagnosis, treatment plan, and past visits.

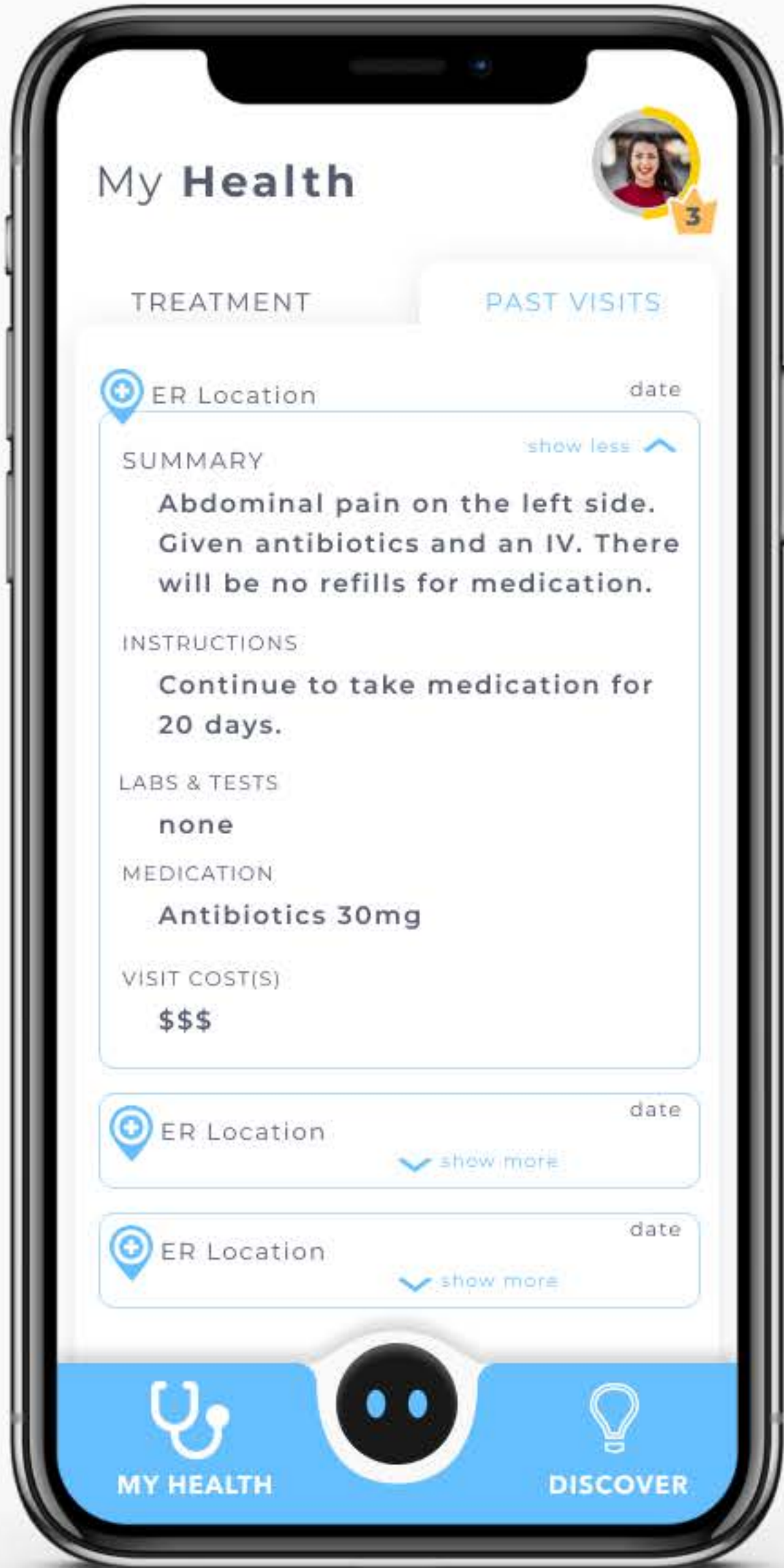
## Changes

My Health and My Visits are **combined.**

Condensed so that the app follows the **mental model** of present and past.







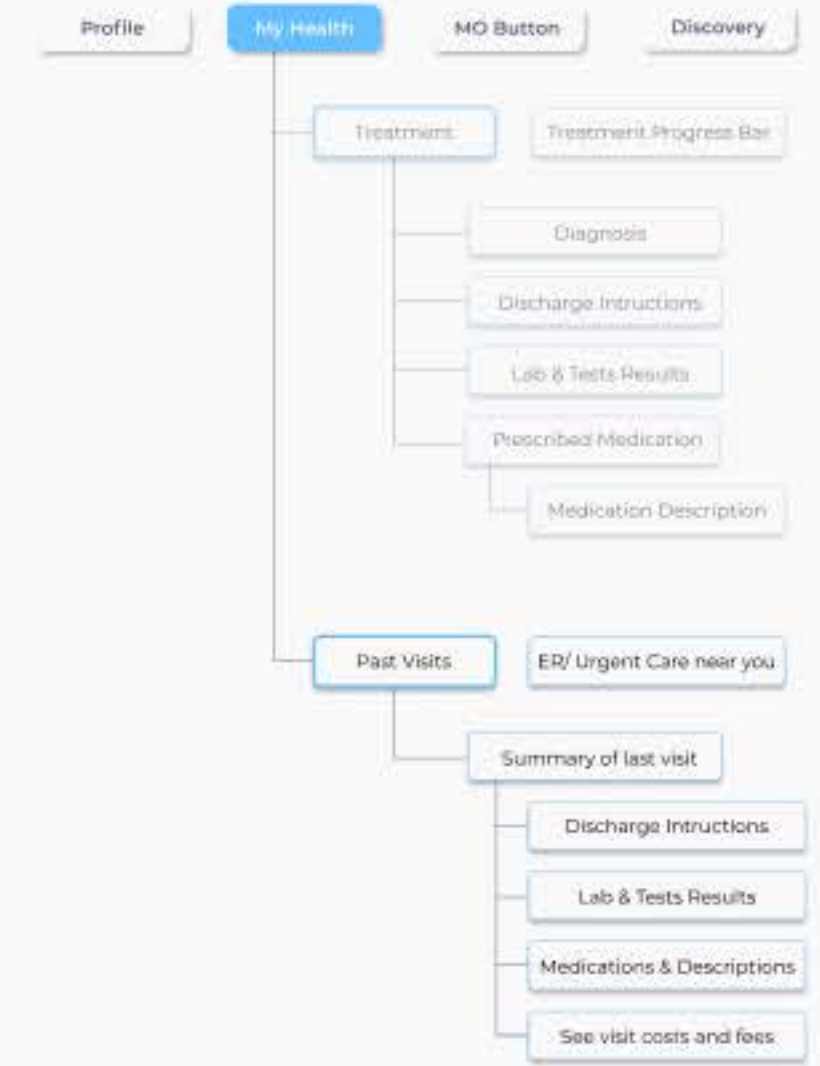
# Revised **My Health:** Visit

My Health shows patients their current diagnosis, treatment plan, and past visits.

## Changes

Condensed into **pull down tabs** so that users can **see all the same information** to their past visit.

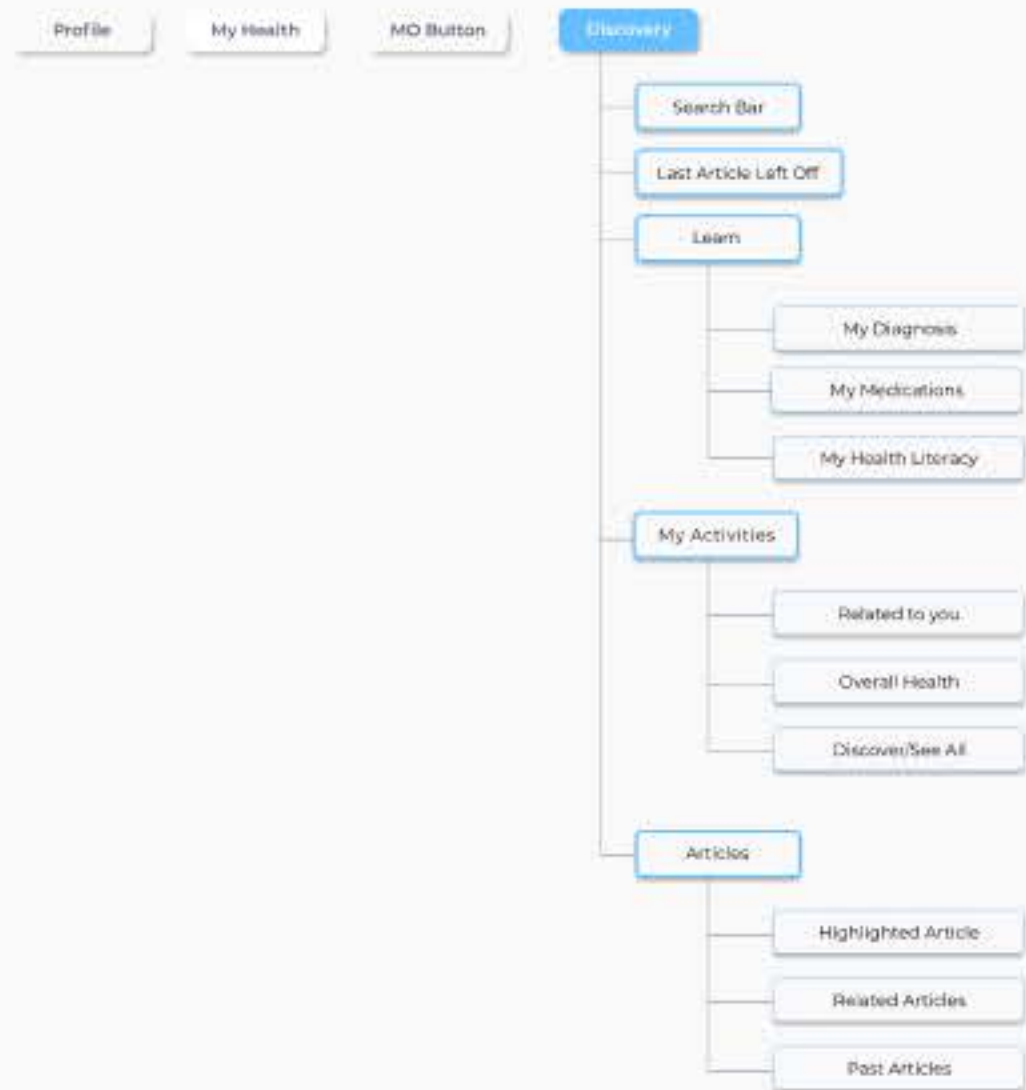
Users want the **same information** for treatment and their past visits.





# Discover

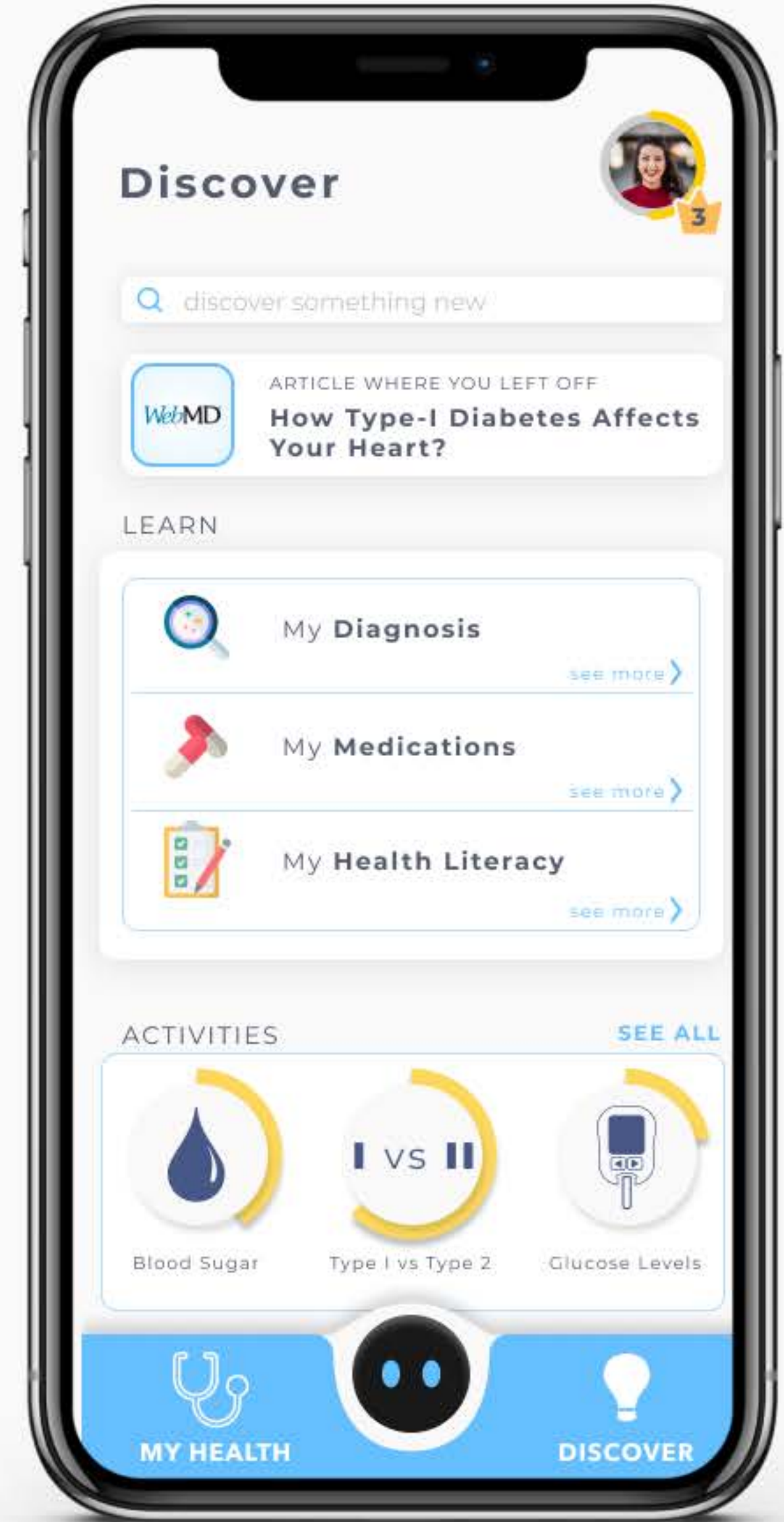
Discover allows patients to take control of all the information regarding their physical health.



