

Patient Ecosystem Mapping



Supporting system-shifting in health and care

The majority of innovation in health & care is based on quality improvement methods developed in other sectors like manufacturing. These methods can deliver significant impact, but often they focus on 'drilling down' into a system, optimising individual pathways or specific elements within a service. Many of the emerging challenges in health & care, however, require us to see the bigger picture, to shift the emphasis to prevention, improve the interfaces between patients & service-users and professionals and be more mindful of the population's rapidly changing needs.

In the conventional quality improvement tool-box there are relatively few methods that support 'zooming out' to explore these more holistic challenges. Patient Ecosystem Mapping offers a way to see the system from above, from a service-user's perspective.

This summary explains what a Patient Ecosystem Map is, how it can be created and how it can be used to help a team deliver the system-shift needed within contemporary health & care, examples of recent mapping projects are provided to illustrate how the approach can add value.



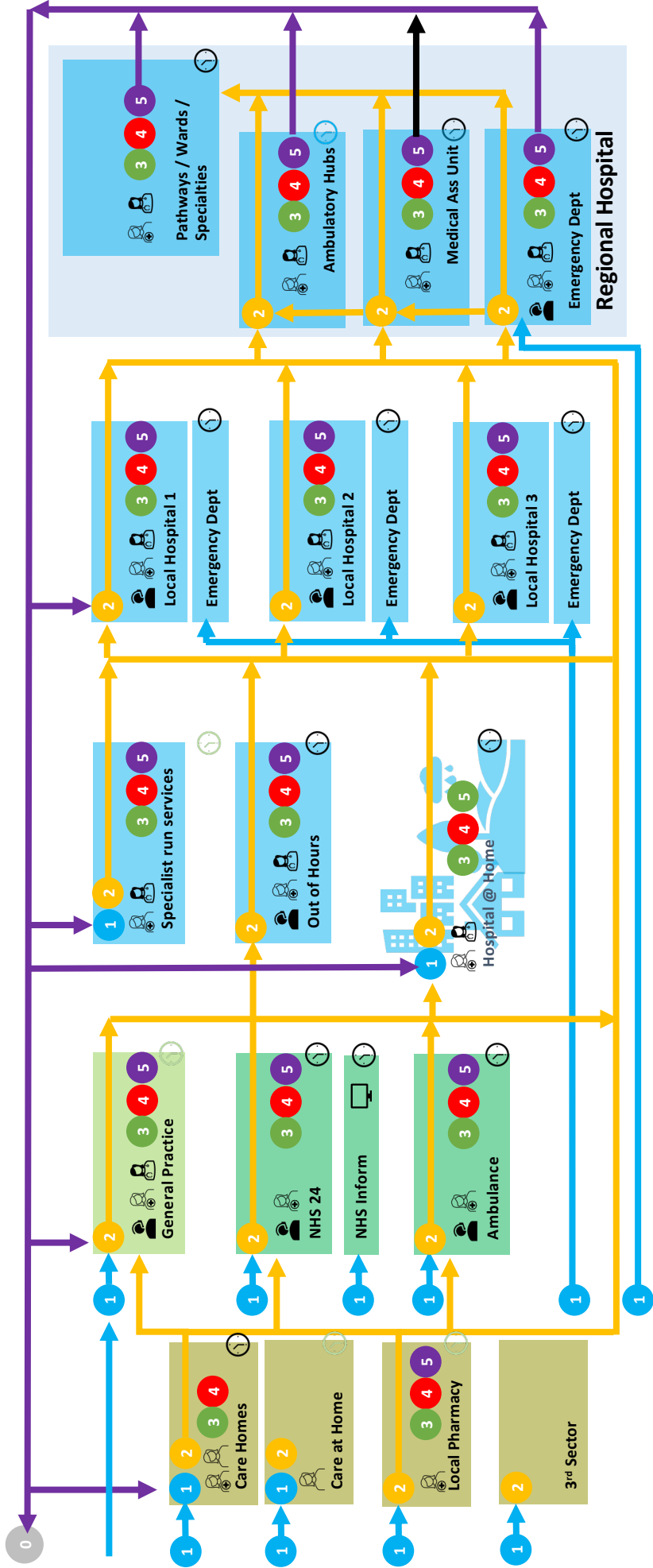
Generic Patient Ecosystem Map



All patient / service-user pathways start with Stage 0 (preventing the need for the pathway). Patients then move through stages 1-5. This might happen within hours, days, months or even years. Sometimes journeys are circular & highly iterative.

Patients / service-users meet a wide range of health and care professionals during their journeys

The Generic Patient Ecosystem Map provides a basic baseline that can be adapted for a specific context



Using the map to support system-shifting

1. Define Map Scope

Decide scope of the map by establishing:

- *Geography*: Region, trust/board, community or specific locality.
- *Patient / User Groups*: All patients / users or specific demographic or conditions.
- *Pathways*: All pathways or emergency-urgent-elective pathways, specialist pathways, in-hours, out-of-hours etc.

2. Map the Ecosystem

- Identify key ecosystem stakeholders.
- Decide how mapping is to be choreographed (face-to-face or online).
- Build the map iteratively, through collaborative workshops using icons and colour coded arrows.
- Mark-up using local pathway and service vocabulary & local data.

