Hospital at Home Care

Exploring the Provider Experience

TAYLOR design

Exploring the Future of Hospital at Home Care and Provider Experience

Hospital at Home Care
Hospital at home (HaH) care allows acute care patients to be treated in the comfort of their own homes rather than in a hospital setting. While not a new concept, HaH care is rapidly gaining prominence as a growing system within the US healthcare landscape.

Advantages and Disadvantages
The HaH care model offers numerous benefits for both patients and providers, enhancing the overall care experience. Providers find increased connectivity with patients, and healthcare systems can alleviate pressure on overcrowded hospitals. However, the model also presents challenges, ranging from reimbursement issues to a widespread staffing crisis within the industry.

Future of Hospital at Home Provider Experience
Findings from our research revealed the realized and potential needs for a future generation of HaH providers that operate exclusively outside the traditional clinical setting.

In contemplating the future of HaH care, the question emerged - what tools, technologies, and services might future HaH providers require to excel in their work and provide the best care possible?

Content Note: We recognize that there is a lack of consensus within the healthcare industry regarding the most appropriate and concise name for members of an integrated care team. For this report, the project team elected to use the term **provider.** With this term, we include members of the care team that provide clinical care for a patient, in their home. Providers include doctors, nurses, nurse practitioners, MA's, and may include social workers, physical therapists, etc.

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01

Approach

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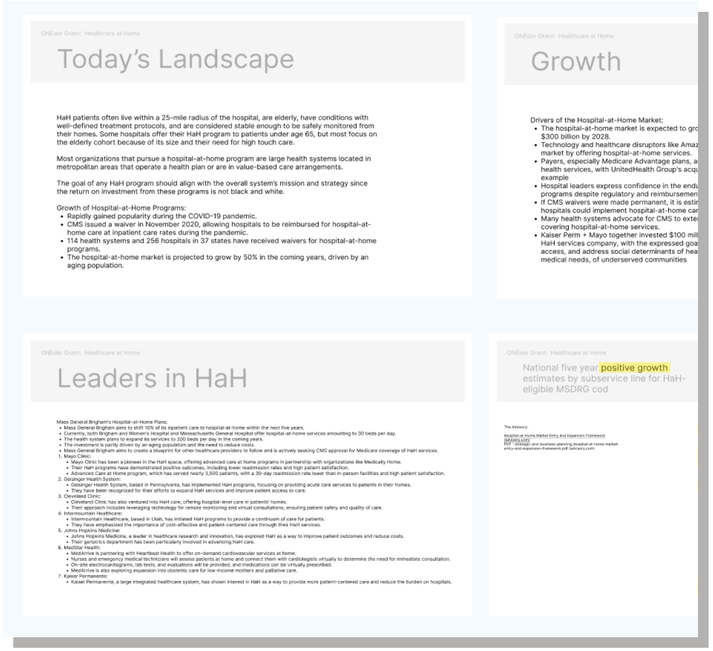
Project Approach

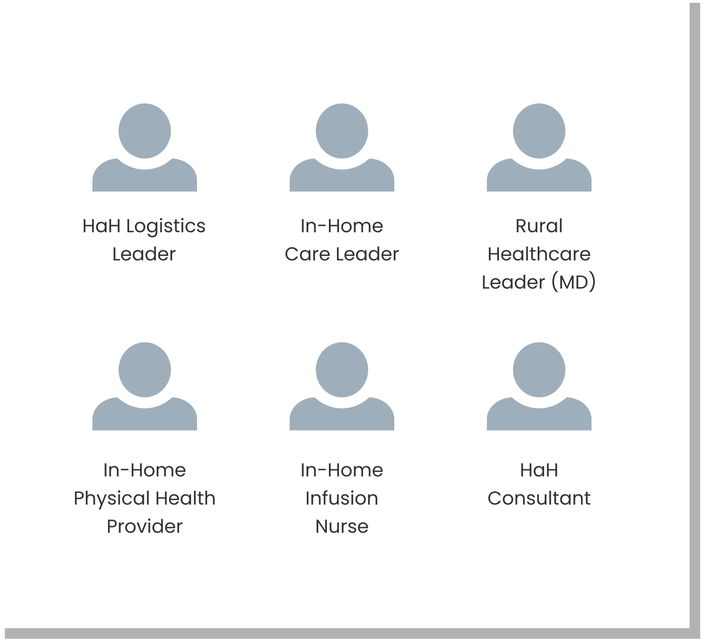
An understanding of the HaH landscape provided a foundation for opportunity, discovery, and mapping. With a map of HaH service delivery, conceptual solutions were developed to gather feedback for further research. These ideas were intended as tools to help catalyze further understanding of this unique care delivery model.

Desk Research + Primary Research →		Design Opportunity →	Conceptual Design →			Findings & Questions
Desk	**Primary**	**Mapping**	**Insights**	**Inspiration**	**Concepts**	**Feedback**	**Takeaways**
Reviewing of research studies, articles, podcasts, and participation in healthcare industry events	Interviewing in-home healthcare experts	Visualizing the current state, pain points, and opportunities for HaH care	Generating statements of understanding and opportunity	Exploring contemporary services, experiences, and products to inform concepts	Developing four speculative concepts to probe future scenarios for HaH care.	Reaching out to HaH experts to get feedback on refined concepts	Sharing relevant questions and conclusions

Research Snapshot (1/2)

Here are a few examples of the research and design activities undertaken





Secondary Research

The team relied upon a wide range of published content from leading experts in the healthcare field on the topic of HaH care.

Secondary Research Synthesis

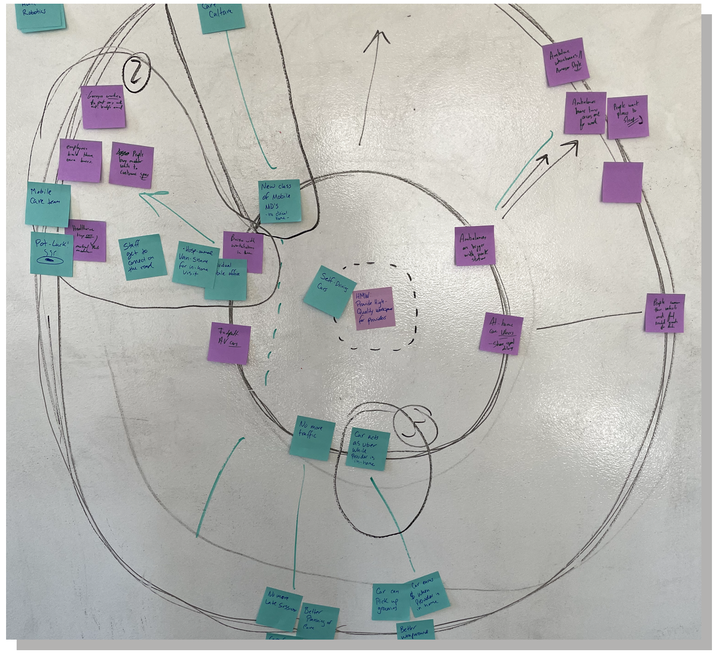
Secondary research led the team down several paths including growth in HaH, mapping the clinician and patient journeys, and understanding who is eligible for this type of care.

Expert Interviews & Feedback Sessions

The team spoke with a range of experts in the development and delivery of HaH care both early in the research and as feedback for our conceptual designs.

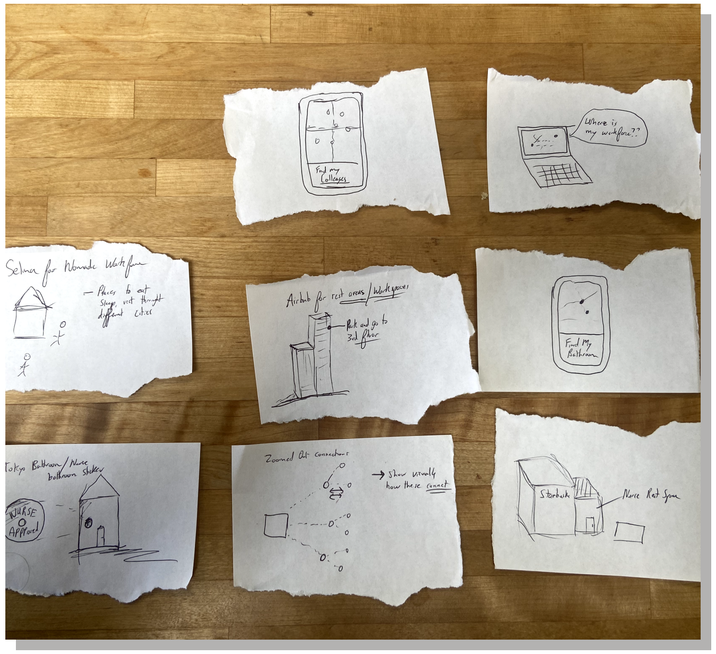
Research Snapshot (2/2)

Here are a few examples of the research and design activities undertaken



Opportunity Exploration

After the team did a deep dive into the provider journey and experience, they created a systems map of interrelated topics that defined the nomadic clinician of the future.



