

Breaking Through Barriers

The 3 challenges your organization faces and commercialization success stories from CAN Health Network.



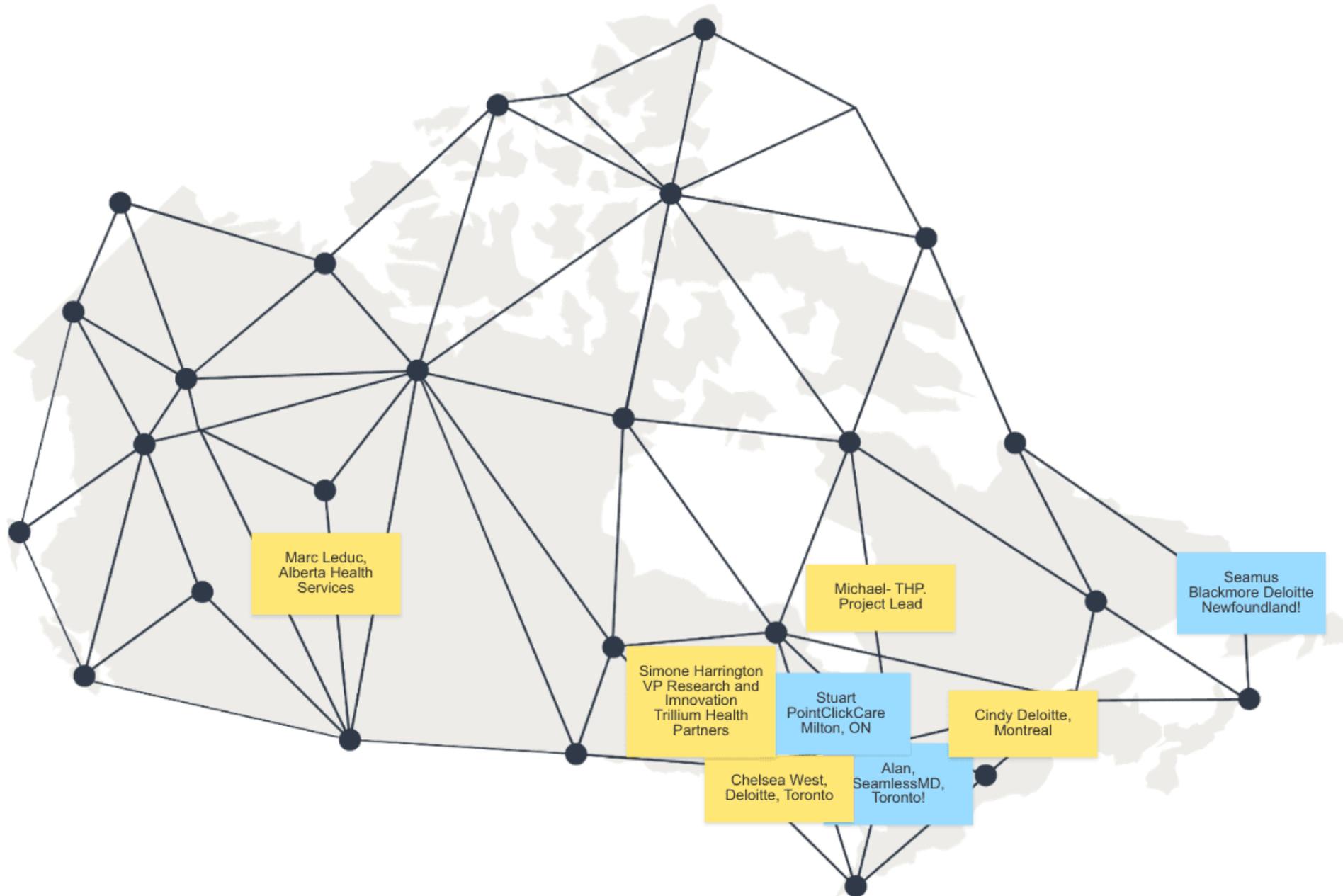
CAN HEALTH NETWORK'S 1ST ANNUAL GENERAL MEETING

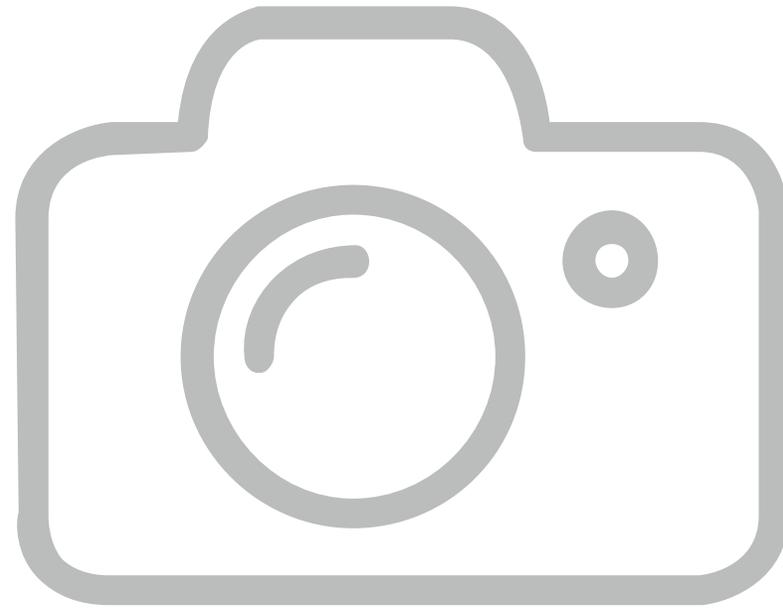
Oct 2020

Energizer

10 min







Group Photo



Seamus Blackmore - Deloitte



Catherine La Rochelle (Deloitte)



Chelsea West, Deloitte



Michael Filer



Alan Sardana



Stuart Feldman



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Cindy Loridon



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Seamus Blackmore

Atlantic Canada Health Consulting Leader
Deloitte

Seamus is the Leader of the Atlantic Canada Health Consulting practice and Chief Architect of the Deloitte Digital Product Factory in Canada. As Chief Architect, Seamus manages the development of key Deloitte products including Health Connect – a comprehensive Digital Health Platform. Seamus provides key digital health insights to many policy makers, and care providers in the country through key consulting engagements.



Alan Sardana

Marketing & Partnerships
SeamlessMD

Alan is the head of marketing at SeamlessMD, the leading platform for Digital Patient Engagement. In his role, Alan is responsible for establishing SeamlessMD's positioning, personality, and partnerships in the market.



Cindy Loridon

Lead Facilitator
Deloitte Greenhouse

Cindy is the Regional Market Lead and Lead facilitator for the Quebec Region Greenhouse program. As Lead facilitator, Digital and Innovation, she designs and facilitates strategic conversations by blending design thinking and human-centered design to accelerate problem solving and innovation process.

OBJECTIVES FOR THIS BREAKOUT SESSION



1 Leave this activity with actionable **steps that can be taken** to overcome barriers in commercialization



2 Learning from SeamlessMD case study to inform your own approach and to address common challenges



3 Have the opportunity to **ask questions and engage with SMEs**