## Changes

New features and content were added to facilitate more **user engagement and retention.**

Features are interactive and **related to patient diagnosis.**



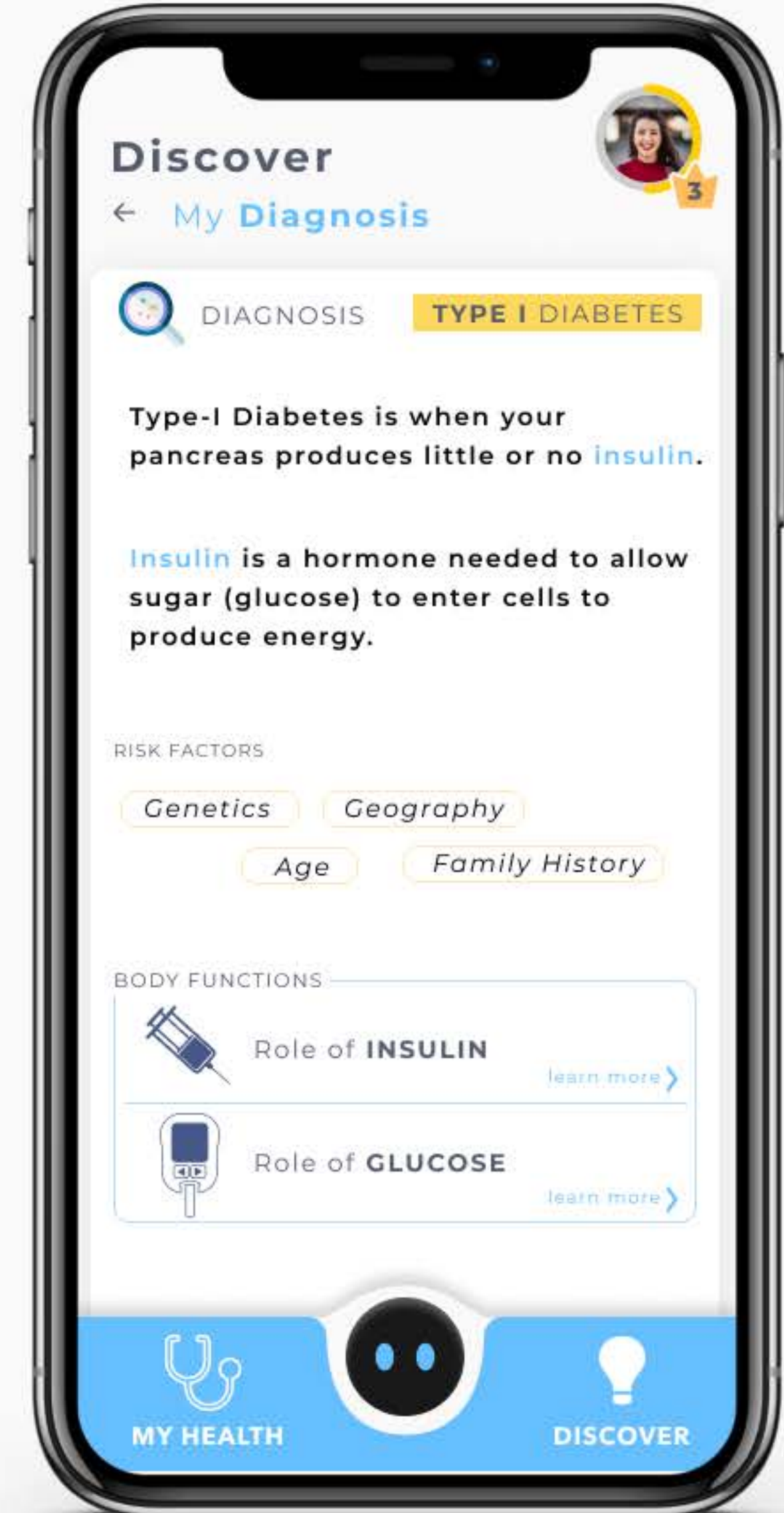
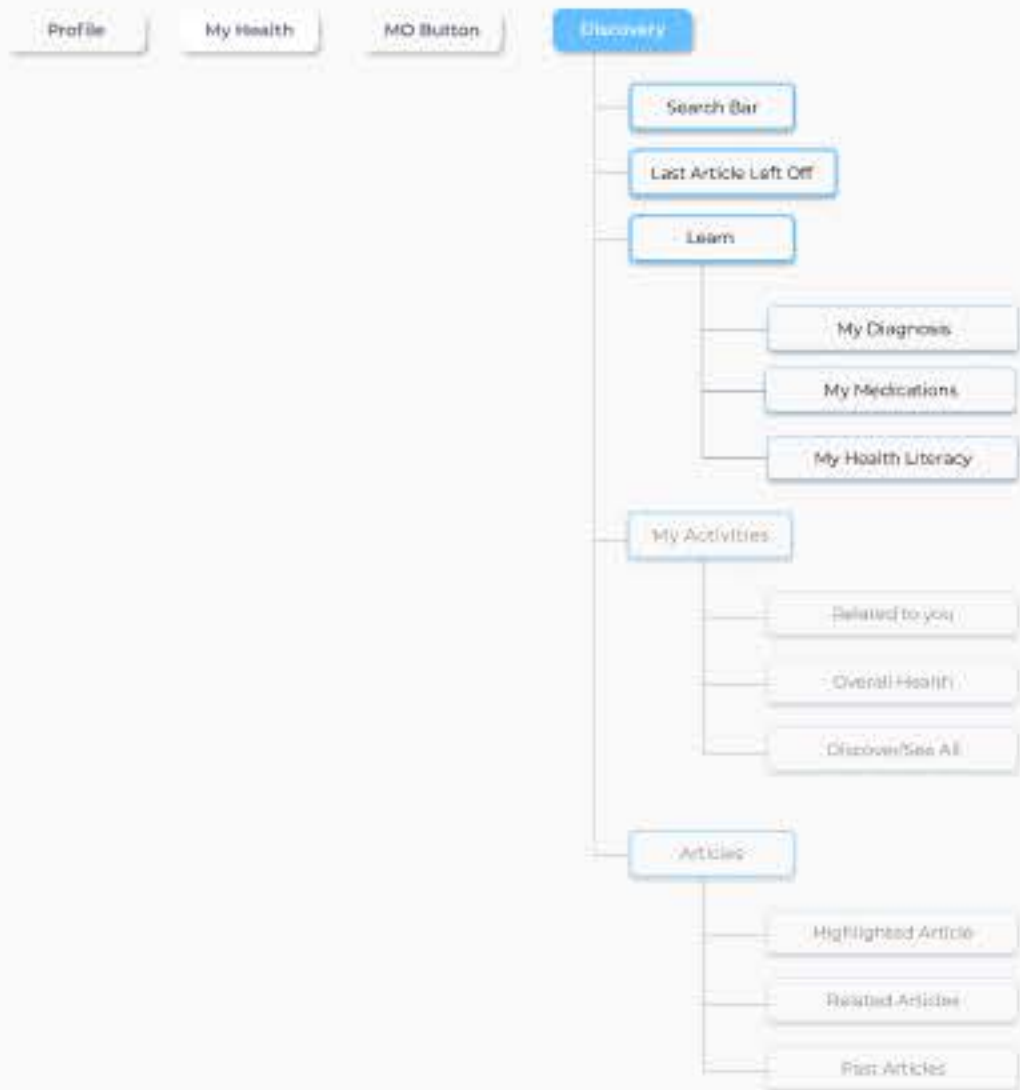


# Discover

Discover allows patients to take control of all the information regarding their physical health.

## Changes

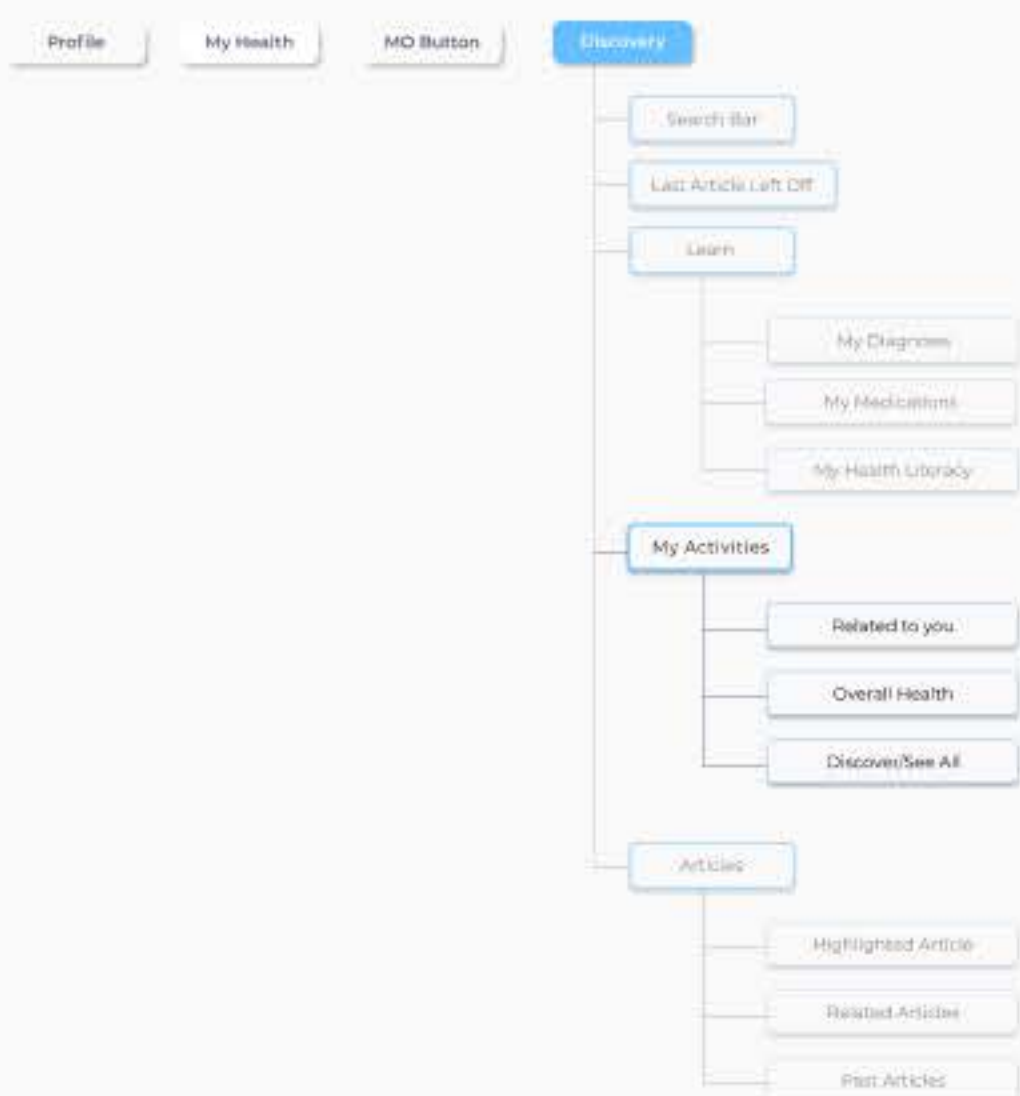
**Expansion** on patient diagnosis and related health concepts.





# Discover

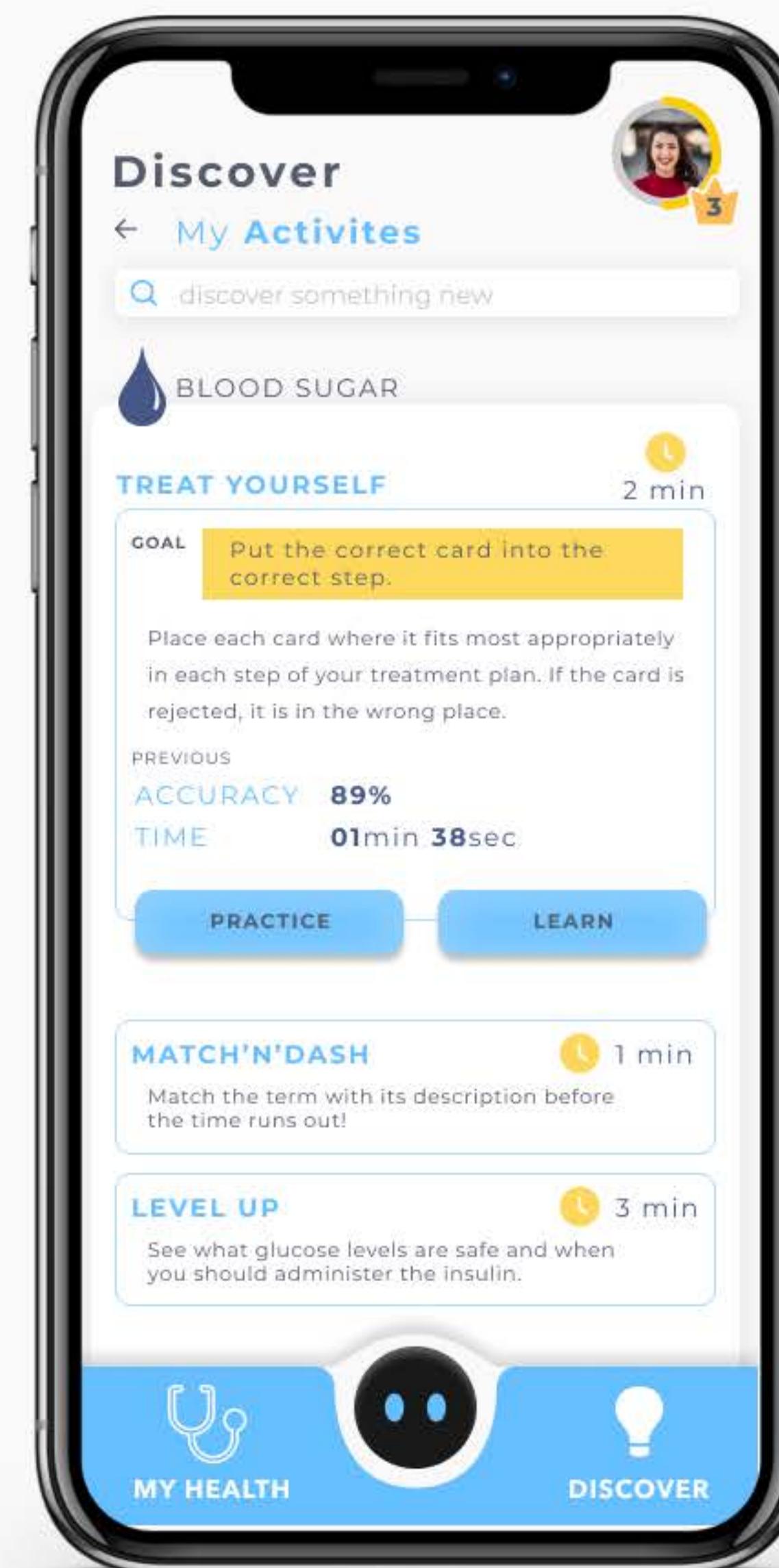
Discover allows patients to take control of all the information regarding their physical health.



## Changes

Learning activities **generated and personalized** around direct or related health concepts.