Concept Development

With our areas of opportunity identified and initially mapped, the team began a brainstorming process to rapidly develop and capture ideas for further exploration and refinement.

Expert Feedback

Conceptual proposals were shared with HaH industry experts to garner their reactions to our provocations for potential futures of provider experience.

Research uncovered several opportunities to design for the HaH experience. Specifically, there is an opportunity to learn and explore the provider journey, especially as it relates to the unique needs of a highly mobile clinical workforce.

02

Background of HaH

TAYLOR design

2.1

What is HaH?

+ Background
+ Eligibility
+ Growth
+ Leaders
+ Summary

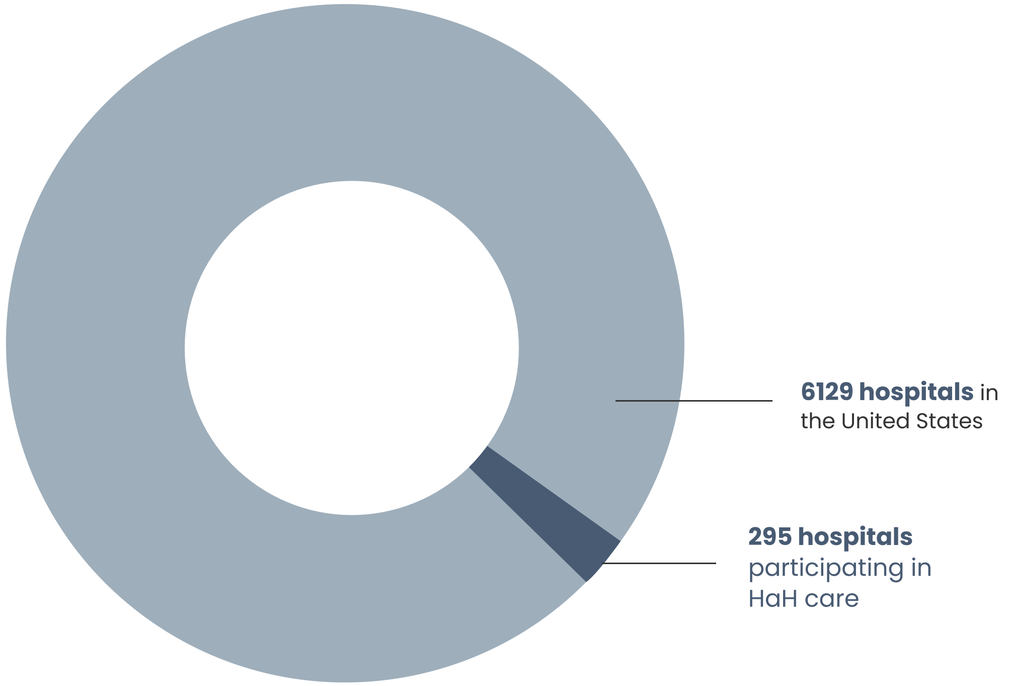
Background

Defining Hospital at Home
Hospital-at-home is a model of care that enables some patients who need acute-level care (care that treats a brief, but severe episode of illness, usually provided in a hospital) to leave the hospital and receive care in the comfort and familiarity of their homes. Different than traditional at home care (such as post-acute therapy) in the severity of health condition that it provides care for, HaH patients have access to 24/7 monitoring and support, host a rotation of mobile providers, and can receive diagnostic, treatment and observation for their specific, complex condition.[1]

History of Hospital at Home Care
The delivery of complex hospital-level care (outside the hospital setting) in the home of patients was first developed at Johns Hopkins Hospital in 1995 by Dr. John Burton, Dr. Donna Regenstreif and Dr. Bruce Lee. Following a pilot from 1996-1998, Hospital at Home care was shown to be a viable but niche service that failed to grow in popularity due to regulatory constraint and the overall conservative approach of the healthcare industry.[2]

A Sea-Change for Hospital At Home
At the height of the COVID 19 pandemic, hospitals were straining to provide enough beds for the influx of patients requiring care. In response to the unprecedented capacity crunch, the Centers for Medicare and Medicaid Services (CMS) established the Hospital at Home Waiver in 2020, allowing hospitals to provide care for acute-level patients in their home. Following this waiver and the overwhelming pressure placed on their bed capacity, in 2023, nearly 300 hospitals (approximately 5%), across 35 states had received the CMS waiver and were actively developing or delivering HaH care for patients.[3] Despite national growth in HaH care, in 2023, the California Department of Public Health (CDPH), the Department of Health Care Services (DHCS), has ended the Acute Hospital Care at Home (AHCAH) program.[4]

5% of all U.S. hospitals have received a CMS HaH Waiver as of 2022



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2. https://www.johnshopkinssolutions.com/solution/hospital-at-home/#:~:text=1995,level%20care%20in%20the%20home.
3. https://fortune.com/2023/08/11/america-hospital-at-home-programs-post-pandemic-stunning-success-calls-for-permanent-fix-carolyn-barber/
4. www.dhcs.ca.gov/Pages/Acute-Hospital-Care-at-Home-Program.aspx

Medical Conditions

Complex, but not too Severe
For HaH to be an appropriate level of care, the medical need should be complex enough to require hospitalization but not to the extent of necessitating a hospital bed.[1]

Specific Conditions
To date, The Centers for Medicare & Medicaid Services (CMS) recognizes over 60 acute conditions as suitable for HaH care including but not limited to:

- Acute respiratory issues like pneumonia, exacerbations of chronic conditions such as chronic obstructive pulmonary disease (COPD) and asthma
- Chronic diseases like diabetes and chronic heart failure
- Infectious diseases like COVID-19 (as evidenced during the pandemic), cellulitis, and commonly, urinary tract infections
- Post-surgery recovery, allowing patients to recuperate at home after less-complex procedures such as joint replacements[2]

References:
1. https://www.aha.org/hospitalathome
2. https://www.johnshopkinssolutions.com/solution/hospital-at-home/#:~:text=1995,level%20care%20in%20the%20home.

The Home Environment

Fundamentally, HaH eligibility is a complex combination of clinical and in-home environmental factors.

A Safe Home
The appropriateness of the patient's home for HaH care is a crucial determinant of eligibility. A patients' home must retain an acceptable level of cleanliness, have unobstructed access to a bathroom, and ensure firearms are secured for patient and provider safety.

Location Matters
The location of a patient's home is an additional consideration. Geographic proximity to a hospital is a requirement for reasonable provider transit, timely care delivery, and access to emergency care.

Caregiver Capacity
Active patient and caregiver participation is essential, involving adherence to care plans, medication management, and communication with healthcare providers. It is vital for caretakers to be comfortable with digital tools for remote monitoring and telehealth, and to provide general care support, such as helping to lift a patient.