What are the top challenges that organizations typically face as they begin to grow?

Case Study

SeamlessMD was implemented at the Sunnybrook Holland Orthopaedic & Arthritic Centre in 2015 for Joint Replacement Surgery. The technology enables Sunnybrook's clinicians to engage, monitor and stay connected with a patient across the surgical journey by turning the patient's smartphone, tablet or computer into a virtual companion.



Remaining nimble

There are many phases in the life of an innovation. The team makeup that will be successful in the **first phase often does not match the optimal team in future phases.**

Sunnybrook clinician's have busy schedules and limited resources for clinician monitoring. To help mitigate this barrier, SeamlessMD **customized the product so it was entirely patient-driven.**



Balancing sound research with rapid iteration

Software is unique compared to other analog products such as medical devices. Though clinical evidence is absolutely necessary for ensuring safety, **technology requires rapid iteration for success.** Balancing this equation is certainly a barrier.

SeamlessMD was first introduced as a Quality Improvement Initiative with rapid iteration cycles. This allowed us to **troubleshoot user engagement rates before moving onto formal research.** With any new implementations that want to conduct research, we typically push for on-going iterations based on feedback, particularly over the first 12 months.



Designing for end-user/patient adoption

If your product is not being used, the results will not happen. Plain and simple. This is especially evident with technologies such as Digital Patient Engagement.

Though it is very important to have a solid UX/UI, **user adoption also comes down to the implementation itself.** With Sunnybrook, productive kick-off calls, print materials for in-house advertisement, scripts for frontline staff to communicate product with patients, and streamlined quarterly business reviews made high adoption rates possible.