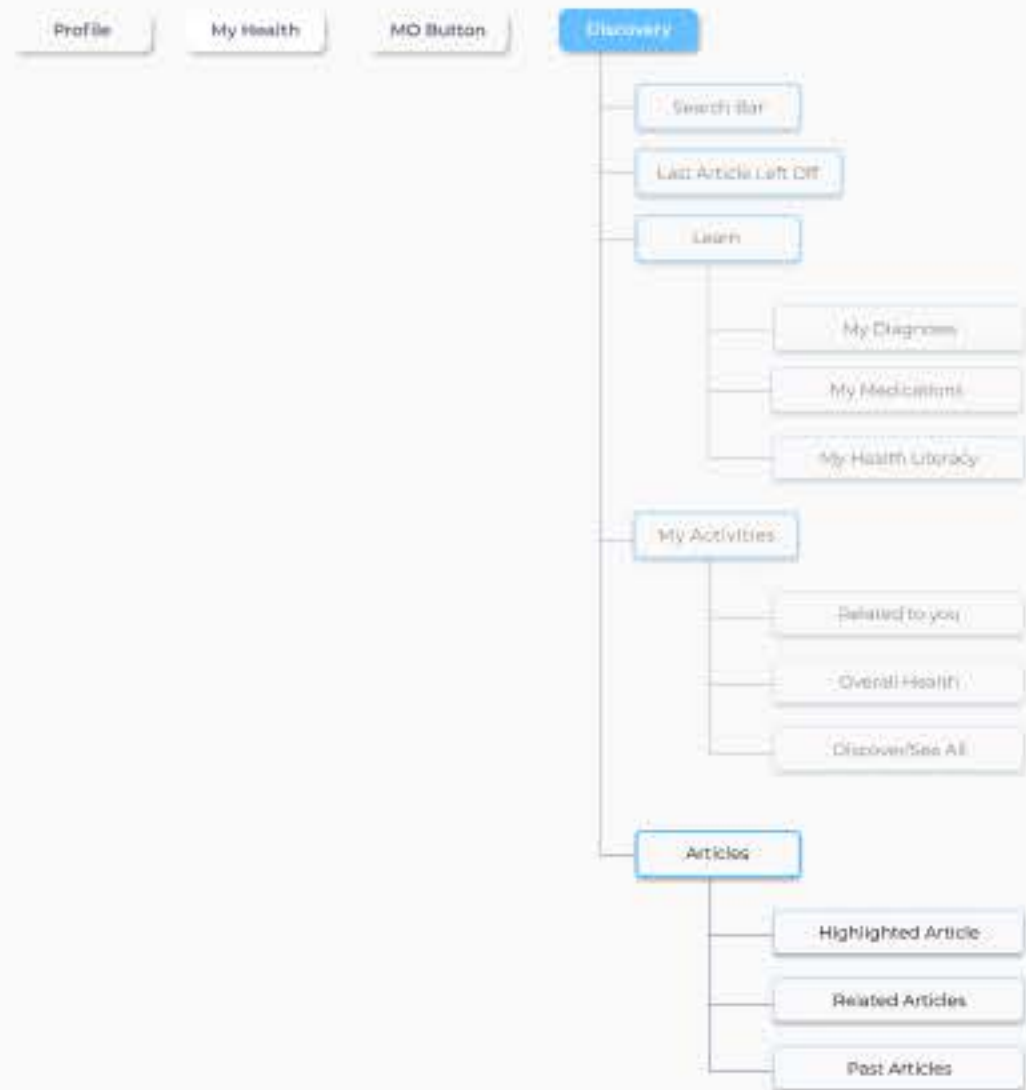
Engages the patient and their **health literacy.**





# Discover

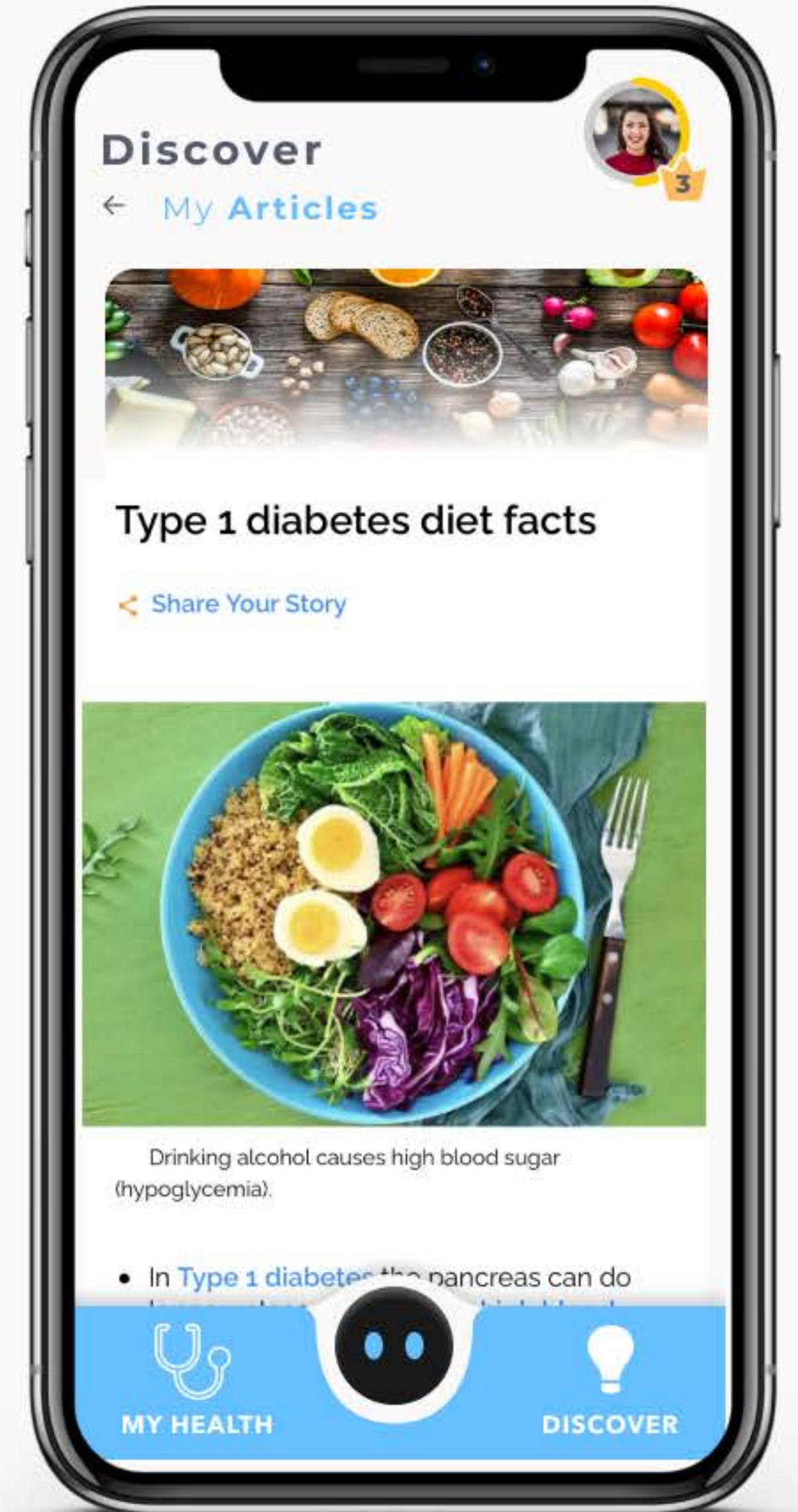
Discover allows patients to take control of all the information regarding their physical health.



## Changes

**Access to direct or related health concepts** from trusted medical sources.

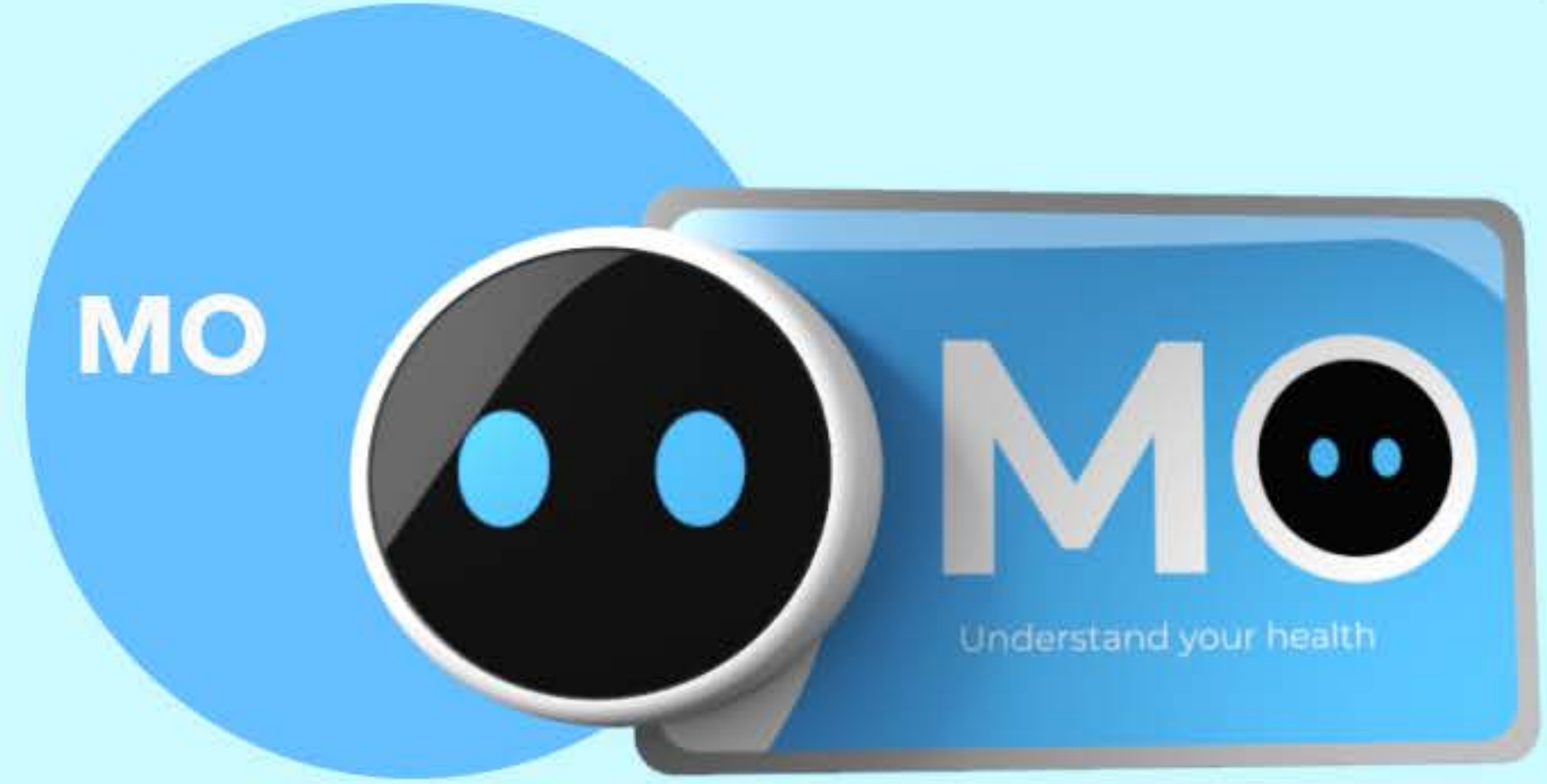
**Share content** and discuss health factors with those around you.





# In Hospital

# At Home

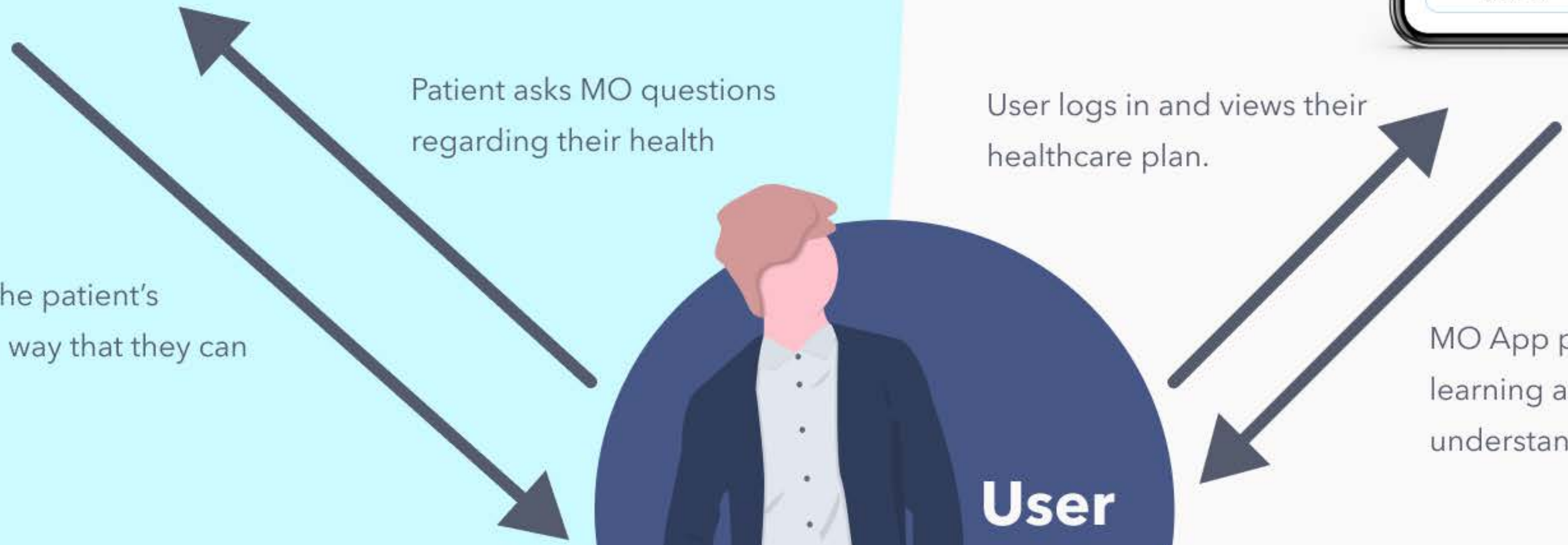


Patient asks MO questions regarding their health

User logs in and views their healthcare plan.

MO answers the patient's questions in a way that they can understand.