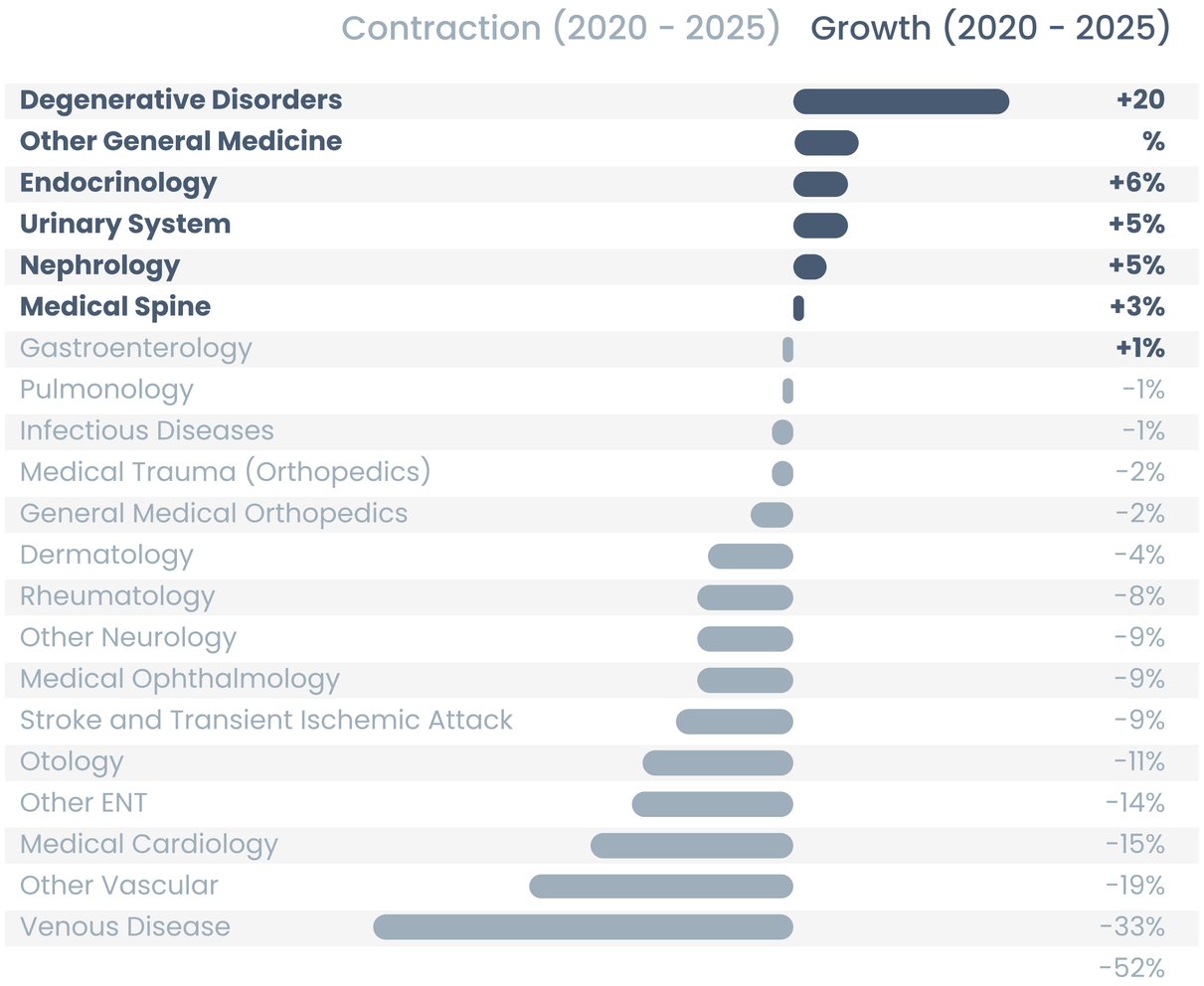
Self Care
Patients considered strong candidates for HaH care must actively engage in their own care. Choosing medical supervision at home presents both opportunities and challenges, requiring full commitment from individual patients and their caretakers to embrace the unique requirements of HaH care.[1]

References:
1. https://www.aha.org/hospitalathome

Where HaH is Headed

Growth Ahead
Numerous leading healthcare organizations agree that given the right conditions, HaH care is poised for immense growth in the coming years.

The Right Conditions
Growth in HaH service will be driven by continued reimbursement strategies, an ability to scale this new workforce, and importantly, by continued specialization and optimization of care for specific conditions.[1]



National five-year growth estimates by subservice line for HaH-eligible MSDRG codes 5
Data from the Advisory Board's Inpatient Market Scenario Planner, 2020-2025

References:
1. www.advisory.com/topics/strategic-and-business-planning/2021/05/hospital-at-home-market-entry-framework

Leaders in Hospital at Home Industry

Today's landscape of Hospital at Home care is dynamic, growing, and driven by a diverse set of innovative leaders. With unique approaches and requirements to HaH care, these private companies, healthcare providers, and partnerships between the two are helping to deliver the future of acute, in-home care.

Cleveland Clinic
The Cleveland Clinic has ventured into at-home care, providing hospital-level services within the comfort of patients' homes. Their strategy integrates technology for remote monitoring and virtual consultations, ensuring patient safety and maintaining care quality.[1]

Johns Hopkins Medicine
Johns Hopkins Medicine stands out as a leader in delivering at-home healthcare to enhance patient outcomes and reduce costs. Beyond their services in the Baltimore/Washington DC area, Johns Hopkins has pioneered a nationally implemented Hospital at Home program, extending its impact to VA hospitals, health systems, and managed care providers.[2]

Boston's Mass General Brigham
Boston's Mass General Brigham has extended its Hospital at Home services to over 3,000 patients, redirecting 15,000 hours of care away from busy hospitals. With a vision to shift 10% of inpatient care to patients' homes within the next five years, they exemplify a transformative approach.[3]

Mayo Clinic
The Mayo Clinic, providing HaH care since 2019, has partnered with Medically Home to care for over 2,600 patients. Their exploration of additional at-home care modalities includes delivering chemotherapy and emergency-room levels of care directly to patients' homes.[4]

Medically Home
Medically Home provides services to healthcare organizations for delivering advanced medical care in decentralized settings. This care model integrates telemedicine and in-person care teams, supported by clinical leadership, advanced rapid response logistics system, and a reimbursement model based on decentralized care. Medically Home's partnerships with Mayo Clinic, Kaiser Permanente, Cleveland Clinic, Yale New Haven Health, and UNC Health further underscore its leadership in advancing at-home care.[5]

Inbound Health
Inbound Health, founded in 2022 by Allina Health and Flare Capital in Minneapolis, offers a comprehensive suite of services to clients, including healthcare providers seeking to deliver hospital-level care at home. By combining technology, clinical leadership, centralized command and control, and regional partnerships, Inbound Health positions itself as a leading partner for healthcare organizations entering the Hospital at Home space.[6]

References:
1. my.clevelandclinic.org/florida/departments/medicine/depts/hospital-care-at-home
2. www.johnshopkinssolutions.com/solution/hospital-at-home/
3. www.massgeneralbrigham.org/en/patient-care/services-and-specialties/healthcare-at-home/home-hospital
4. homehealthcarenews.com/2023/08/mayo-clinics-at-home-care-optimism-goes-far-beyond-just-hospital-at-home/
5. medicallyhome.com
6. www.inboundhealth.com

Benefits and Drawbacks of HaH Care

HaH care has immense potential to provide improved care for acute patients, while facing very real uncertainty and constraints on how equitably it can scale.

Benefits

+ **Happier Patients**
Providing acute care in the home has been shown to enhanced patient satisfaction, reduce readmission rates by nearly 50%, reduce the length of inpatient stays, and increased patient activity. [1]

+ **Lower Costs**
Hospitals and healthcare systems experience a 38% lower average cost, coupled with a decrease in the utilization of in-hospital beds. The reduction in pressure on in-hospital beds creates valuable capacity for higher-acuity and crisis-related care when required. [2]

+ **Quality of Care**
For healthcare providers, delivering care in the familiar setting of a patient's home fosters a unique opportunity to strengthen patient-provider connection, enhancing the quality of care.

Drawbacks

− **Uncertain Finances**
The uncertainty of consistent reimbursement rates from Medicare and private insurers poses a potential threat to the business model of HaH care, especially in California where waivers were not extended. [3]

− **Geographic Constraints**
Geographic considerations can impede access for patients in rural areas. HaH care requires a high density of patients to make the staffing efficiency pencil out financially.

− **Recruitment and Retention**
The universal challenge of recruiting enough qualified nurses remains an ongoing obstacle to the expansion of high-quality care in all healthcare settings.

References:
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2. www.commonwealthfund.org/publications/newsletter-article/hospital-home-programs-improve-outcomes-lower-costs-face-resistance#:~:text=Summary%3A%20Hospital%20at%20home%20programs,efforts%20to%20promote%20their%20use.
3. us.nttdata.com/en/blog/2023/december/the-six-biggest-challenges-of-the-hospital-at-home-care-model#:~:text=There%20is%20a%20current%20labor,and%20even%20outsourcing%20if%20necessary.

HaH offers both benefits and drawbacks while being poised for sustained growth. To optimize the potential for this growth, the team was most interested in further unpacking challenges in the care delivery process.

2.2

Care Process

+ Patient Journey
+ Provider Journey

Research on Patient Journey

The team explored the landscape for optimal patient experience in HaH care and found a wealth of resources available for those developing and designing these services.

