THE SERVICE DESIGN AWARD



How Seoul Medical Center overcome 2015 MERS outbreak with service design

: Medical Service Design for Emergent Situation

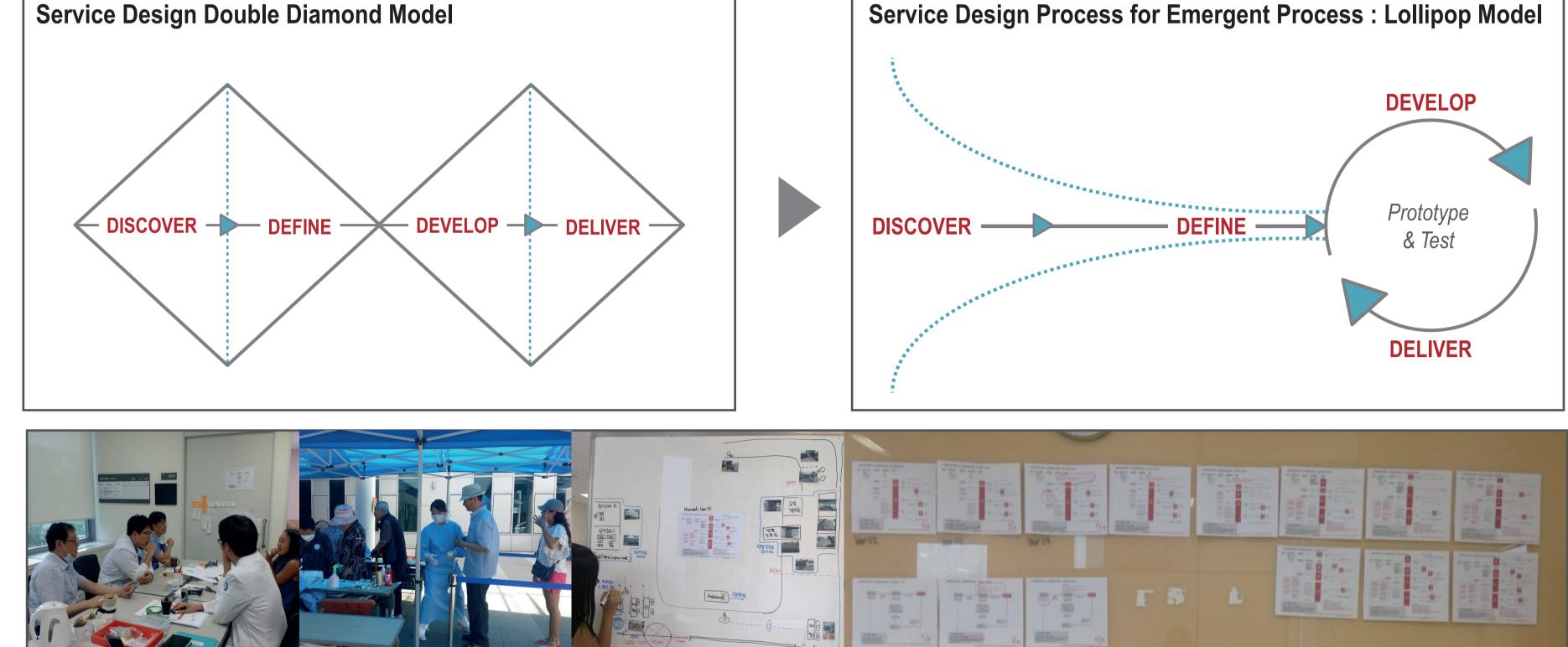
Overview

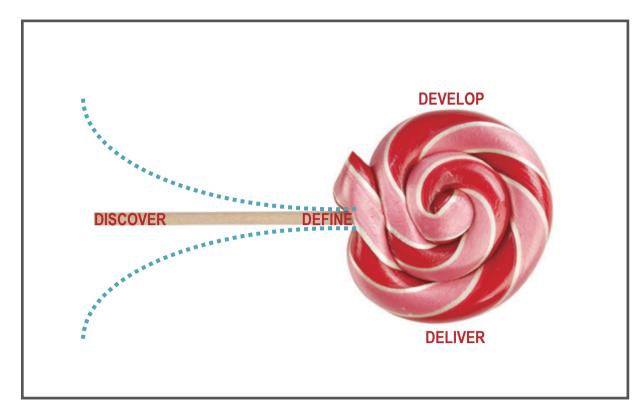
This is the descriptive research which we applied the Service design to MERS outbreak in Seoul Metrocity Medical Center(SMC) in May, 2015. The first mission is separation the MERS suspected patients who had fever of respiratory symptoms from the normal patients. The second one was coming down the feeling of uneasiness and sudden breakage from unrecognized MERS patients. We need effective process and manual based on service design thinking and process which applied to emergent situation.

Process

Service Design Process for Emergent Process : Lollipop Model

We modified the traditional service design model – "Double Diamond Model" as new process which could apply promptly on emergent medical situation. This new Model started from making simple prototype and simultaneously collecting the ideas and resources (Discover). After that we made the objects and principles to solve our problem confronting (Define), and then we develop the new manual based on those objects and principles (Develop) and then did the immediate application to field (Deliver). If we found the expected situation and problem, we got the feedback from the field voice.