MO App provides information, learning activities, and easy to understand discharge instructions.











third iteration



# MO in the Hospital



The in-hospital MO interface was created to give patients an **outlet** to ask their questions and receive accurate, easy to understand answers, **without taking essential time away from clinicians.**





the **physical changes**

Integrated tablet for **easy visuals.**

**Clamp** for adjustable bed **placement.**

**Flattened back** for easy placement.





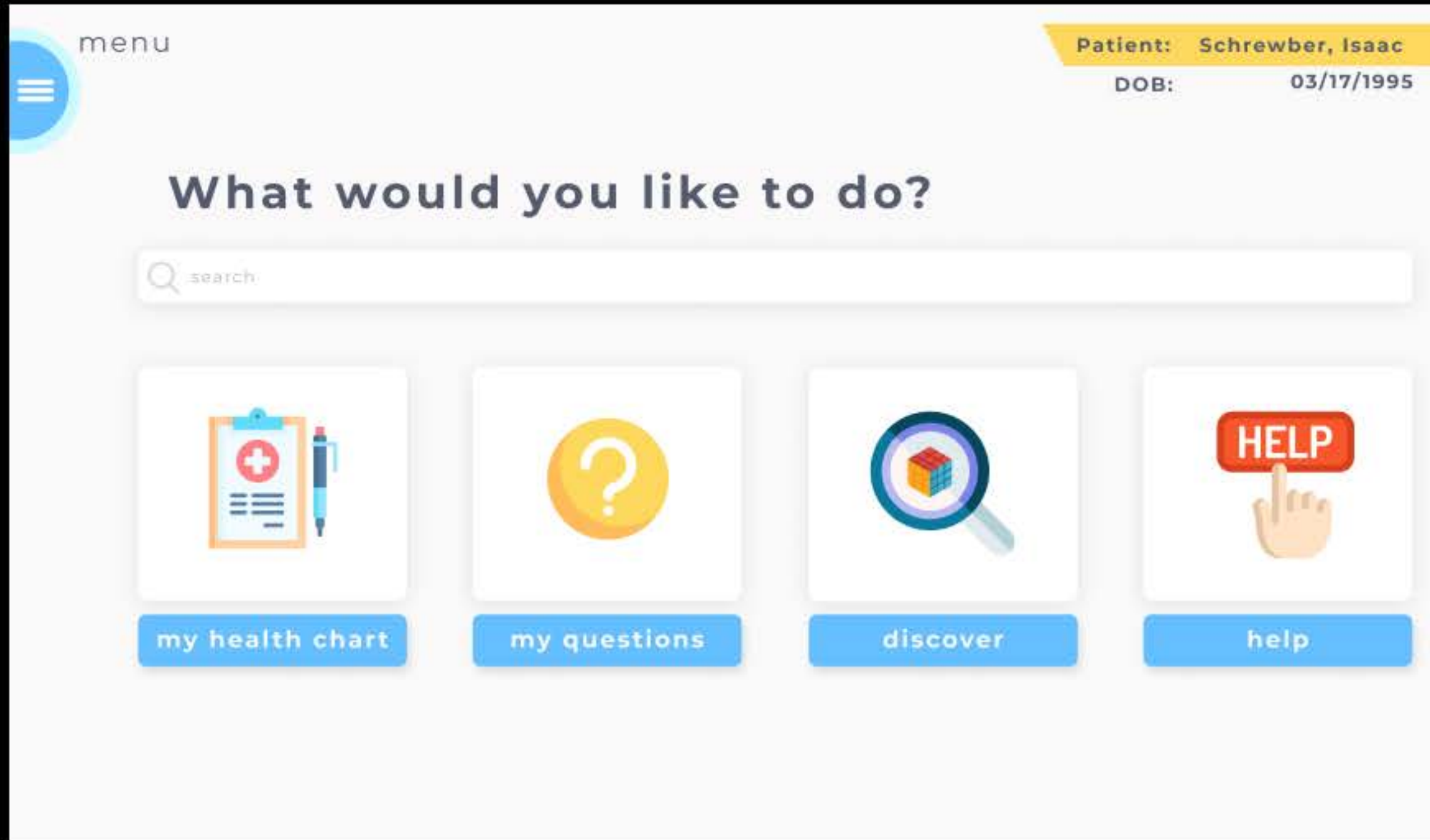
We conducted moderated user tests to evaluate the MO in-hospital tablet interaction screens.



**5** in-person **users**



# Tablet UI

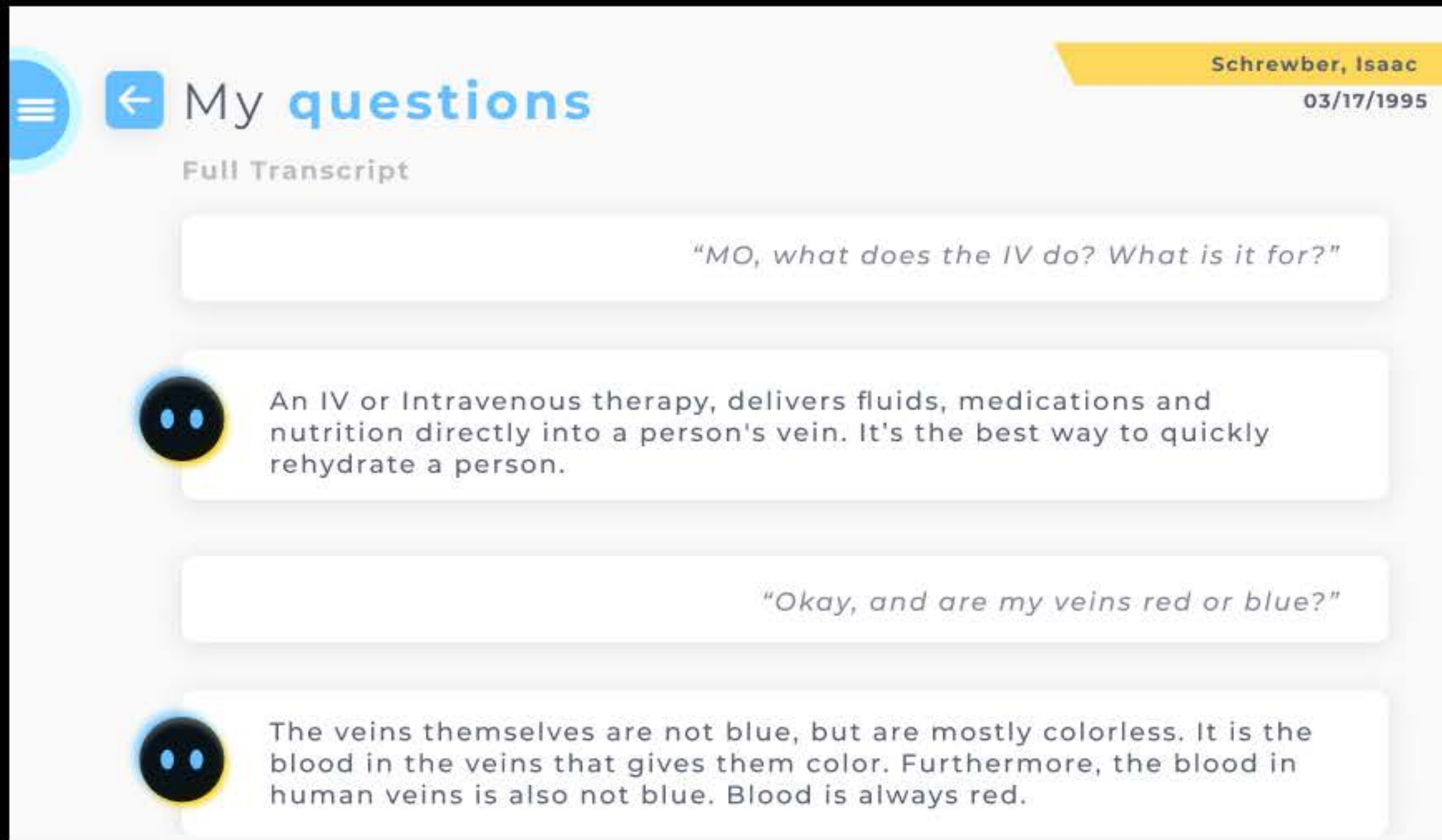


Users suggested some minor changes regarding labelling.

Users wanted another section to explore terms express their symptoms.



# Tablet UI



Users will be able to look at their past questions to MO that they have asked during their visit.



# Final Components & Functions



### Features

7" HDMI\_LCD Screen

KingTech Round LCD

Google API & Python

HONKYOB USB Mini SPeaker

USB Lavalier Lapel Microphone

UDOO X86 II Advanced Plus

CPU Fan for X86 Heatsink

### Functions

Shows visuals

Analyze verbal instructions

Gives verbal feedback

Receive verbal feedback

Run the system

To keep the system cool



# MO at Home

The in-hospital MO interface was created to give patients an **outlet** to ask their questions and receive accurate, easy to understand answers, **without taking essential time away from clinicians.**





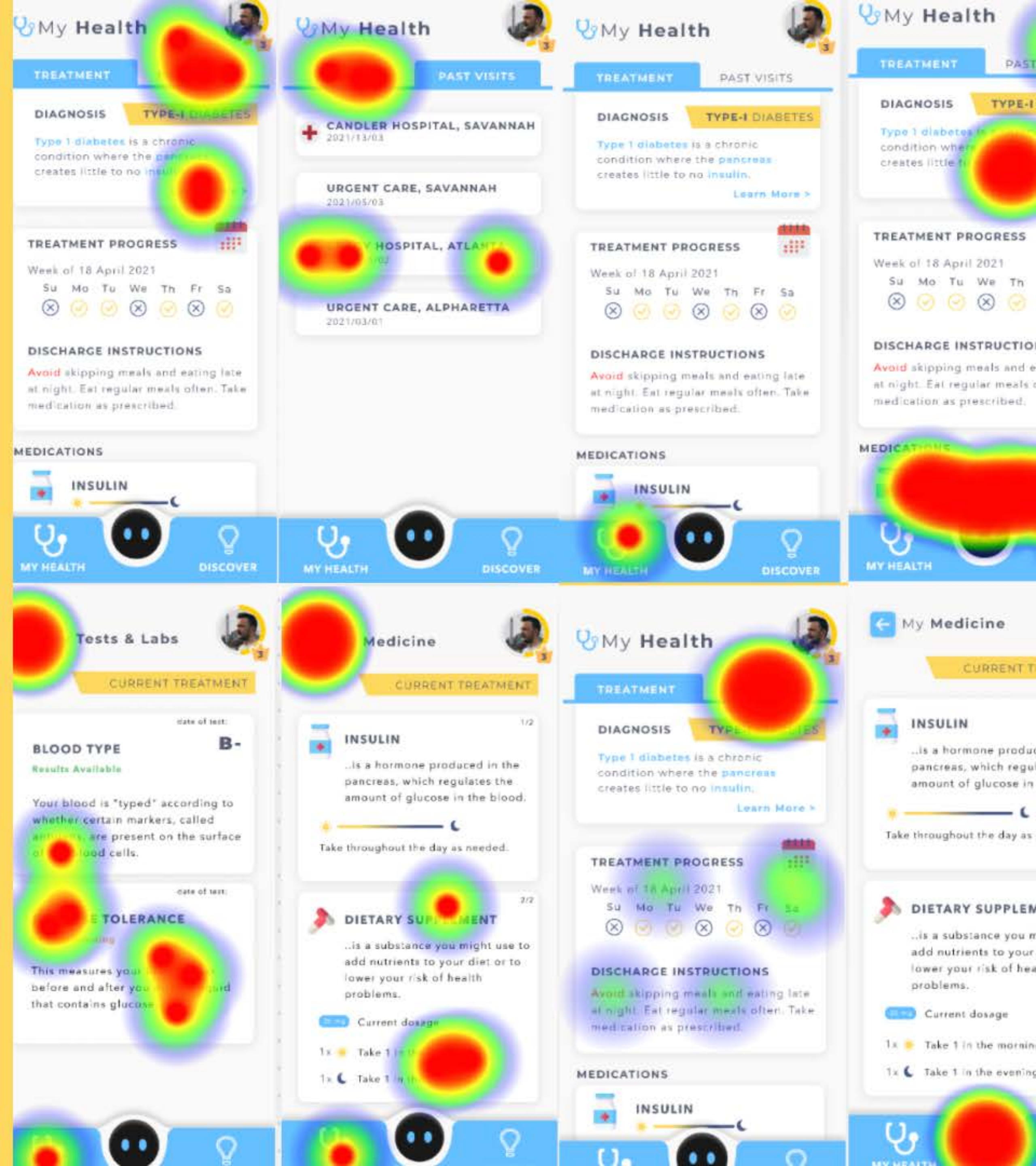
6 User Missions

23 Unmoderated User Tests

49% Direct Successes

42% Indirect Success

8% margin of error





# 9 Moderated User Tests

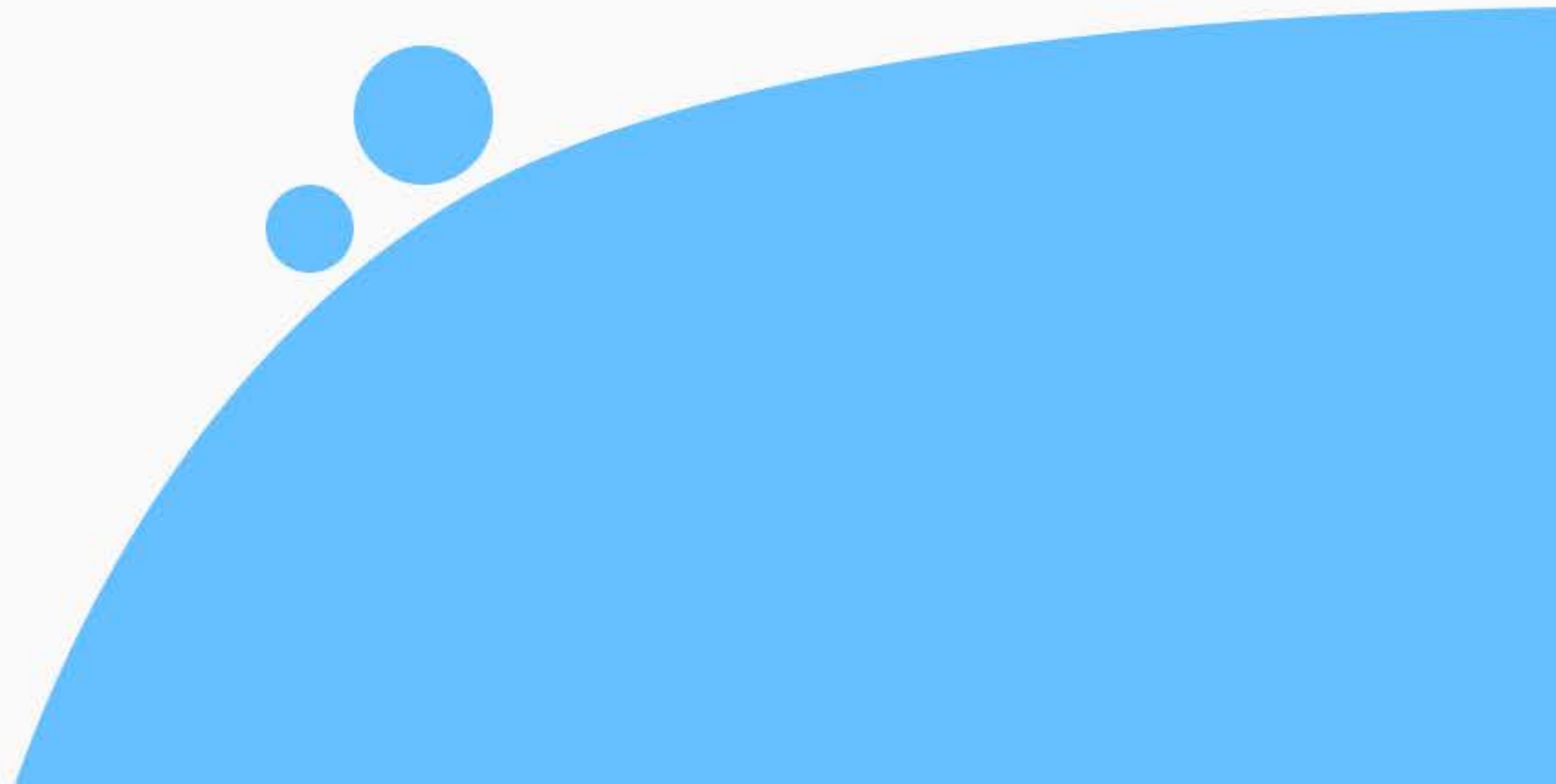
7 Patients, 2 Subject Matter Experts

**9 Mission Tasks**  
in Round 1

**8 Mission Tasks**  
in Round 2

**USE Questionnaire Follow-up**

Hueristic user testing evaluation to review the visual and interactive design of the second iterative prototype.