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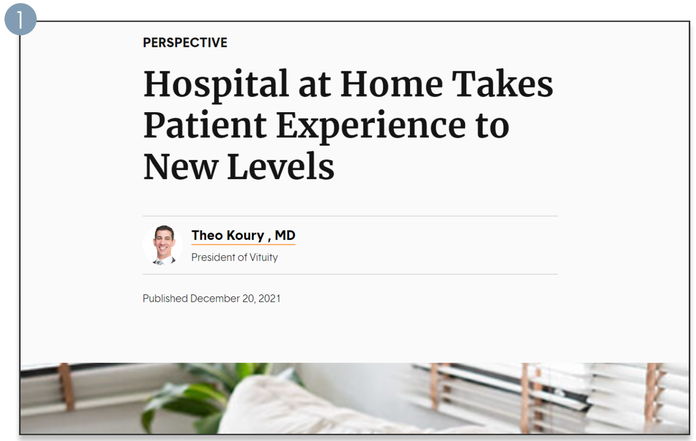

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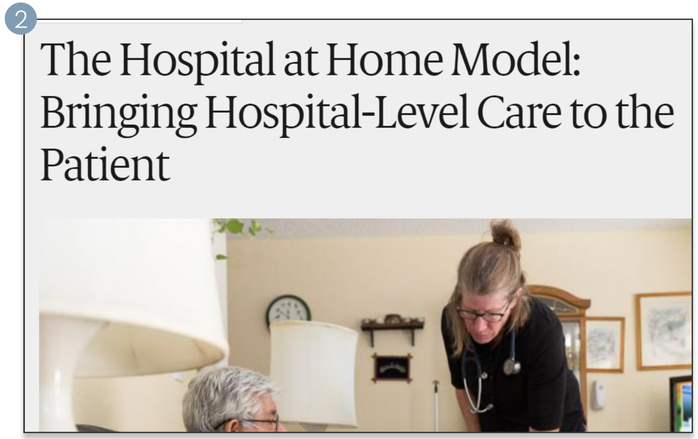

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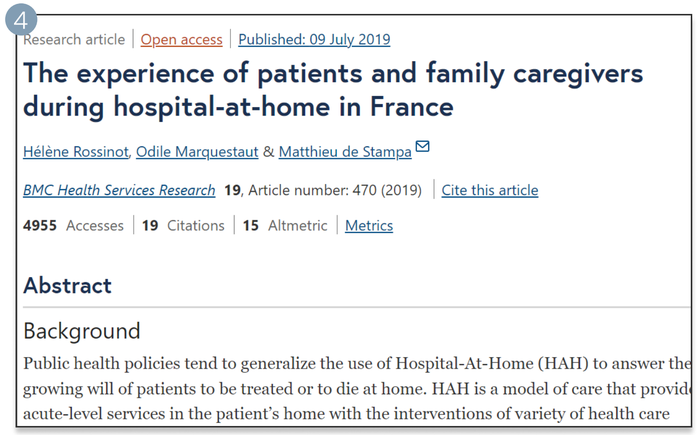

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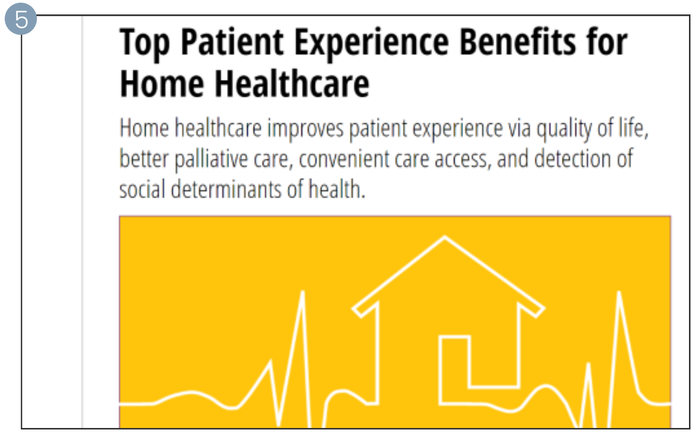

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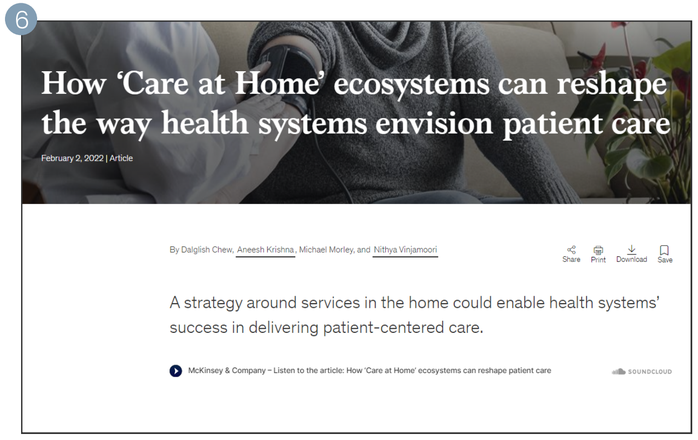

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Patient Journey

Each patient's care is unique depending on their diagnosis, the specific conditions within their home, and myriad other considerations. While acknowledging the variability within the care journey, the team mapped a consistent set of touch points for the patient that outlines fundamental experiences of HaH care.

Determining HaH Eligibility

- Patient has a condition that otherwise requires hospitalization
- Condition can be treated at home
- Patient lives within HaH service area
- Patient has support person in the home to help manage care

Patient is sent home

- Home is assessed and set up to provide HaH care
- Patient returns home via non-emergency medical transport
- HaH care begins and early patient-specific care needs are discovered and addressed

Acute Care in Home

- Patient receives daily care from nurse and or physician including diagnostic and therapeutic measures
- Care team provides 24/7 remote monitoring
- Care team collaborates on care plan
- Medication and treatment are provided and managed as needed

Ongoing Therapy & Recovery

- As high-need care concludes, the patient transitions from acute to post-acute care
- The patient still requires regular visits from medical providers for recovery services
- Patient still requires ongoing monitoring and communication with care team[1]

Discharge

- Finally, the patient coordinates any removal of equipment and receives guidance on their transition to the next stage of their journey [2]

1. www.advisory.com/topics/strategic-and-business-planning/2021/05/hospital-at-home-market-entry-framework
2. https://www.inboundhealth.com/care-model

Provider Journey

Though all instances of care are different, the team came to understand the common touch-points along the care team journey.

Determining HaH Eligibility

- Clinical team determines the viability of HaH care
- Triage team handles intake and patient direction to HaH or inpatient admissions
- HaH leadership assign care team and coordinate case management

Patient is sent home

- Each healthcare system has it's own unique approach to transporting the patient home, set up for in-home care, and preliminary visits by care team

Acute Care in Home

- On a daily basis, there are multiple hand-offs of patient responsibility, depending on time of day, unique treatments, and care team availability
- In-home care team travels in vehicle between patient homes to provide assessment, diagnostic and/or therapies

Ongoing Therapy & Recovery

- As acute medical care winds down, responsibility for ongoing support shifts from clinical team, to other members of the care team, including:
  - Post-acute home health providers (nursing & aides)
  - Social workers
  - Rehab therapists

Discharge

- There is no current, public standard for how post-care discharge is handled
- As most HaH systems are unique to their care-provider, it stands to reason that there is a great deal of variability in this space

1. www.advisory.com/topics/strategic-and-business-planning/2021/05/hospital-at-home-market-entry-framework
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Mapping of patient and provider journeys made visible a lack of accessible research on the topic of provider experience in HaH care. The team strove to learn more about this increasingly important space.

03

Provider Experience

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Focus on the Provider

While the patient experience is critical and ripe for further exploration, several factors informed a focus on the experience of care for the HaH provider.

Key Stakeholders
The team understands that the long term success of HaH care relies, in large part, on a skilled, motivated, and satisfied care-providing workforce. However, there is currently little publicly available research on these key stakeholders.

A Workforce Stressed to its Limits
It is no secret that the healthcare workforce of today is profoundly stressed. Healthcare systems have thousands of unfilled positions, with no clear path to improvement.

