SDN ACCREDITED PROFESSIONAL

Self-assessment by Molly Fuller

SUBMITTED ON 30 JUN 2018



I currently work as a/at:

I currently work at Stella, which is the parent company of Blue Cross Blue Shield of Minnesota. I'm the service design strategist on the team. I lead our team through a double diamond service design methodology on all our projects.

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https://www.mollyfuller.com/

My educational background:

My educational background is in design and human factors. I learned service design throughout my schooling and design internships. My first job was as a service designer at the Mayo Clinic's Center for Innovation. There I grew my knowledge of service design. In my role I led human-centered design workshops teaching nurses, providers, and other clinic staff on the methodologies and tools of service design.

The following theories are the key components of my approach to service design:

As a service designer, the overall structure of the design process is research, synthesis, prototype and experimentation, pilot and implementation. I want those I'm working with to understand my process, understand the value my skills bring and how my process is similar or different from other disciplines. I promote other frameworks (double-diamonds, loops, fuzzy front ends) when it helps bring clarity and understanding of my work to my partners. One technique in the research process I believe is incredibly valuable is actually becoming the user. I find there are nuances and subtleties that can go unnoticed or left unsaid in observations and interviews. As the user you notice the little movements, you feel the emotions of embarrassment, frustration or joy that uncovers further insights.

These are the most relevant resources I base my work on and I recommend them as a body of knowledge in service design:

I've combined many of the various human-centered design and design thinking toolkits into a toolkit that fits with the team or organization I'm working in, these toolkits include Frog's Collective Action Toolkit, IDEO's human-centered design toolkit, and the d.school bootcamp.

I like the books This is Service Design Thinking and This is Service Design Doing as references for explaining service design to participants and an easy book for them to follow

I really like the Peer Insight Designing for Growth book because it provides activities and resources that are easy for novices and people from all fields to grasp. I recommend the SDN website and Touchpoint journals and use articles when revelant in trainings. I think these are the best resources of published and case studies of service design.

 $Ialso\ look\ for\ articles\ on\ Medium\ and\ Fast\ Co.\ that\ are\ meaningful\ and\ relevant\ to\ service\ design\ and\ the\ industry\ of\ participants\ I'm\ training.$

I have X years of working experience in service design:

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I have particular experience in the following service sectors:

I have a focus and experience on the healthcare sector. I have worked for a medical device company, and for the Mayo Clinic, a world renowned medical facility. Harken Health, a start-up health insurance and primary care company, and now Stella, a consumer focused health care company with a sister company in health insurance.

These are the service design projects I have successfully delivered:

Breast Cancer Decision Support Tool: Mayo Clinic Breast Cancer Department, 2014, 1 year duration. I lead and supported the Breast Cancer Department in understanding their patients and clinic back-end services in order to develop a decision support tool to help patients make the best medical choice for them.





https://www.mollyfuller.com/work/#/breast-cancer-app/

Harken Health Experience: 2017, 2 months, Harken Health. I mapped out the entire companies experience and tied the experience to metrics. We used these metrics to monitor our experience and make adjustments to our services based on the overall experience metrics. https://www.mollyfuller.com/work/#/nps-strategy/

Bariatric Application: 2012, 1 year. Led the Bariatric surgery team through human-centered design process to better understand their patient population and design an app to help them through their bariatric surgery journey. https://www.mollyfuller.com/work/#/bariatric-app/

CoDE Projects: 2011-2017, 1 year project durations. Over the course of my time at the Mayo Clinic, I lead our innovation grant teams (8-10 each year) through our service design, human-centered design methology. Projects ranged from digital tools and services, physical products and full services.

Pediatric Transition: 1 year, 2016. Led the research execution of several service design experiments for the Pediatric department to better understand how to transition teens with complex chronic conditions from their pediatric provider to an adult provider. https://www.mollyfuller.com/work/#/transition/

I have provided service design training sessions and/or other educational experiences for X years:

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My philosophy as a trainer is:

My philosophy on a successful service design training involves; setting up the right agenda, tone and mindset through a warm-up activity, then leading participants through exercises and activities that help them understand the design process. First an activity that leads them through understanding how to observe people, how to conduct an interview, and how to create a prototype.

These are the service design training sessions and/or other educational experiences I've facilitated within the last year:

Within the last year all of my work has been as an in-house designer leading my team of 8 through the service design methodology across all of our projects. Including research, business model ideation, prototyping/experimentation and implementation support.

I mostly provide my training offerings in the following language(s):

English

I mostly provide my training offerings in the following countries/cities:

Minneapolis, MN, USA.