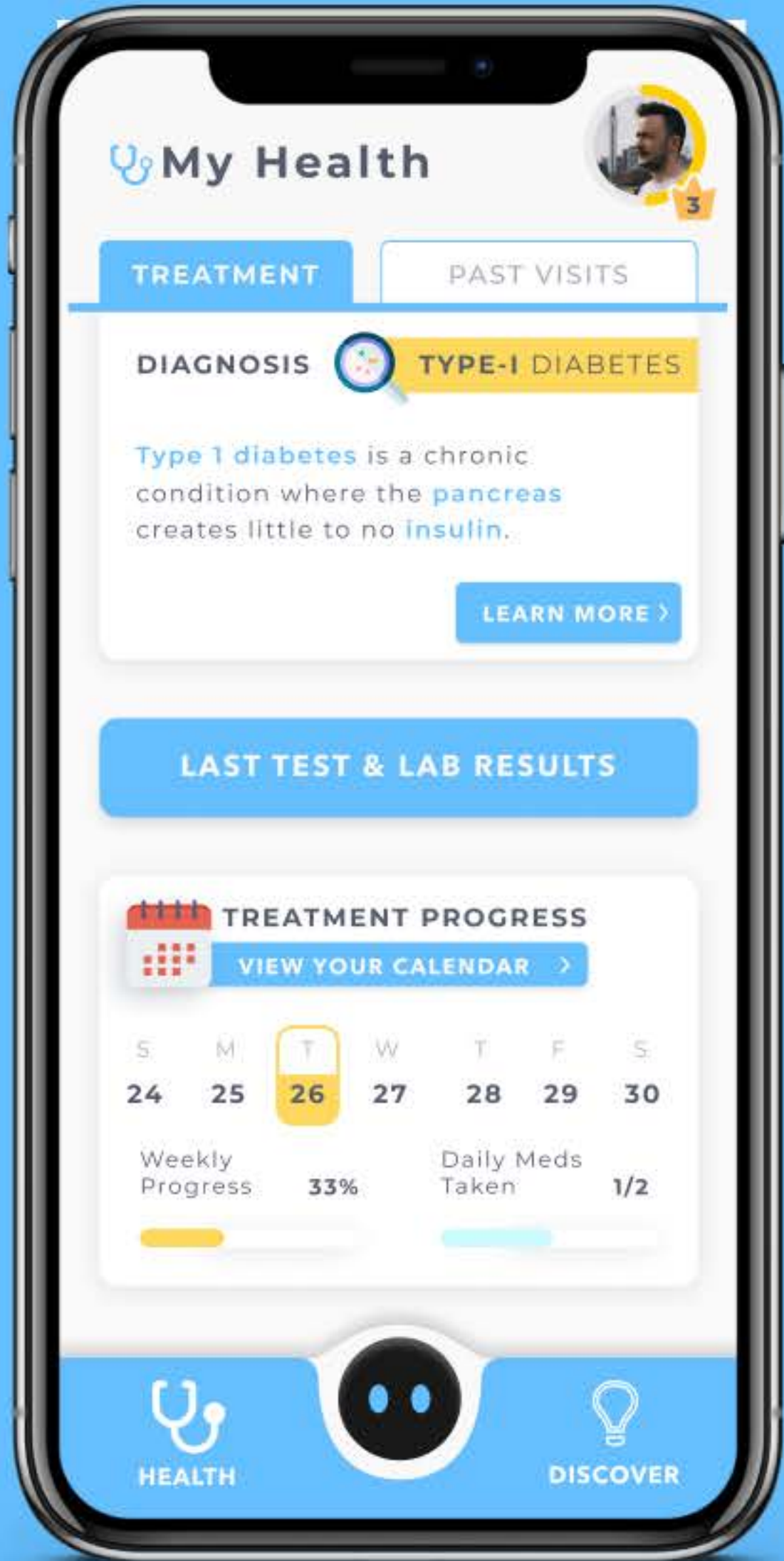
# Information Architecture

V3



# Track your **treatment plan** without the paperwork.

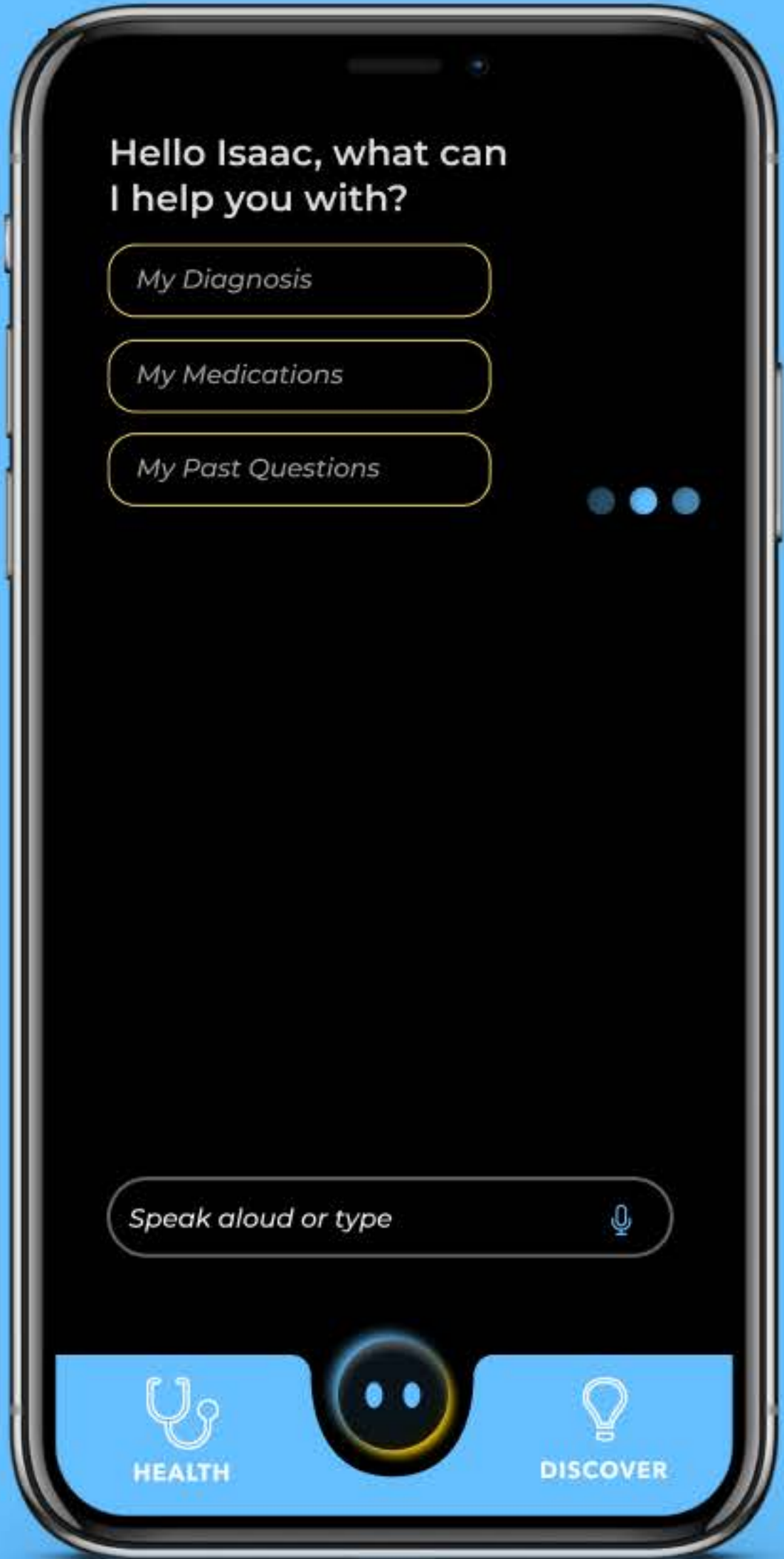
Patients can now keep track of their treatment plan through an interactive calendar that tracks their weekly progress, check off medications when they're taken, or even create a notification for reminder, and look back at previous dates to hold themselves accountable.





# Your **personal curator** at the tap of a button.

Using the MO button patients can ask MO questions like before, but now MO offers suggested articles and activities related to user questions to encourage them to continue exploring.





# New learning activities for increased learning.

The discover page now has 6 new activities for patients to play and increase their health literacy rate!





The  
**M**   
Medical Network

THE  
**final design**

MO Physical Form

MO Final Application

Final Impact

Business Model

Deliverables



# What is **MO**?

MO is a **healthcare companion** that provides patients with medical information and guides them through their treatment plan in a simplified manner to **increase health literacy** and **end patient non-compliance**.





# In the **hospital**

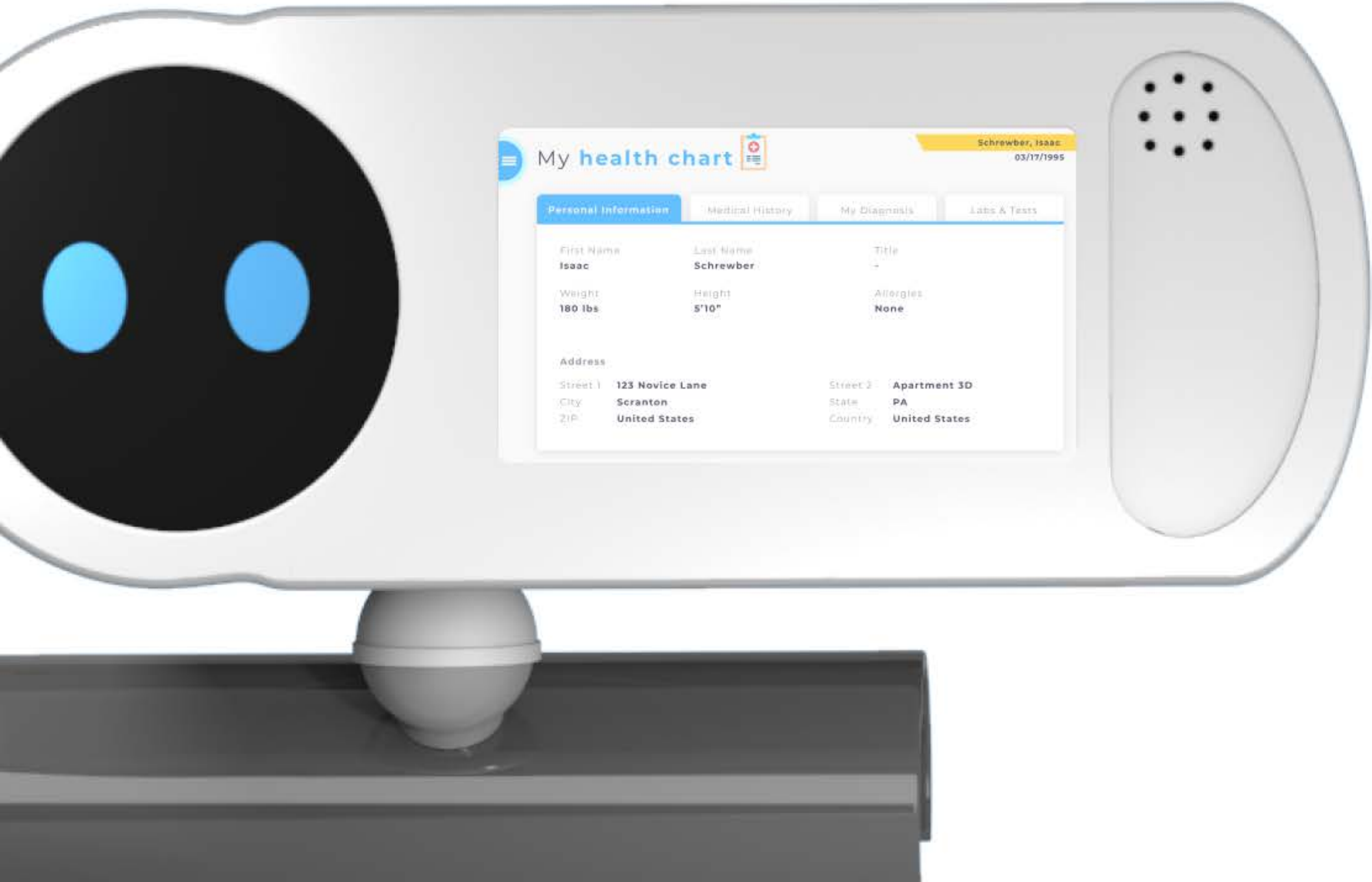


## Conversational AI

**Ask MO questions** at any time regarding their health and hospital progress.



# In the **hospital**

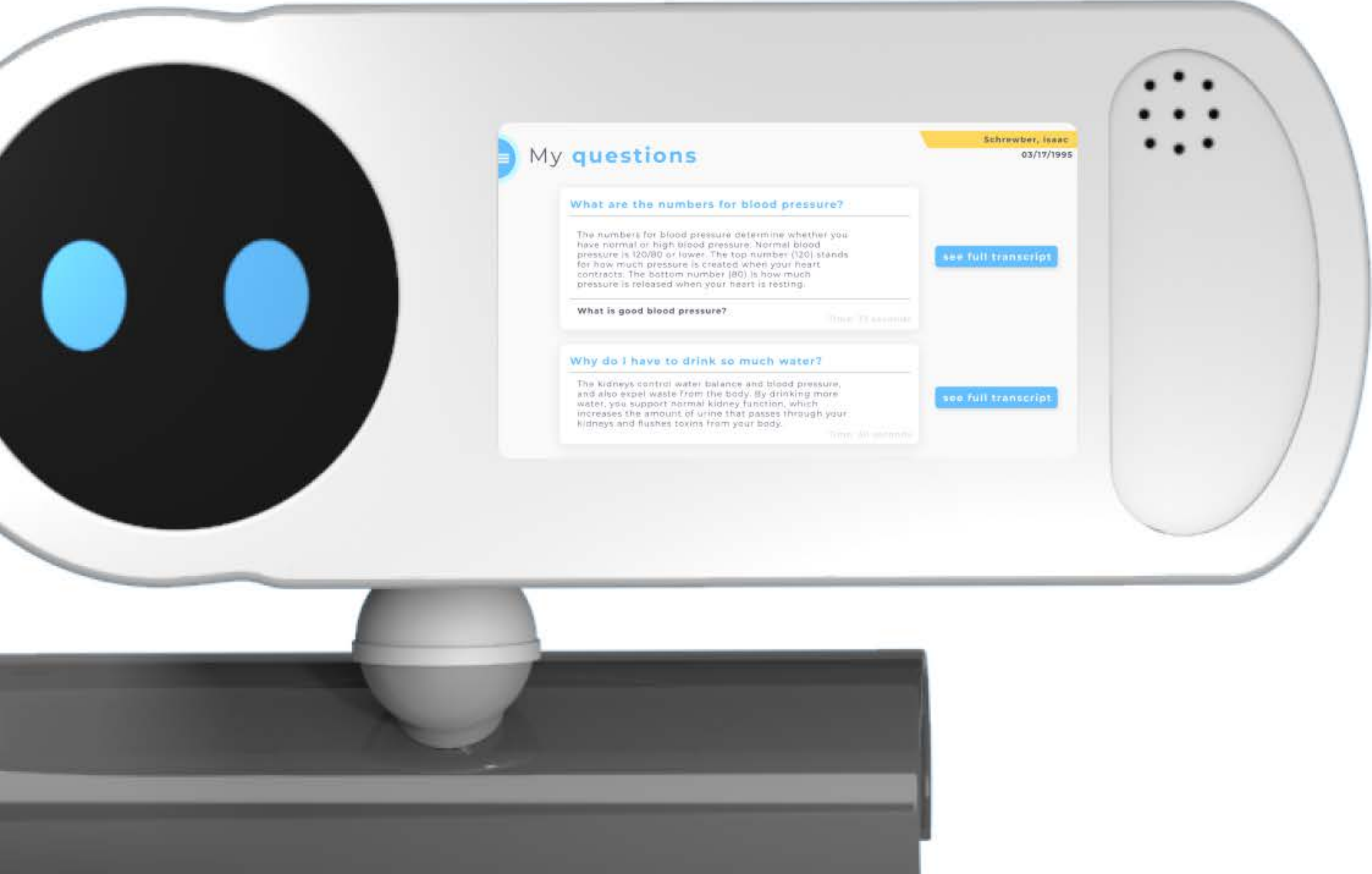


## Easy Access Treatment

View their **patient chart** in real time.