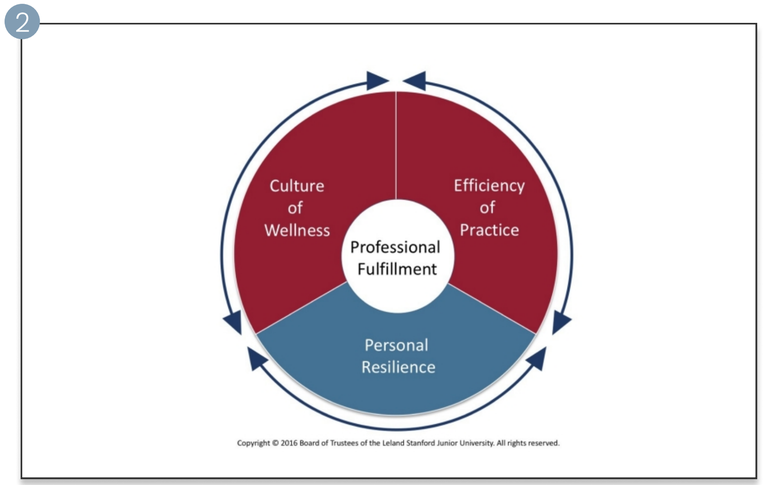
Finding Room for Improvement
With this foundational knowledge, the focus of the work shifted to: what do HaH care teams need to deliver their best work?

Provider Well-being Frameworks

The team acknowledges that provider well-being has been a hot topic for many years, especially after COVID, and that there are multiple successful frameworks for centering the provider at the core of systems and services. Drawing from a few key examples, several focal points emerged that were relevant to our work including enhanced workplace efficiency, psychological well-being, camaraderie, and teamwork.

1

2



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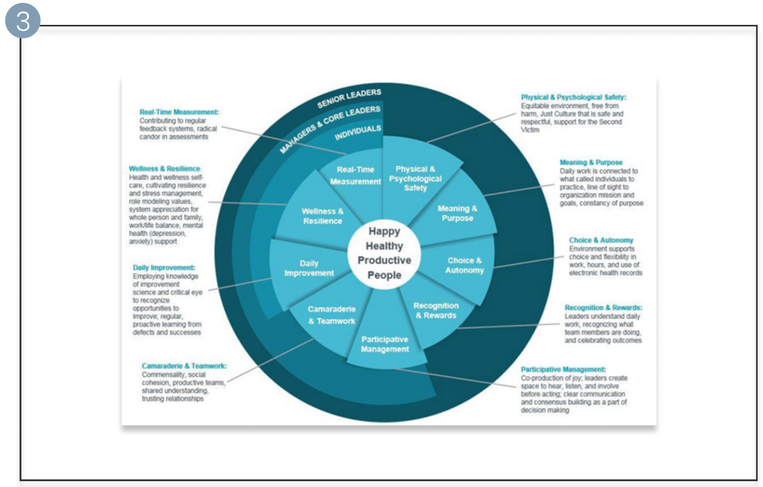

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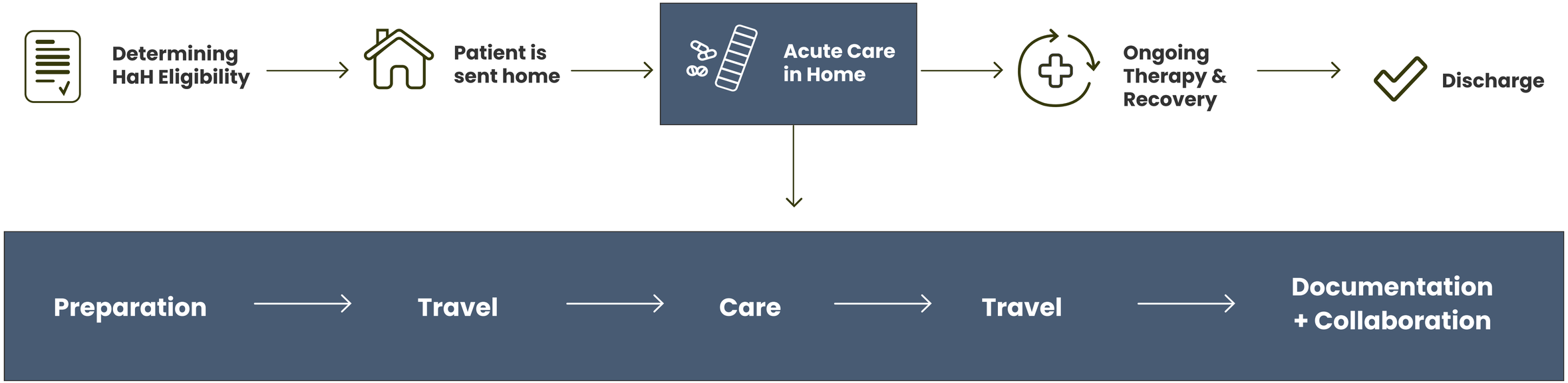
3. gme.providence.org/washington/psychiatry-residency-and-fellowship-programs/psychiatry-residency-spokane/wellbeing/

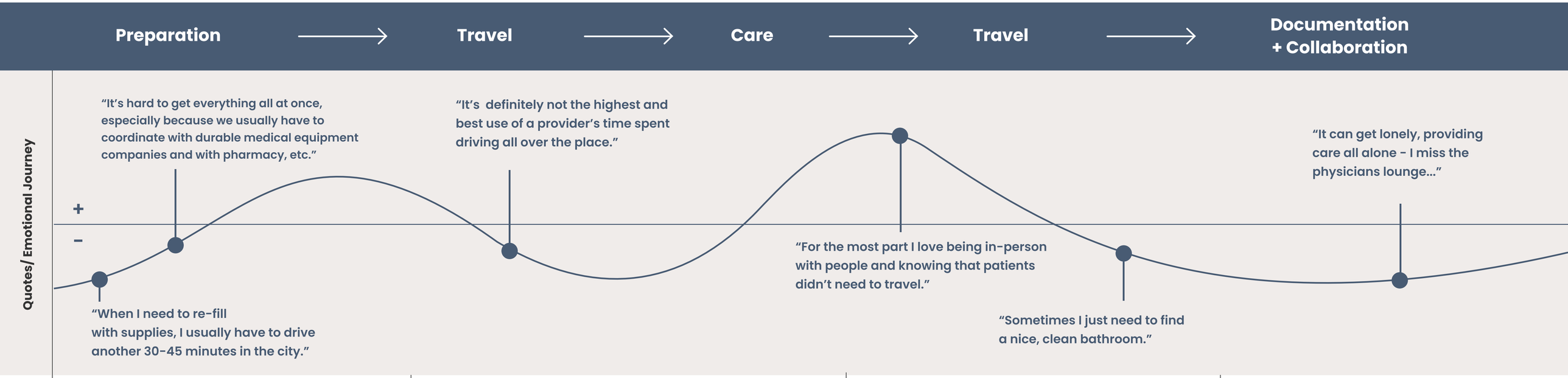
Provider Experience Journey

Within the HaH provider journey (aka care team journey), the time they move to and from patients' homes present a specific area worthy of further understanding and exploration.



Provider Experience Opportunities

HaH providers encounter distinct challenges in delivering remote care. Within these pain points lie opportunities to explore potential future services and products—both advantageous and disadvantageous—for the evolution of HaH care. Quotes below are directly from interviews.



Insights

Coordinating the arrival of providers, equipment and supplies to a patients' home is an incredibly complicated feat of operational management that very few healthcare providers are specialized in, forcing them to grow their headcount, rely on toolkits and checklists and / or make it up as they go along.

The significant effort healthcare providers expend commuting to patients' homes represents a substantial loss of their inherently valuable time. This productivity setback imposes considerable stress on providers, increasing their workload and reducing their satisfaction.

In remote work settings, HaH providers require confidence in the availability of clean, comfortable bathrooms to ensure maximum focus on providing patient care.

Home-based healthcare providers, operating outside the hospital environment, face a notable absence of essential staff-support spaces crucial for sustaining the highest quality of care.

“A lot of the time, it’s just a provider, a car, and a cell phone.”

HaH Administrator

For each insight, the team developed a concept to explore some of the opportunities that were uncovered. Each concept was informed by provider well-being frameworks and discussions with providers. These concepts were then used to gather feedback from key stakeholders.

04

Conceptual Designs

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Future Provider Experience Concepts

The team developed four provocative concepts to gather reactions from stakeholders in order to bolster research findings. The primary stakeholders included a rural healthcare physician, an in-home infusion nurse, and an in-home physical therapist.

4.1 WellDrive

Autonomous and on-demand transportation for HaH providers.

4.2 Included Health

Transportation of equipment and providers is piggybacked on a world-class delivery system.

4.3 Medi

Storefront provider lounges located throughout the communities where HaH Providers deliver care.

4.4 Haven

A network of local-business partners providing available bathrooms, work spaces, and delivery lockers.

4.1

WellDrive

Autonomous and on-demand transportation for HaH providers

Insight:

The significant effort healthcare providers expend commuting to patients' homes represents a substantial loss of their inherently valuable time. This productivity setback imposes considerable stress on providers, increasing their workload and reducing their satisfaction.