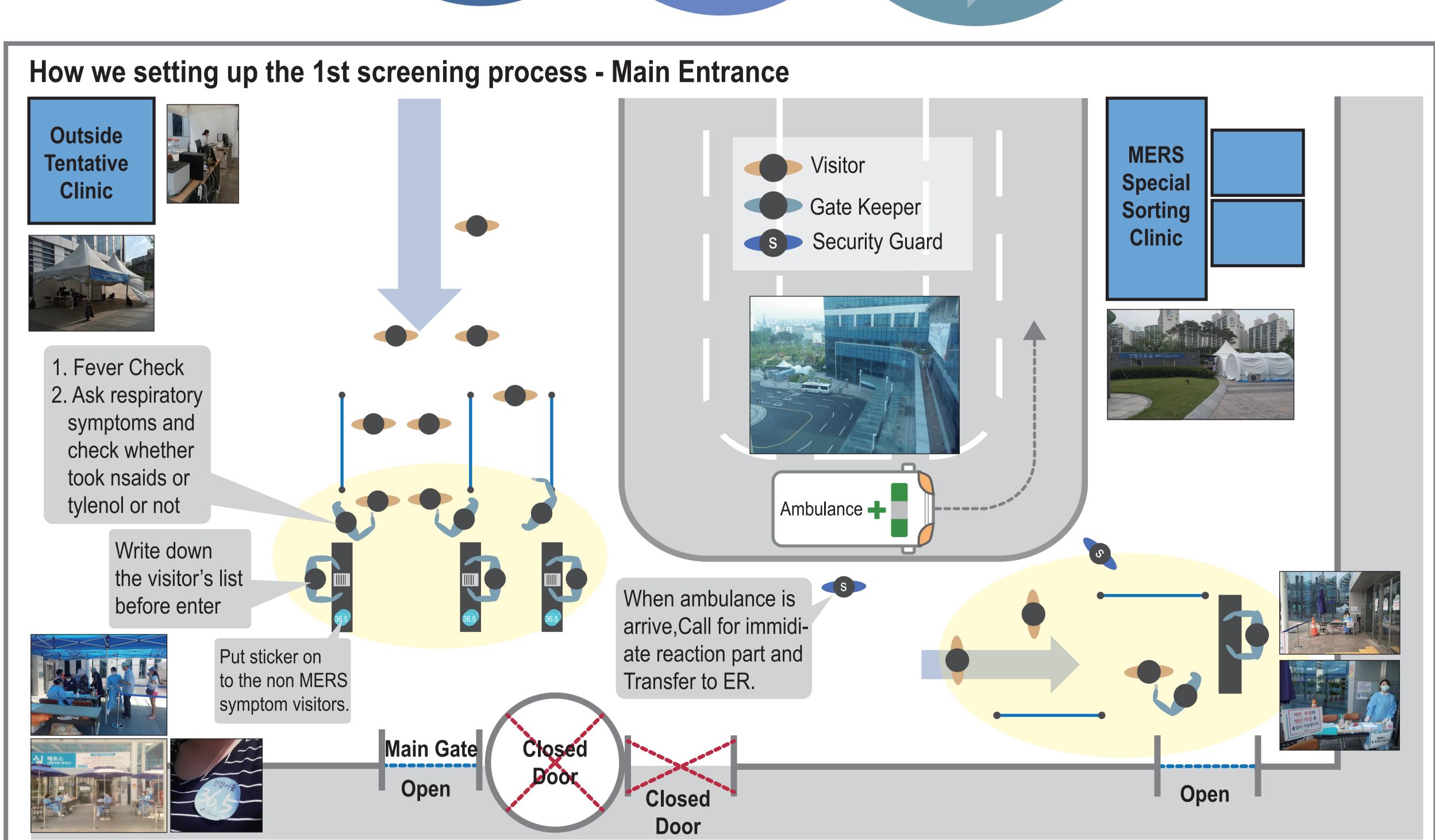


Why Lollipop?:

The maintenance of this repetitive process controlled the number of correction procedure and minimized the revision. This whole new approach involving repetitive Prototype & Test resembles the Vortex of Lolllipop. We concluded our process as the Lollipop Model.