# In the **hospital**



Available  
Medical History

**Look back at questions**

they have asked earlier in  
the visit.



# In the **hospital**



## Entertainment Hub

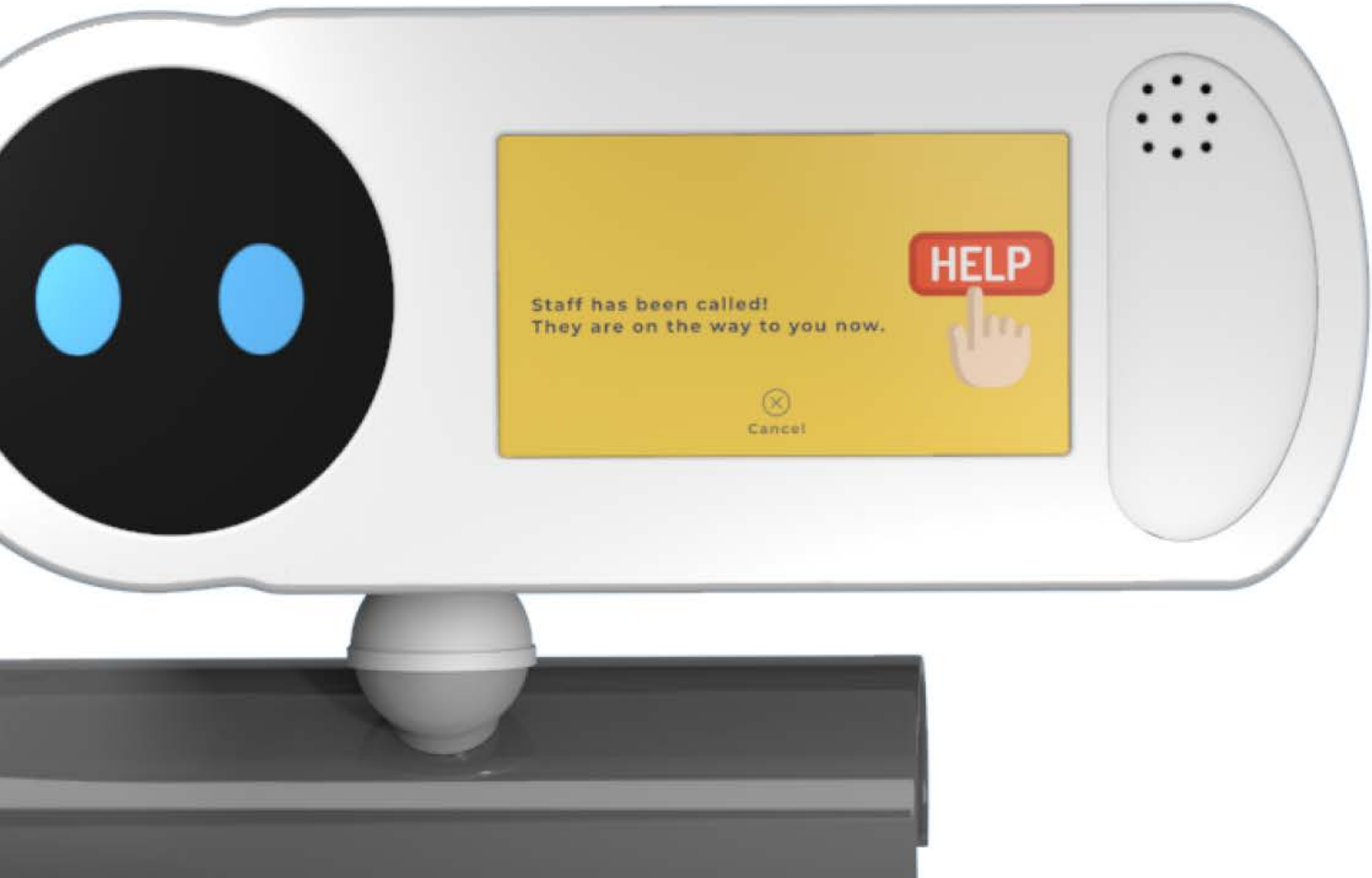
Discover health related

**games, shows, and articles**

while they wait.



# In the **hospital**



## Immediate Relief

**Call for help** from hospital staff without the hassle.



MO's key feature is its **interactive Voice UI** that is available for patients both within the hospital and when they return home. MO ensures that patient questions are not only listened to but are actually answered in the simplest way a patient can understand.





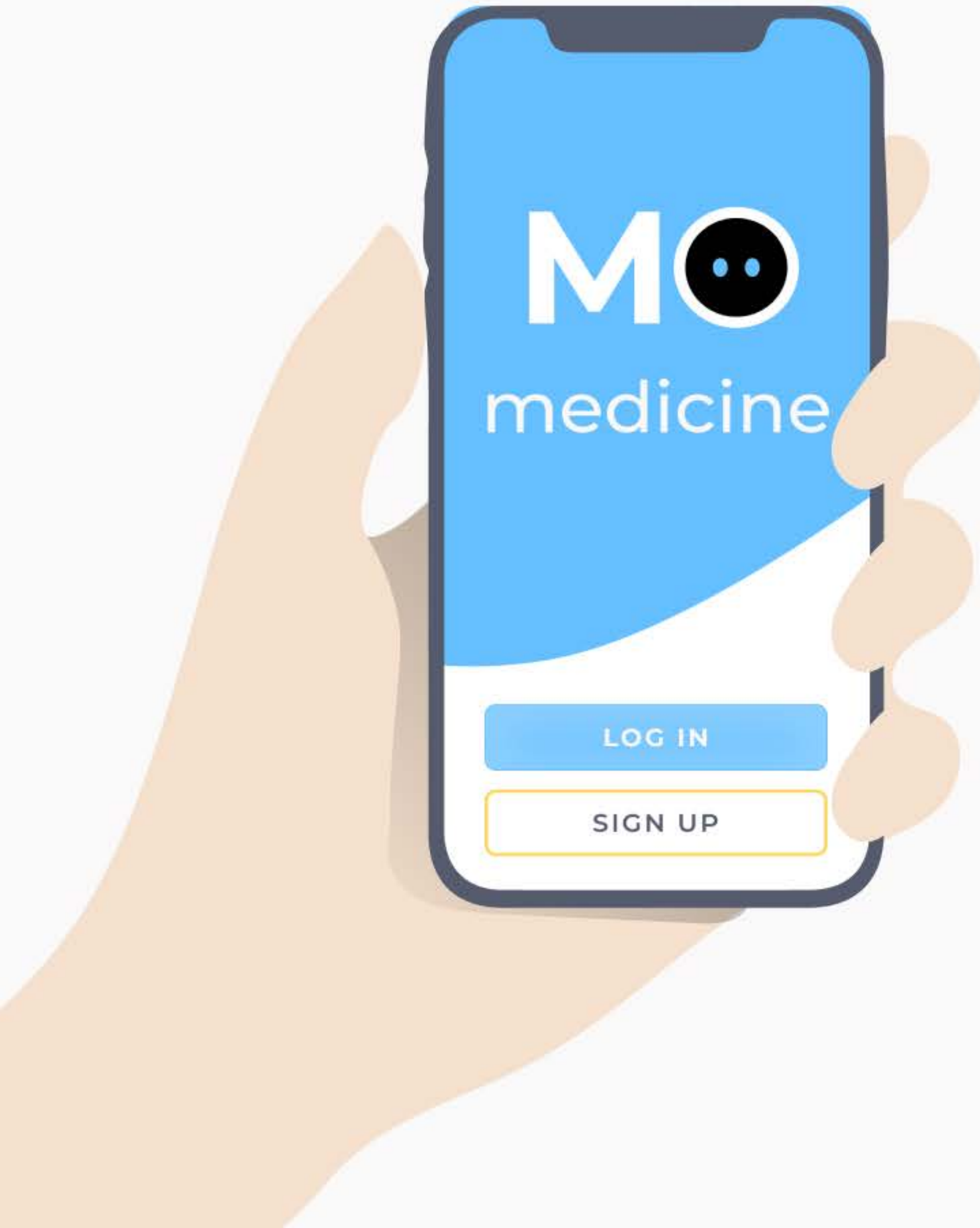
# The value of **VUI**

Patients have a **medical assistant** present whenever they need them.

MO **informs and entertains** patients while they wait in the ER, maintaining **patient satisfaction**.

Patients have an outlet to ask questions **without disrupting clinicians** in emergency situations.



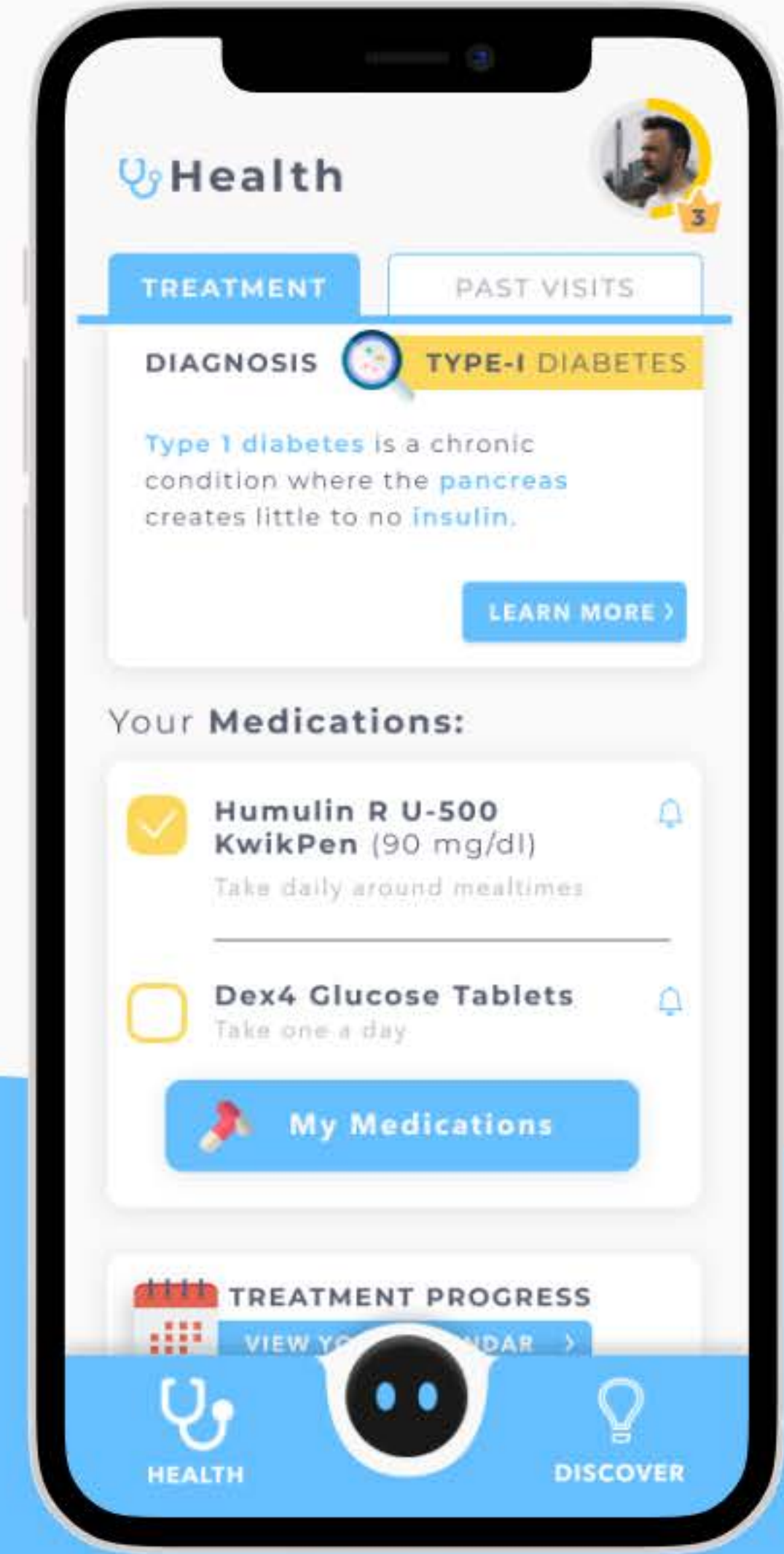


Available **in hospital** and **at home**



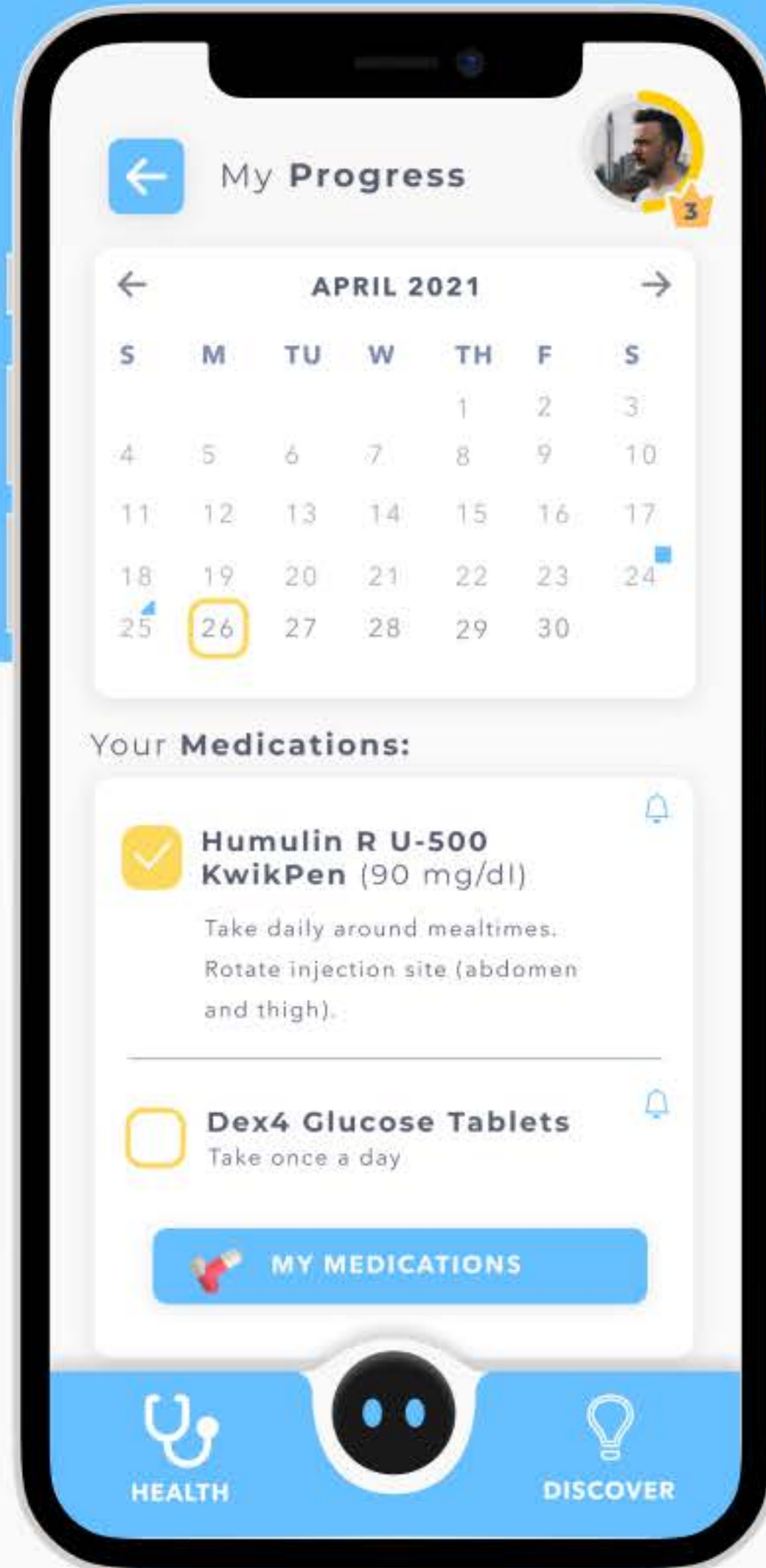
# In the **At-Home App**

**Understanding** treatment plans means **stopping non-compliance**





# In the **At-Home App**



Track your **treatment plan** without the paperwork.