In the future:

How might we increase productive time for providers while in transit?

Autonomous Vehicles

Inspiration for this topic was found in a future where self-driving transportation systems reliably carry us to our destinations with no intervention.

Zoox Vehicle Layout
Autonomous cars provide unique opportunities for internal layout. Without a dedicated driver, new orientations for passenger seating and interaction become available.

Zoox Autonomous Vehicle
Autonomous vehicle development in companies such as Zoox provide a window into the future where cars drive themselves safely, consistently and comfortably.

Image Credit
1. zoox.com

Welldrive

Autonomous and on-demand transportation for HaH providers

Meet as a Team

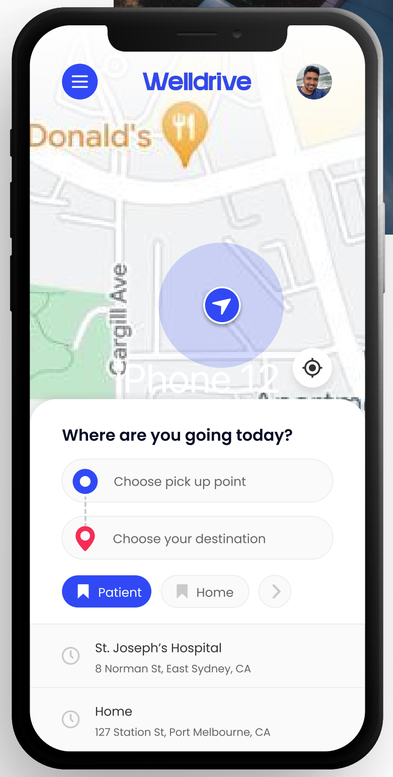
With in-car meeting spaces, Welldrive provides a space to meet, collaborate, and coordinate care as a team.

Find Heads Down Time

With seats designed for comfort and productivity, use the time between patient visits to catch up on the individual work that so often slips through the cracks.

Emergency Transport When Needed

When a patient needs to get to a hospital quickly, Welldrive is there - no longer taking an ambulance off the road, Welldrive serves as a critical lifeline for Hospital at Home patients.



Key Learnings

Excitement With Self Driving Cars

The team heard a common reaction of excitement at the prospect of a future in which providers are no longer responsible for operating a car, one in which they have more time to complete their non-clinical workload.

> “It would be great to have that time to catch up on all the other work in a day.
>
> – In Home Infusion Nurse

Caution With Autonomy

Given the slow progress in the development of autonomous vehicles, some providers expressed skepticism with the safety of this technology. That said, they agreed that with time and experience they could learn to trust this new technology.

> “I would love it and as long as I know it doesn’t crash into someone.
>
> – InHome Physical Health Provider

Time to Meet

Some providers expressed excitement at meeting other staff in between shifts, however, staff on part-time status were not as enthusiastic for this capability as it does not support their workflow.

> “To be able to start and end the day with team members, to be with your colleagues who are taking care of folks and who have similar emotions ... I really like that idea a lot.
>
> – Rural Healthcare Leader

4.2

Included Health

Transportation of equipment is piggybacked on a world-class delivery system.

Insight:

The task of orchestrating the simultaneous arrival of healthcare providers, equipment, and supplies at a patient's home is a highly complex challenge in operational management; few healthcare providers possess such specialized expertise.

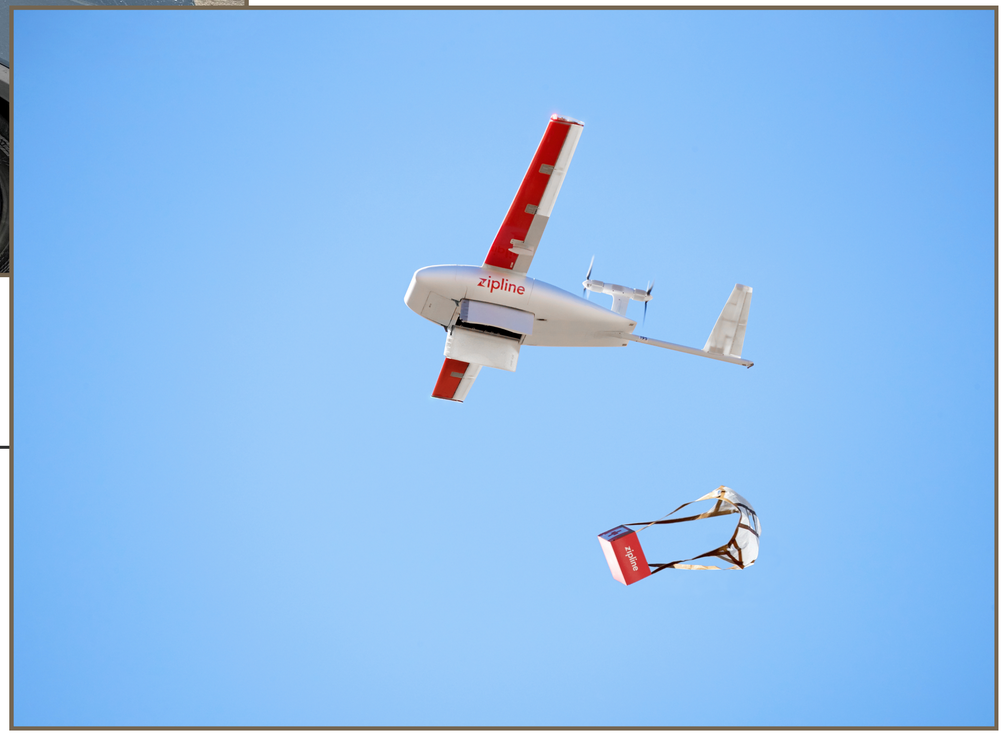
In the future:

How might we streamline the transportation and delivery of durable medical equipment while leveraging existing infrastructure?

On Demand Delivery

Inspiration on this topic was drawn from the reliable and prompt delivery of goods and services with minimal disruption. These services have seen tremendous growth globally.

A Fleet for the Future
Today, Amazon operates a fleet of 10,000 electric delivery vans. These vans were designed to the exact specifications of Amazon to enable seamless delivery.



Zipline Health
Autonomous delivery service Zipline has partnered with Cleveland Clinic to prototype air-based delivery of supplies across the health campus

Image Credit
1. logistics.amazon.com
2. www.flyzipline.com

Included Health

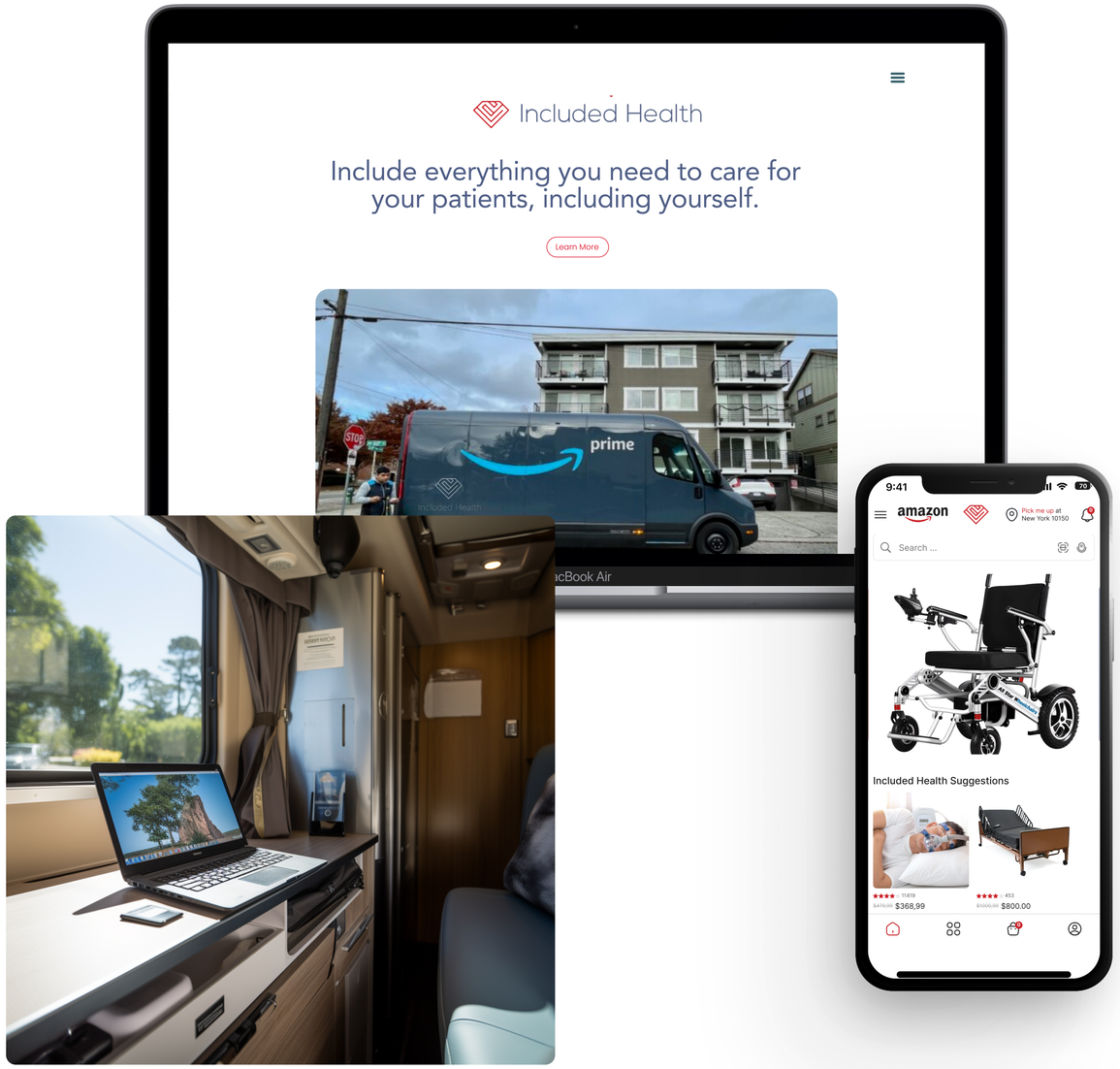
Transportation of equipment and providers is piggybacked on a world-class delivery system.