3. Engage with patients

- Invite patients / service-users to talk through their own journeys.
- Mark up what was challenging, what worked well and patient / service-user ideas for ecosystem improvement.

4. Identify Drivers

Use iceberg-model to identify:

- Observable day-to-day challenges.
- Trends (with data) that are having impact over time.
- The structures, systems & interfaces that create disruption.
- The mental models, mindsets and policy decisions that influence behaviours.

5. Plan System-Shift

- Agree future system aims.
- Model a preferable 2030 Patient Ecosystem to act as a 'polestar'.
- Define a 'system shifting' portfolio of potential improvement projects, recording each as a 'How-Might-We' statement.
- Develop criteria for evaluation & develop a prioritised plan.

6. Deliver System-Shift

Establish & resource a 'back-bone' team to deliver change across the system through:

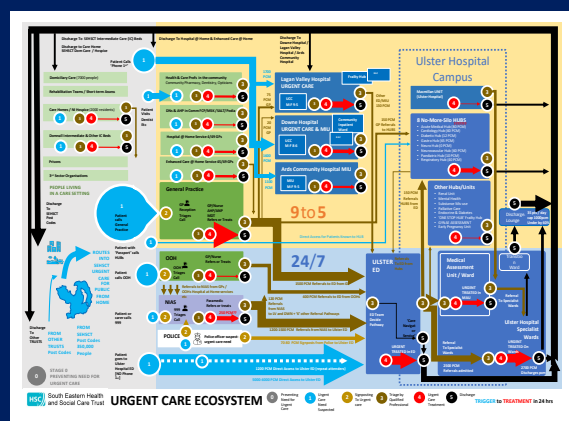
- Agreed initiative aims.
- Agreed measures of progress.
- Pooling of expertise.
- Celebration of successes.
- Being politically adept.
- Drawing down required resources.

Project Examples

Urgent & Unscheduled Care

South East Health & Social Care Trust,

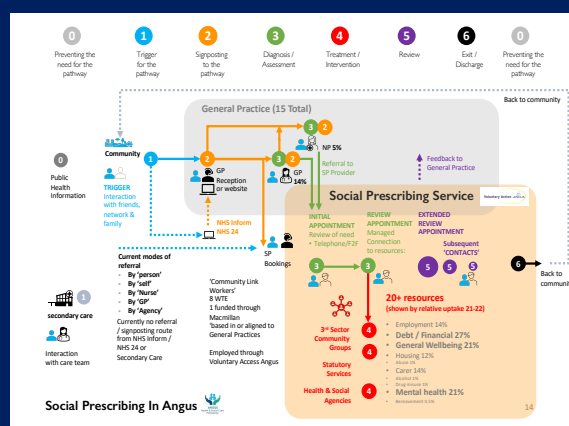
A detailed Patient Ecosystem Map for Urgent & Unscheduled care was built up through five 90-minute online workshops with over 60 participants. Available data was used to mark-up relative patient flow rates through the Ecosystem (indicated by arrow width). During a one-day face-to-face workshop patient journeys were mapped, challenges were explored and a portfolio of improvement projects across the system were identified & prioritised.



Commissioned Services

NHS Tayside & Angus HSCP Care Trust

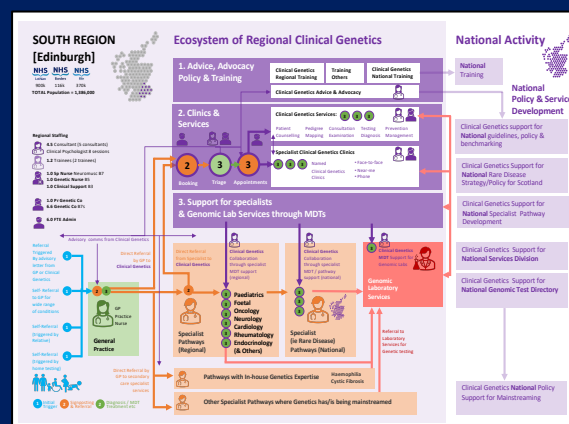
Detailed Patient Ecosystem Maps were built for a range of newly commissioned services established to alleviate pressure on General Practice, (in response to revisions to the 2018 GMS Contract), these included Social Prescribing, Pharmacotherapy, CTAC and First Contact Physiotherapy. The maps have been used to inform potential improvement projects and more effective ways of monitoring service performance.



Scottish Clinical Genetics Service

All NHS Scotland Regional Boards.

Through a series of online and face-to-face workshops Patient Ecosystem Maps have been built for Scotland's 4 regional Clinical Genetics Services (West, North, South & East). The maps have enabled the teams to communicate the role of Clinical Genetics to other stakeholders at a regional and national level. Variance in regional delivery strategies has been mapped – information that is helping in the development of National Service Specifications.



Contact

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Tom is Director of COFINK and is a visiting Professor at DMEM, University of Strathclyde.

Through COFINK Tom regularly runs training programmes for healthcare professionals in Patient Ecosystem Mapping and Design Methods, he also facilitates projects directly with healthcare teams. Recently, Tom has worked with SEHSCT, Northern Ireland, Angus HSCP, NSS, NHS Education for Scotland, NHS Tayside, NHS Borders, NHS Lothian and Universitetssykehuset Nord-Norge. Tom also supports research projects in DMEM University of Strathclyde.