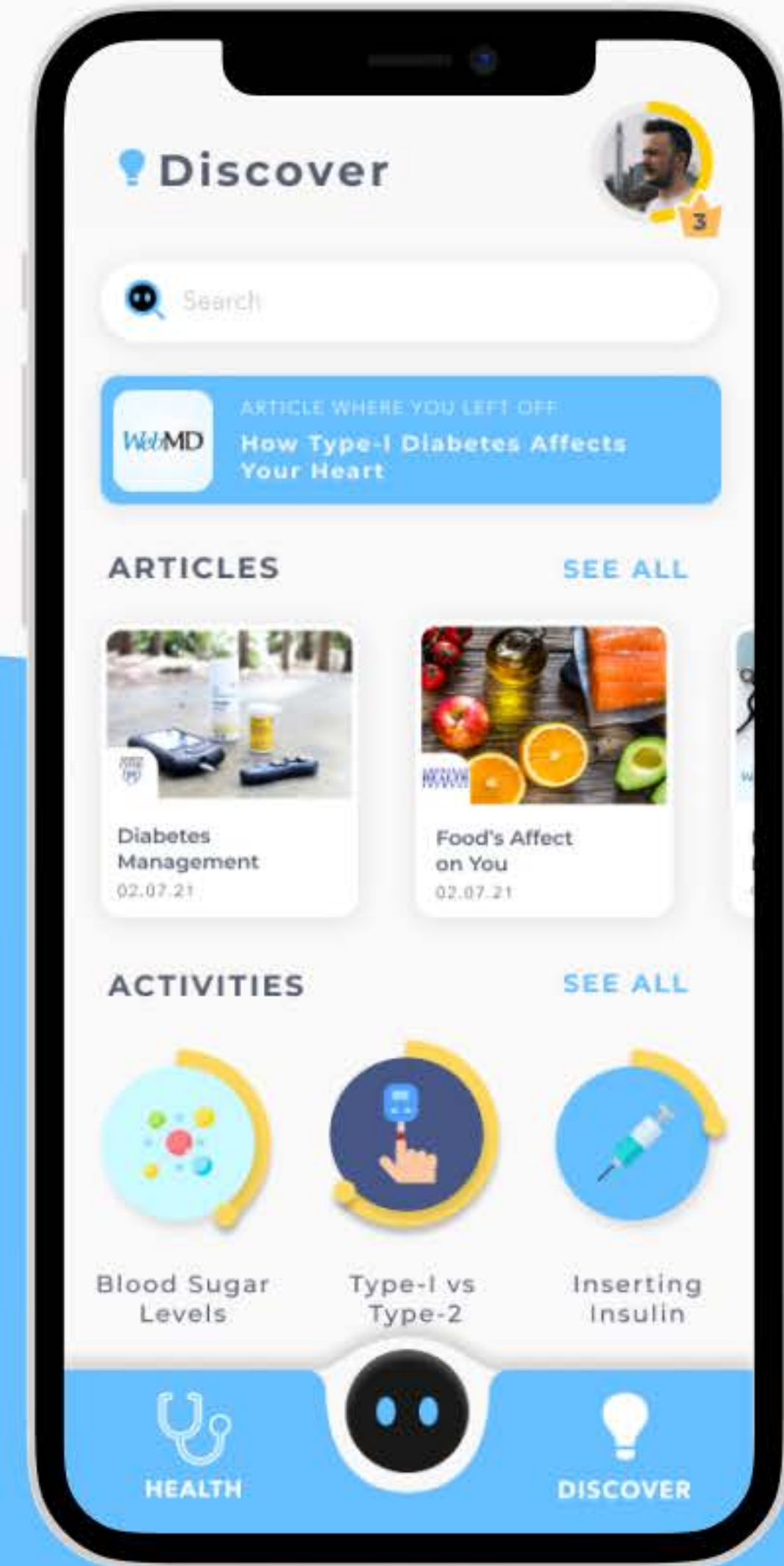
**Forgetting medications** is a thing of the past.



# In the **At-Home App**

**Catered** activities for progressive knowledge.

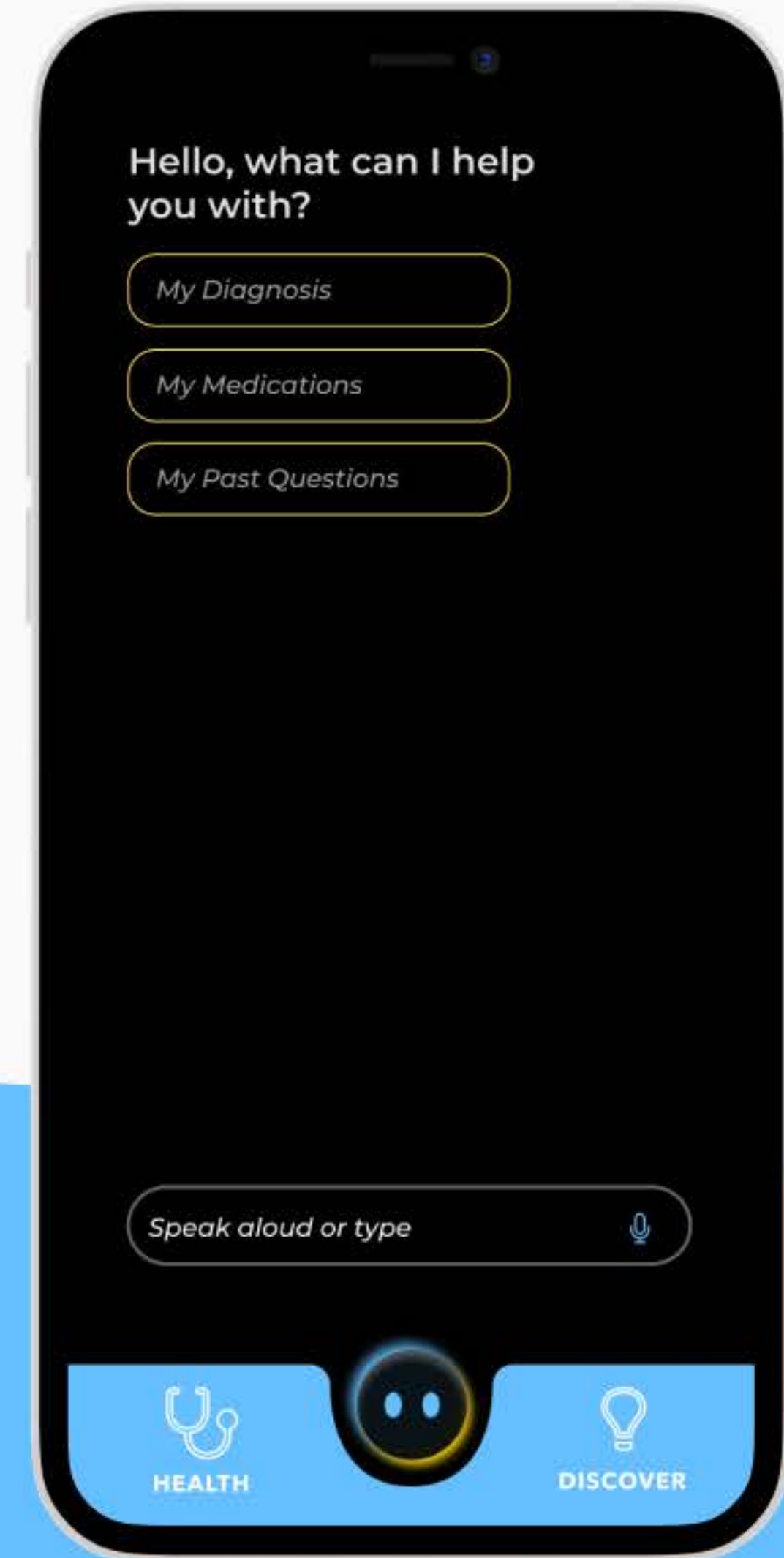
Health hub for relevant **patient diagnosis** information.





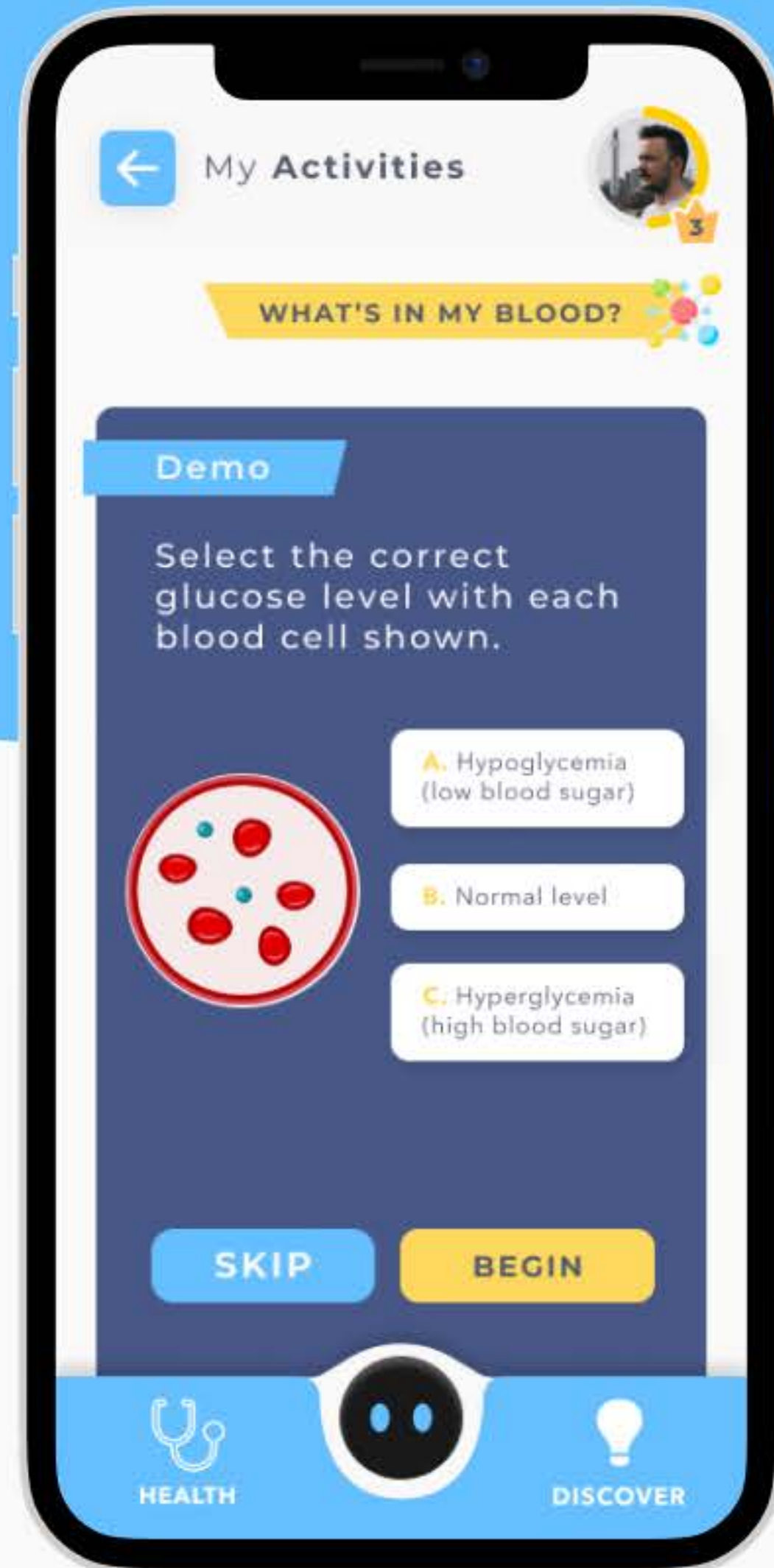
# In the **At-Home App**

Your **personal curator** at the tap of a button.