Order Equipment with Ease

Digital interfaces designed to provide the tools required to do your job and ensure that your equipment is reliably delivered wherever required.

Mobile Workspace

Our trucks are equipped with workspaces for providers on-the-go or for those that might want to ride with their equipment to their site of care.



Key Learnings

Discomfort in Being Delivered

Stakeholders expressed a general discomfort with the idea of catching a ride in an Amazon van, being delivered to homes the same as a package.

> “As a doctor, it might be a little bit more nerve wracking for me personally because I'm used to being in control.
>
> – Rural Healthcare Leader

Partnering Makes Sense

There was very little pushback at the idea of partnering with a trusted non-clinical commercial partner to manage the delivery of durable medical supplies.

> “I just want it to be as easy and reliable as ordering from Amazon.
>
> – In Home Care Provider

4.3

Medi

Provider lounges located throughout the communities where HaH providers deliver care.

Insight:

Home-based healthcare providers, operating outside the hospital environment, face a notable absence of essential staff-support spaces crucial for sustaining the highest quality of care.

In the future:

How might we recreate the physical, social, and collaborative benefits of the clinical break room for remote providers?

Distributed Work

Inspiration for this topic was drawn from the numerous services and spaces that deliver additional value to workforces that perform tasks away from the traditional office.

Amazon Hub Locker
These lockers turn any location with suitable space into a place to pick up supplies, in addition to their groceries, coffee, haircut, etc...

Falck Ambulance Sub Stations
Located throughout Orange County in Southern California, Falck Ambulance Services provides small sub-stations for their staff to rest while deployed throughout the region.

CoWorking Spaces
Though not growing as rapidly as in years past, the role of co-working spaces is still viable in a future that features remote work and high expectations for workspaces design and amenities.

Image Credit
1. www.amazon.com/gp/help/customer/display.html?nodeId=GXCWH4CXLKJD8Z52
2. Falck Sub Station Image credited to report author
3. www.canopy.space/locations/san-francisco-coworking/

Medi

Physical lounges located in the communities where HaH providers deliver care

Confidence you always have a private work space

Each space comes with a HIPAA compliant workspace where sensitive patient information can be discussed freely.

A space to do work and get away from work

We understand that sometimes doing your best work requires doing no work at all. For this, each location has quiet and comfortable spaces for individual rest and recovery.

Always stocked with the supplies your patients need

Each location is stocked with critical supplies - ensuring that you and your patients always have the right tools available for care.

Key Learnings

Retain Spaces to Connect

In-home care providers miss the ability to meet with their peers in the physician or nursing lounge. Therefore, there was enthusiasm at retaining a space to connect and collaborate with other providers.

> “ It seems to provide the social infrastructure that you need so much.
>
> – In Home Care Provider

A Critical Mass is Essential

Providers expressed concern that these spaces won’t truly be useful unless they are well utilized by numerous HaH staff at any given time.

> “ At lunchtime, in a physician's lounge, you might have, you know, 35 to 80 people in there, but you're gonna get five or six or less in a place like this ...
>
> – Rural Healthcare Leader

4.4

Haven

A network of local-business partners providing available bathrooms, work spaces, and delivery lockers.

Insight:

In remote work settings, HaH providers require confidence in the availability of clean, comfortable bathrooms and/or places to eat to ensure maximum focus on providing patient care.

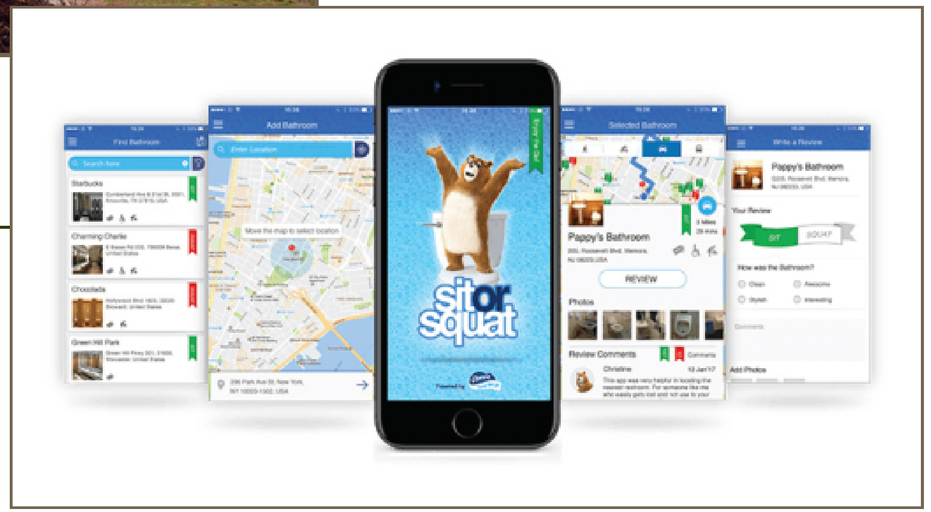
In the future:

How might we support providers in finding comfort while delivering care throughout the community?

Resources for Remote Staff

Inspiration on this topic was drawn from examples of reliable companies and services that serve employees' needs consistently while they work in new and unfamiliar places.

ONCUE Rest Stop
Recognized for having reliably clean bathrooms, ONCUE has become a prioritized stop for travelers across the American Mid-West.



SitOrSquat - Find a Restroom App
Developed by bathroom tissue giant Charmin, this app helps people find clean public restrooms based on user-generated ratings and reviews.

Image Credit
1. www.oncueexpress.com
2. www.businesswire.com/news/home/20170829005320/en/Charmin®-Introduces-New-and-Improved-SitOrSquat-Restroom-Finder-App

haven

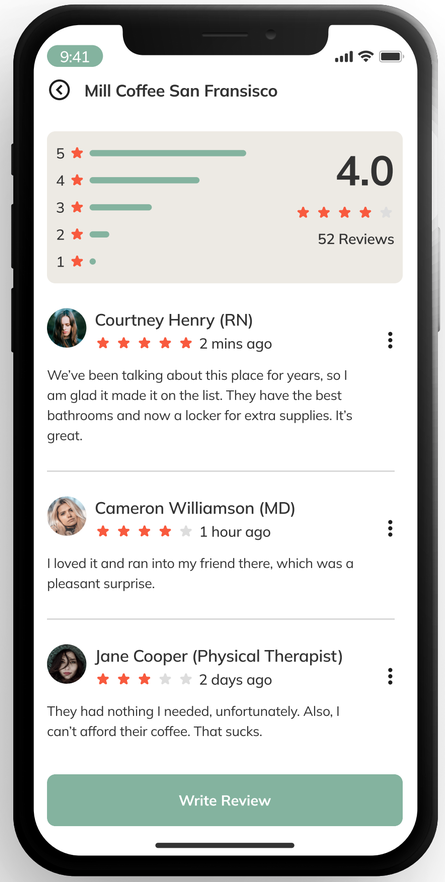
A network of local-business partners providing available bathrooms, work spaces, and delivery lockers.