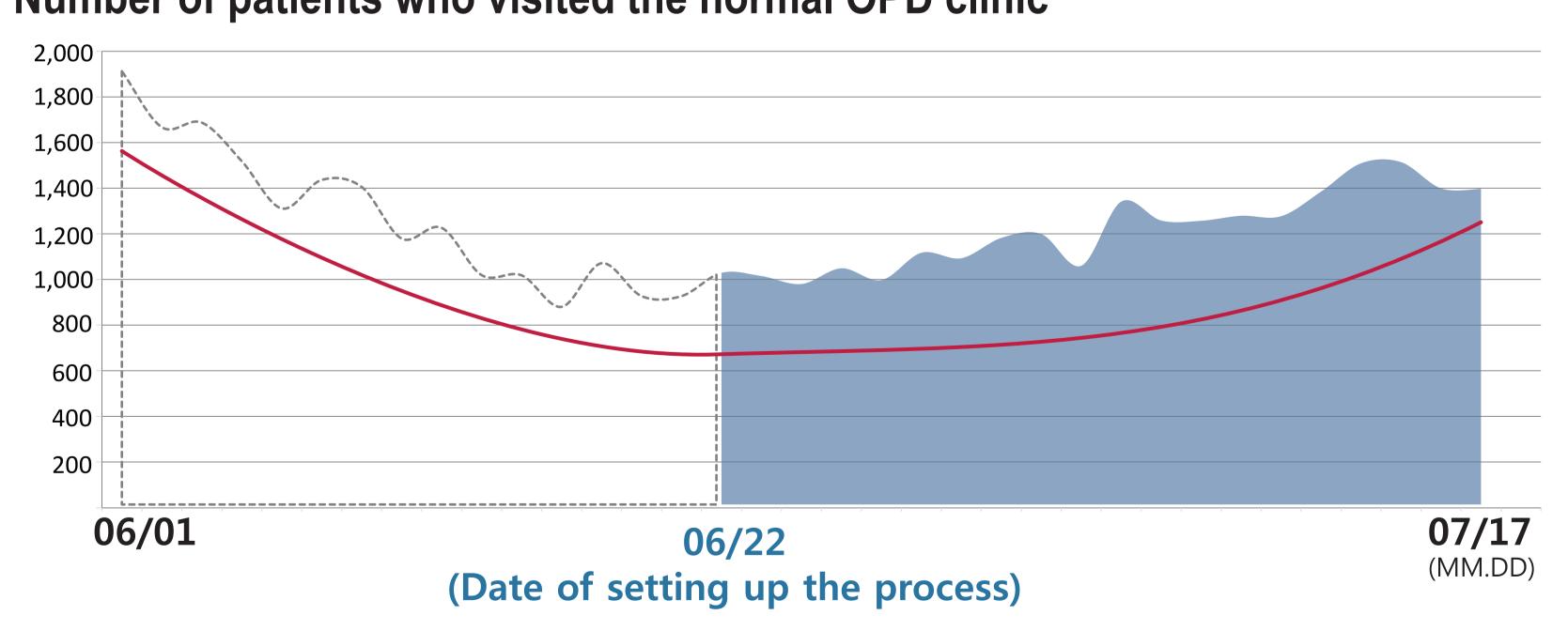
■ The Benefits of design





Effect

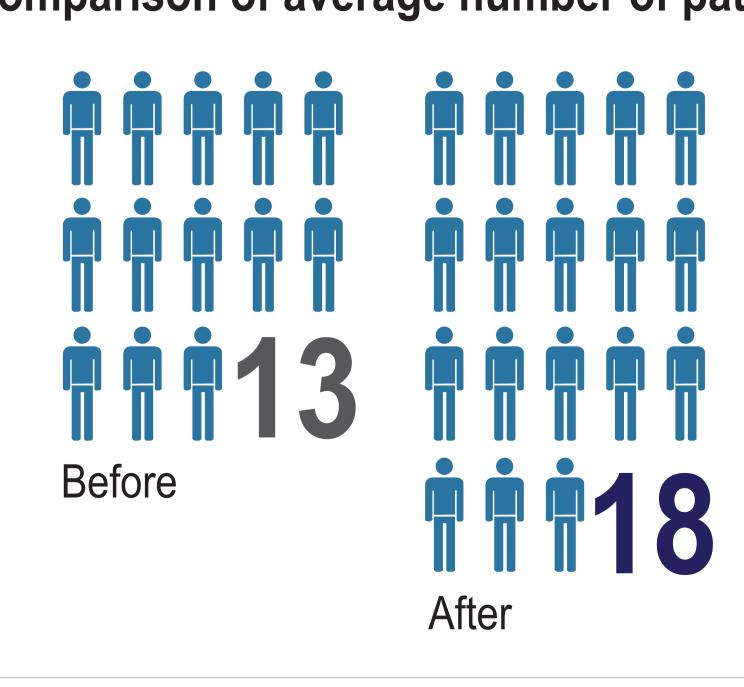
Number of patients who visited the normal OPD clinic

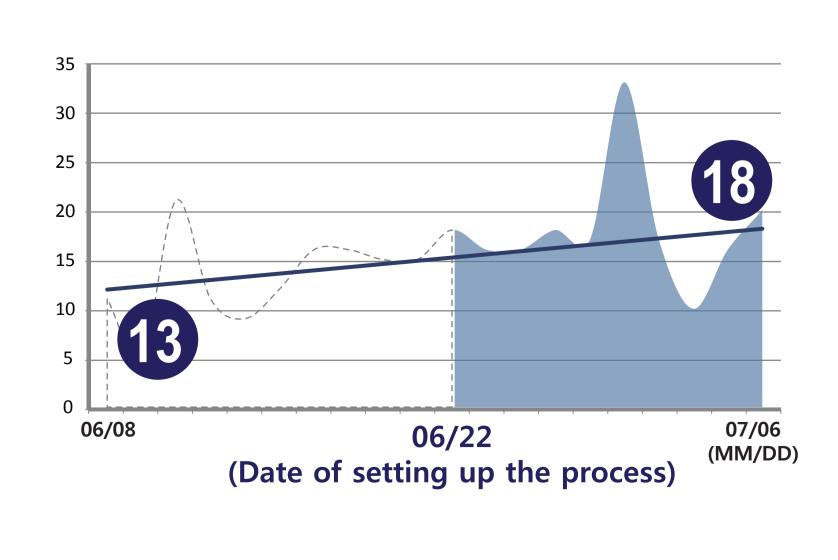


The increased number of patients without MERS suspicious symptoms who visited the normal OPD clinic

'The MERS safety hospital' through this process was important issue for the Exit plan after the MERS outbreak. This message was one of the defense mechanism for the maintenance the patient numbers.

Comparison of average number of patients with MERS suspicious before & after setting up the process





The increased number of patients with MERS suspicious symptoms who visited the outside tentative clinic and special MERS sorting clinic

After setting up MERS process manual, we could sort more numbers of suspicious patients than before. Therefore we could decrease the probability of infection in Hospital.