# In the **At-Home App**



**Maintains and increases patient engagement** to stay informed on bodily health.

Entertaining education to increase **patient satisfaction.**



# Benefits to **Isaac**

- Overall **Satisfaction** of Care
- **Increased** Health Literacy
- Encouraged **Self-Intervention**







MO Medical Network works with **you**

**Contract** based service

Holistic system for your  
**patients and staff**



By using MO Medical Network, hospitals will see

Decrease in **return ER visits**





By using MO Medical Network, hospitals will see

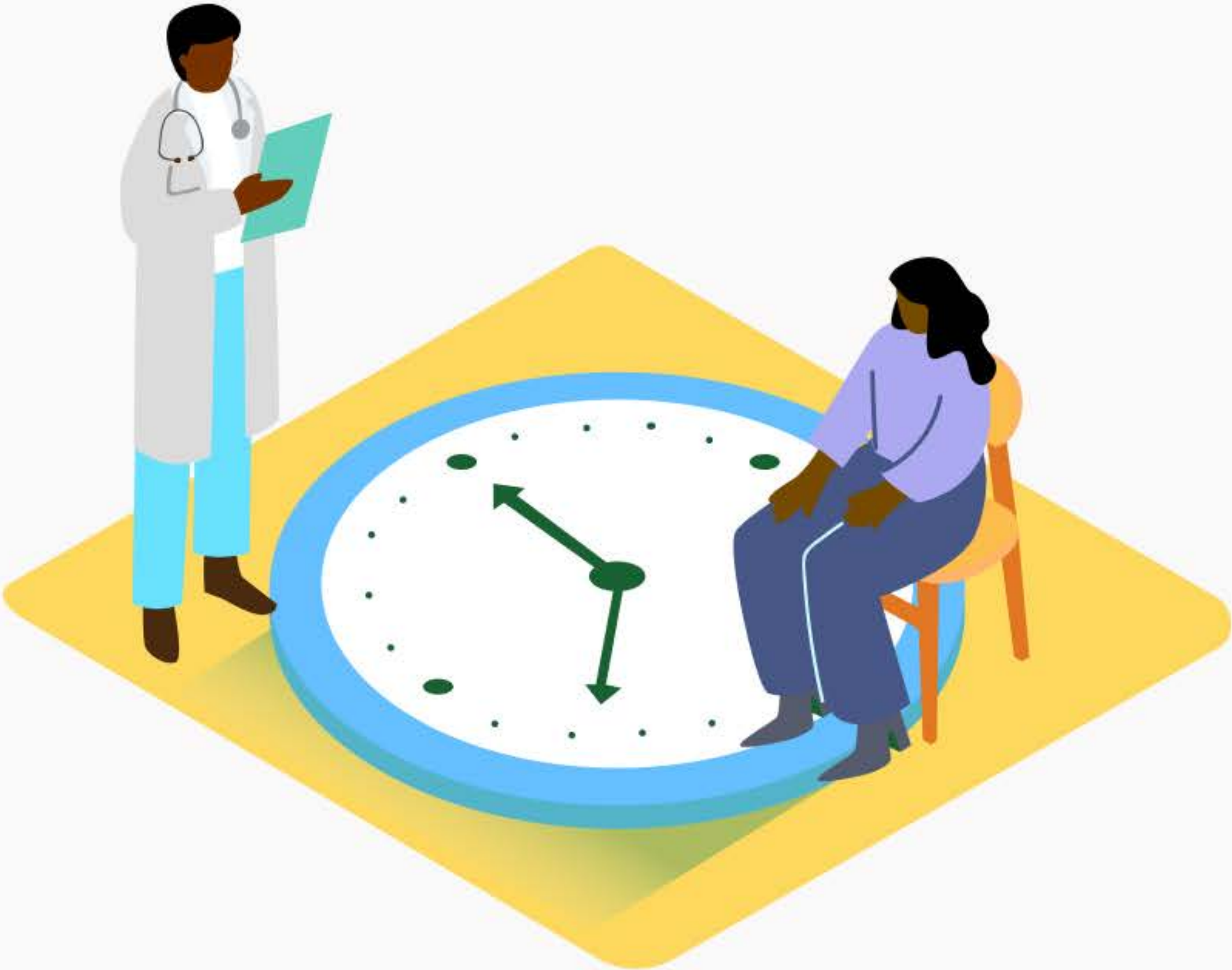
**Increased** patient satisfaction





By using MO Medical Network, hospitals will see

**Increase** in time spent  
on **priority situations**





# our **value**

MO will **increase patient satisfaction and comfort** by supplying easily digestible and catered information **at the patient's pace**. MO will **decrease the amount of non-essential time** clinicians spend with patients, allowing clinicians to **focus on priority situations**.



# what makes us **different**

MO focuses on **comforting** and **educating** patients on their conditions in an individualized way. Unlike our competitors, MO is available both **in and out of the hospital**, and focuses on **longterm patient education**.



# Updated Business Model

## Key Partners

- Hospitals
- Clinicians
- Community Organizers

## Key Activities

- Community participation
- Clinician cooperation
- User testing for platform
- Clear health literacy evaluation method

## Value Proposition

Reducing healthcare costs, risks, and concerns by fostering better communication and understanding between patient and clinician and increasing long term health literacy of patient and community.

## Custom Relationships

- Long Term
- Dedicated Personal Assistance
- Communities
- Co-creation

## Customer Segments

- Multi-sided
- Niche (Medical Field)

## Cost Structure

- Value Driven

## Key Resources

- Health literacy experts
- Clinicians
- Patient education material experts

## Channels

- App
- Physical Product

## Revenue Streams

- Customizable pricing plans





## Expansion

**User test** with medical Subject Matter Experts (SME)

Integrate and **test full VUI flow**

**Create validity for the physical form** with direct MO interactions



# End the confusion, **Understand your health.**

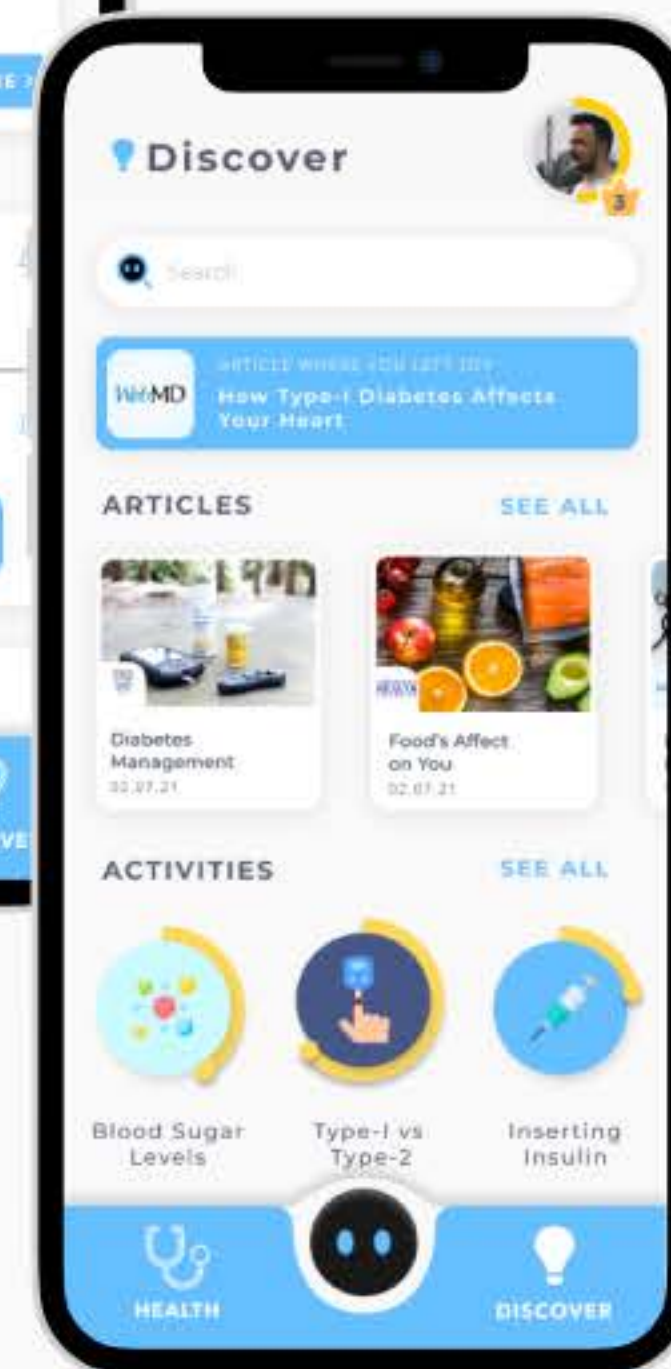
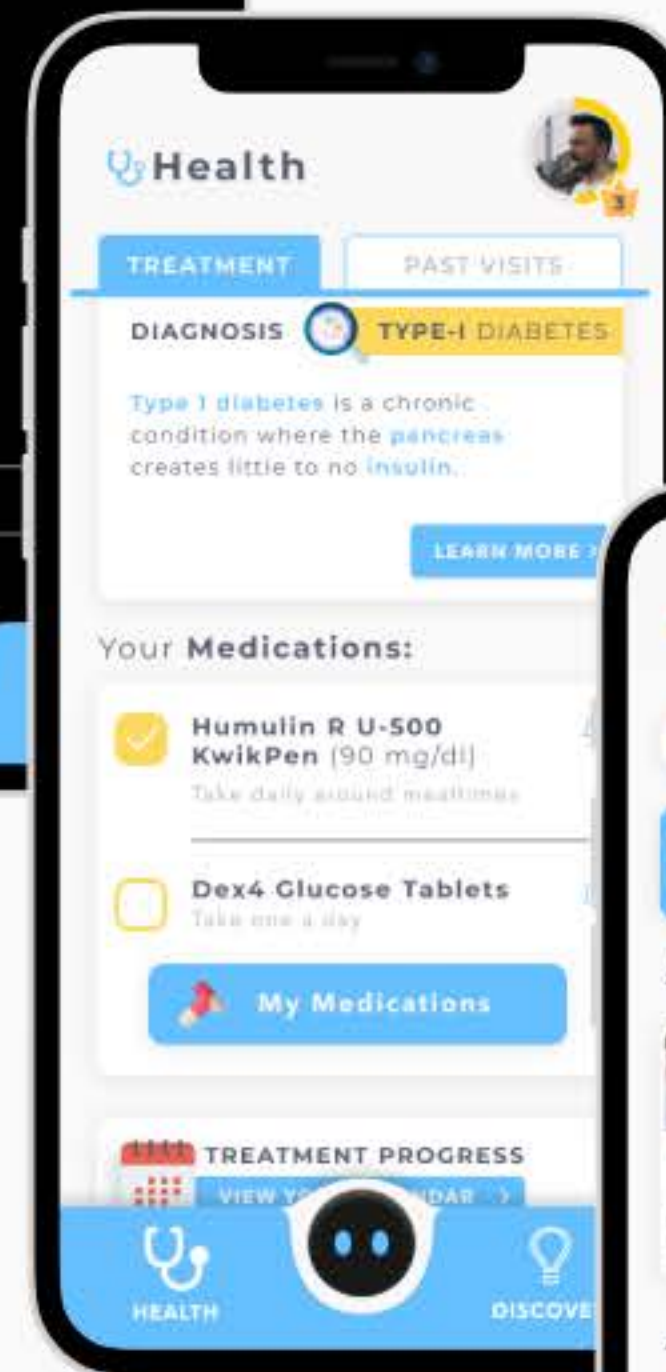
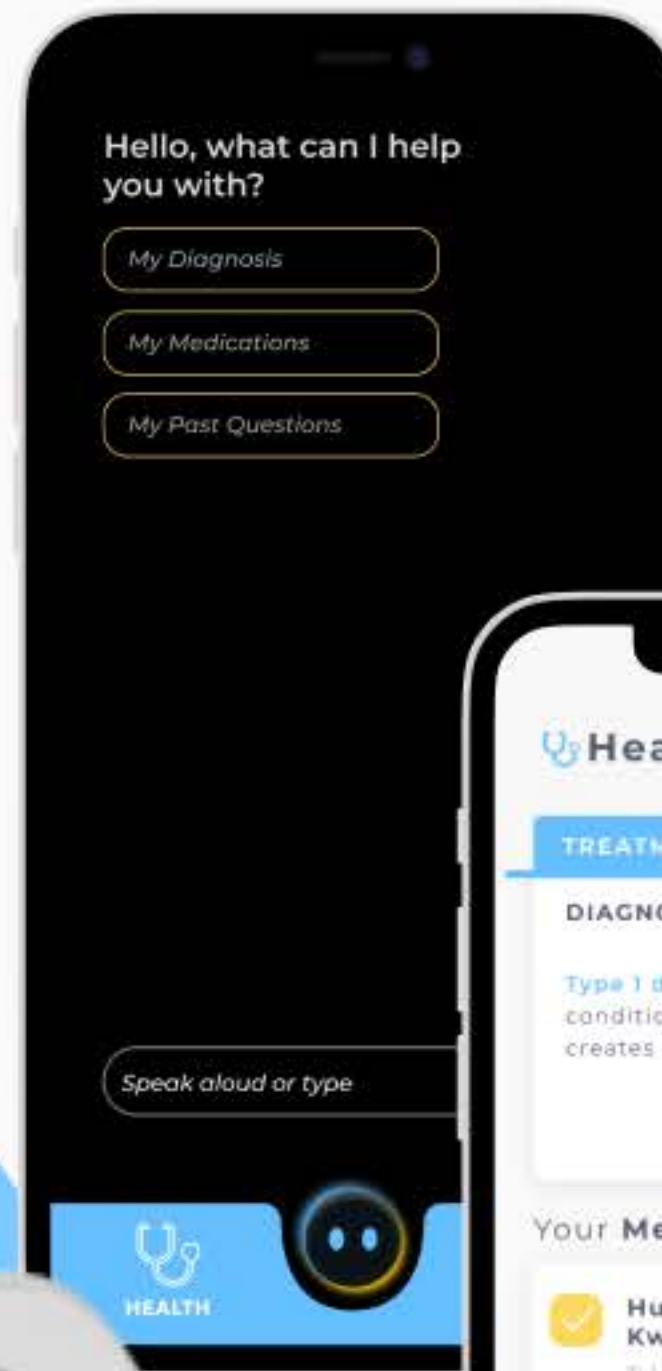
The MO Medical Network is a network designed to help you understand your health through the use of catered content and resources. Stop the confusion caused by inaccessible healthcare information; the MO Medical Network helps you take your health into your hands.





# The MO

Medical Network  
Empowering Patients and  
Healing.





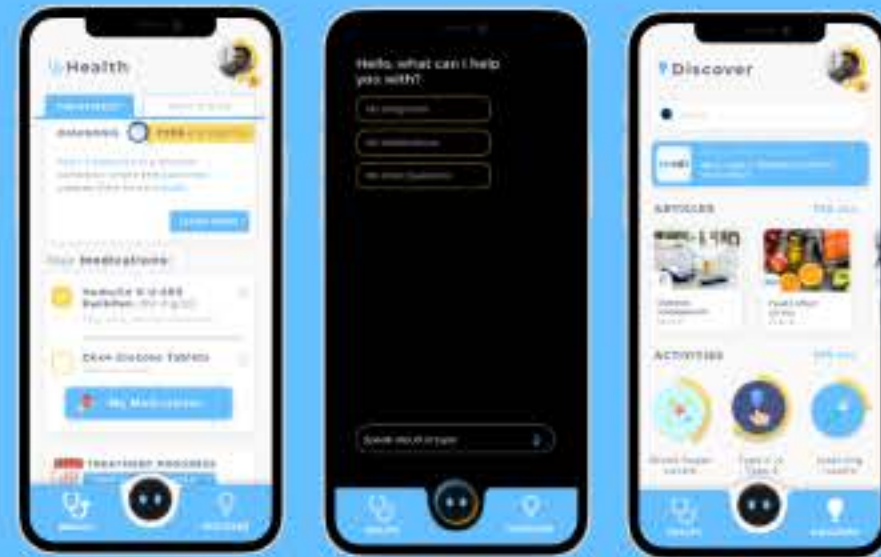
The **MO**

Medical Network  
Educating. Understanding. Healing.



**You had me at "Hello MO!"**

MO is a conversational AI that can answer any medical question without the excessive jargon. MO provides information in an accessible way, both verbal and visual, to reach patients at any literacy level.



**Treatment without the hassle**

The MO Medical Network focuses on making maintaining a treatment plan as easy as possible. With the MO Medical App, patients are able to track their treatment plan, get medication reminders, and in-depth descriptions of medication use and purposes.

**Healthcare made fun**

The MO Medical Network not only helps with maintaining treatment but also helps patients increase their personal health literacy through engaging and educational activities relating to their specific condition.



By providing medical information to patients at a level they can understand, MO ensures that patients are fully educated about the conditions that are relevant to them.

MO empowers patients to take control of their medical care. MO offers advice on how to get the most out of your time in a medical office and ensure that you get the info you need from your doctor.