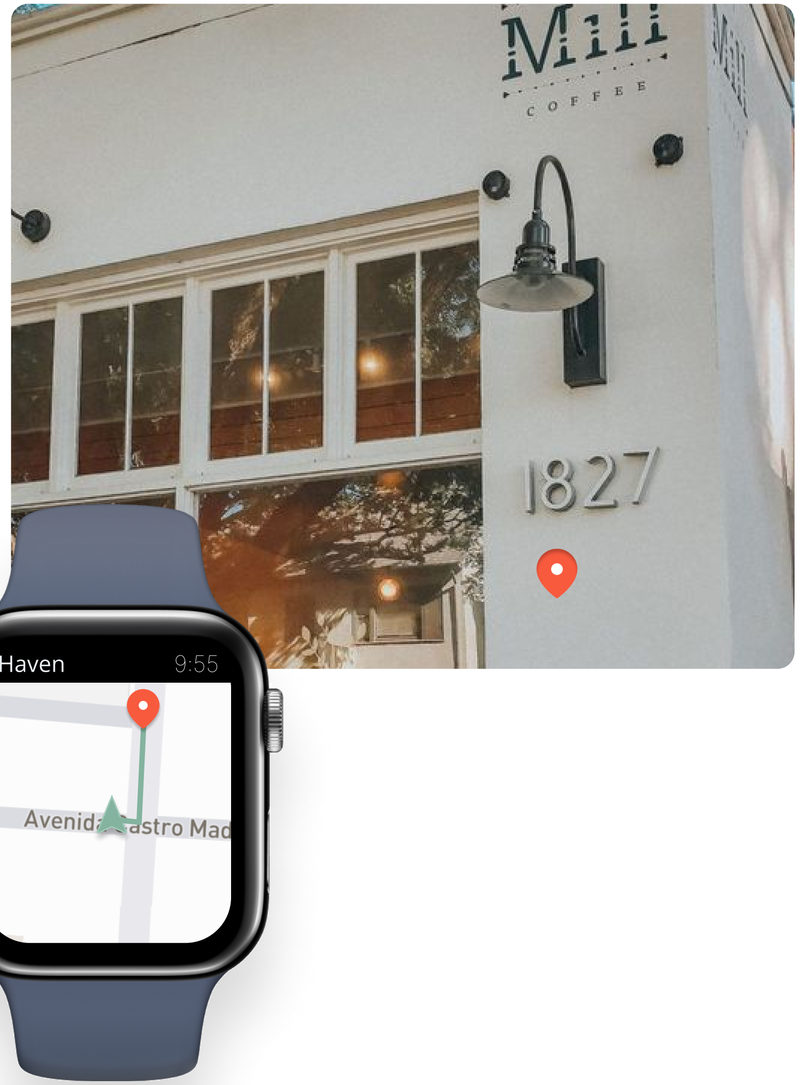
Features That Make Your Day Easier

With real-time alerts and user reviews, find the best restroom nearby. Locations often include private restrooms that aren't available to the public.

Convenience and Experience

Our detailed reviews include information about amenities, cleanliness, and access so you can find exactly what you're looking for.





Key Learnings

Simplify

Today, finding a place to go to the bathroom or a location to pick up equipment is a common issue, so there was excitement about being able to easily locate areas.

> “I would love to be able to have a place to re-stock that’s closer. It would be nice to go somewhere local.
>
> – In Home Care Provider

Community

Some providers appreciate recognition for the work they do and enjoy interacting with community members, so they were excited about this as a potential support mechanism.

> “Sometimes you get stopped and thanked for being a healthcare worker - which is so nice.
>
> – In Home Care Provider

Reviews

People doing at home care already crowdsource recommendations (where to get good food, etc.); however, this isn’t systematized. Finding a way to do this may help reduce stress and effort associated with looking for places to rest, etc.

> “I’d feel much more confident if I knew other providers reviewed it for cleanliness.
>
> – Rural Healthcare Leader

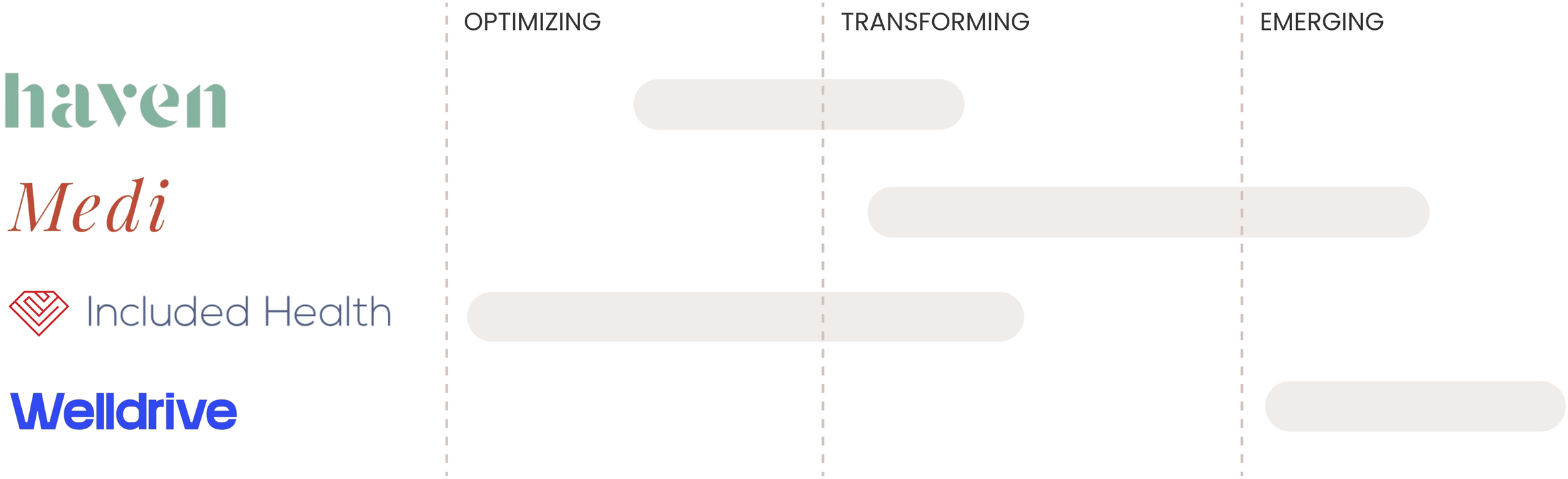
05

Key Takeaways

TAYLOR design

Future of Conceptual Designs

The teams' conceptual designs each had positive and negative aspects to them; however, stakeholders were excited about these ideas. When thinking about the future, each concept can be played out on a timeline spanning from - optimizing current solutions, transforming and building new capabilities, and capitalizing on emerging technology.



Provider Experience Summary

As a result of in-depth research, conceptual development, and expert feedback, some key considerations for the future of HaH provider experience emerged.

Customize Strategies by Location

The experience of transportation and delivery of care can vary drastically by region.

Considerations

- Ensure high quality WiFi network connection at all times given that digital connection is critical and varies by region.
- Tailor rest/collaboration spaces and technology to specific regional needs given the differing requirements of rural and urban care (e.g. rural populations may have less demand for new physical lounges / collaborative spaces).

Account for Basic Needs

Key to the experience of providers is managing logistics for workflow and efficiency.

Considerations

- Ensure that there is an optimized process for the ordering and delivery of durable medical equipment.
- Create strategies for providers to easily work while in-transit to patient's home's given that downtime is already associated with driving.

Keep Community

As providers move the delivery of care beyond the hospital, the need for collaboration will persist.

Considerations

- Provide seamless access to break rooms, restrooms, and high quality food for staff, given many providers are accustomed to these amenities in typical hospital settings.
- Capitalize on the collective knowledge of colleagues, as this is often a great source of information for healthcare staff and is greatly valued for a new mobile workforce.

Although the considerations presented in this work relate to the four opportunity areas that the team explored, it is hoped that this document is a stepping stone for necessary future work required to optimize the holistic experience of Hospital at Home providers.

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TAYLOR design

Taylor Design is a design firm with practices in Planning, Architectural Design, Interior Design, and Design Strategy.

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one workplace

From corporate offices, to healthcare, learning environments and more, we're redefining what creative, high-performing spaces can do.

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