Remaining nimble



Balancing sound research with rapid iteration



Designing for end-user/patient adoption

Key Mitigation Strategies

1. Understanding when you are transitioning between phases and being prepared to make tough decisions to ensure the dream grows stronger even when the team transforms.
2. Clinicians are not product designers or technologists. Explaining why rapid iteration will serve the patient population better is beneficial to start the dialogue. Oftentimes, you will compromise (e.g. 3 months rapid iteration, 9 months research).
3. Address root causes and develop frameworks for implementation best-practices such as productive kick-off calls/meetings, print materials, scripts, etc.

Progress & Impact

SeamlessMD is the standard of care at the Sunnybrook Holland Orthopaedic & Arthritic Centre for joint replacement surgery. To date, Sunnybrook has enrolled over 3,700 patients onto SeamlessMD.

Results from their latest formal analysis from Jan 2017 – Dec 2017 (published 2019):

- 35% of patients used SeamlessMD to avoid 1+ hospital visit
- 71.5% of patients used the program to avoid 1+ phone call to the surgeon's office
- 97.9% of patients felt SeamlessMD was useful during recovery
- 96.8% of patients would recommend SeamlessMD to other patients

“It helped me recognize an infection in the incision and take corrective action.”

Breakout

30 min

Q1: What barriers highlighted in this case study do we face in our own organizations? (15 min)

Q2: How can we apply learnings from the SeamlessMD case to overcome barriers in our own organization? (15 min)

Format:

- 2 minutes of silent reflection followed by a 10 min discussion on each.
- Keep sending ideas into the board. Remember to use the right colour sticky for your group.
- Before you close the discussion, pick a spokesperson to share back to the rest of the group.

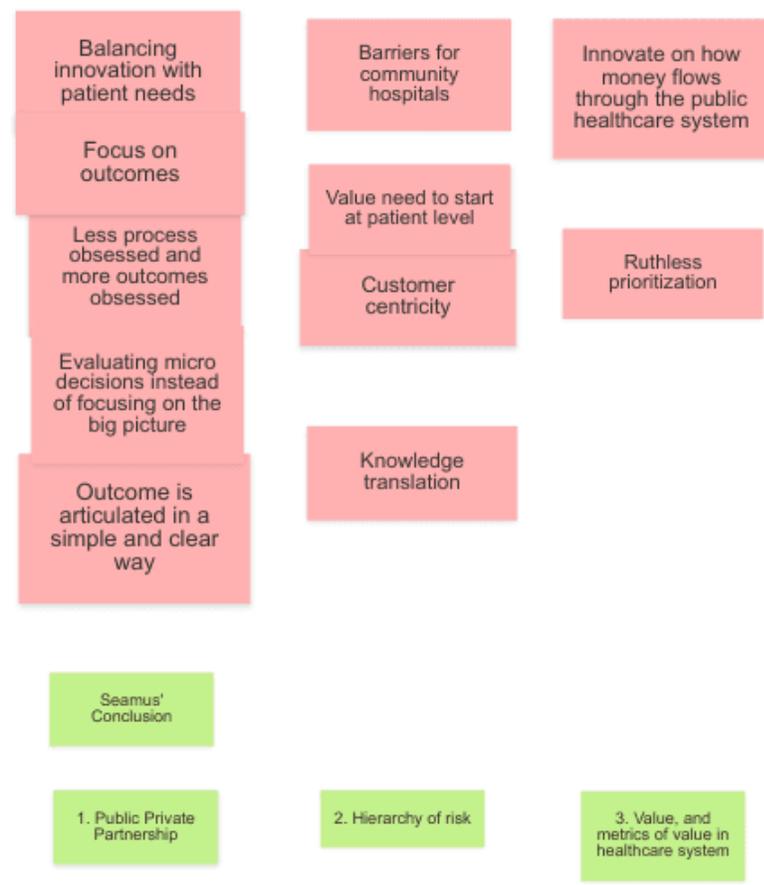


Group Discussion

Q.1 : What barriers highlighted in this case study do we face in our own organization ? (15 minutes)



Q.2 : How can we apply learnings from the SeamlessMD case to overcome barriers in our own organization (15 minutes)



Wrap Up

10 min

1-2 min summary from each breakout group's spokesperson
Reflections from Seamus & Alan



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