I cover the following topics during my training offerings:

- History of service design
- Differentiation of service design to other approaches like design thinking, service marketing and service branding
- Relationship of service design to agile, scrum and lean
- Service dominant logic
- Creativity and ideation processes
- Visualisation techniques
- Prototyping of services
- Implementation of service design concepts
- Measuring impact of service design, relating it to Key Performance Indicators (KPIs)
- Service design for cultural change
- Organisational development

My training participants typically have the following level of experience:

- Novice (new to service design)
- Fundamental (basic knowledge)

These are my favourite cases I use to inform participants about the impact and value of service design:

https://www.service-design-network.org/case-studies/cs-dma-design-in-schools-australia - This one I just started using as it shows how children can learn and lead a service design project and how they execute all the elements of the methodology.

https://www.ideo.com/case-study/helping-young-adults-make-smart-money-decisions - this case study is a good example of taking an old and mostly foreign industry of finances/savings and making it relevant and appealing to a different generation. This relates a lot as most young people don't understand healthcare and health insurance and so using this example as a way to design a service and campaign around educating and changing healthcare is compelling.

http://www.servicedesigntoolkit.org/cases-older-citizens.html - this case study is relevant as a lot of my work focuses on the elderly population and provides me with





examples for ways to conduct co-design sessions with elders.

https://www.service-design-network.org/touchpoint/vol9-2-measuring-impact-and-value - this is relevant as it's always harder to measure services and experiences so being able to have a resource and references to use in my work is helpful.

These are the service design methods and tools that I use during my sessions:

The first exercise is about empathy building and observation. Participants are given gloves to stimulate arthritis and glasses to stimulate cataracts. Then they have to correctly fill a pill box with the bottles of pills they are given. Their partner has to observe and write down what they notice, hear and see. Then they switch roles. After they discuss what they saw from each other and then go into prototyping a better way for that person to dispense/organize their pills. Next they have to identify ways to test out their new concept and what metrics they would use to identify success. Another activity is the restaurant activity where partners interview one another about their favorite restaurant experience. They then come up with 5 concepts for this person's ideal dinning experience. They discuss with their partner and then redefine into one concept.

After successfully attending my training sessions, participants will typically be able to:

Understand what empathy is, understand the importance of observations and interviews. A basic understanding of how to conduct interviews and observations. The importance and value of rapid iteration and how to build out prototypes quickly. How to map out a service prototype and how to build an experiment plan.

I apply the following evaluation tools to make sure the participants have understood the content of my sessions and gained the expected competencies and skills:

While at the Center for Innovation we would survey participants prior to our session on their understanding of the design process. After the kick-off event we surveyed them again on their knowledge of the design process. Another metric we captured was through our working with participants on their project if they were taking on more ownership and design type roles.

I systematically evaluate and improve my offerings based on feedback. These are examples of feedback that have led to improvements:

We received feedback from one group was that the timing was too short for them to retain everything so we decided to offer a longer weekend bootcamp to really allow people to immerse themselves more deeply into the methodology and tools. Other feedback was making the case studies or examples relevant to what they are working on now, so I always try to find examples that pertain to the participants to help them grasp the concepts more fully.

I have participated in the following service design-related activities in order to stay up to date, share my experiences with peers and receive their supervision within the last 12 months:

- SDN Global Conference
- SDN National Conference

I actively support the local or national service design community through:

I was one of the founding members of the Minneapolis-St.Paul Service Design Network Chapter. I was the lead organizer of the first SDN Midwest 1-day conference, held in Minneapolis, MN on June 15th. I organize the monthly meetings for our chapter and maintain our email list.

I have participated as a speaker in the following events:

Customer Focus North: July 17th, 2018 Designing an InnovationTeam "Just Right" https://www.customerfn.com/

Designing of Medical Devices, University of Minnesota: April 10th, Compression Clothing for Teens with Autism http://www.dmd.umn.edu/2018/wearables-1.html

DevJam Product Conference: May 7th, 2018. Designing Decision Support for Breast Cancer Patients. https://vimeo.com/271139208 https://www.product-conf.com/full-speaker-list/

Midwest UX October 2017: Do you really need an app for that? http://2017.midwestuxconference.com/speakers/molly-fuller/https://vimeo.com/240154099

 $Marcus Evans Design Thinking 2016 \ http://www.marcusevans-conferences-northamerican.com/marcusevans-conferences-event-details.asp? \\ EventID=22643\#.Wzb2y6dKhPY$

 $Change \ by \ Design, \ Harvard\ X\ Design, \ Jan\ 2013\ http://www.core77.com/posts/24280/Harvardx Design-QnA-with-the-Mayo-Clinic-Center-for-Innovations-Gerry-Greaney-and-Molly-McMahon$

I have published the following books/articles on service design and related fields:

Individualizing Diabetes Technology Use by Better Understanding of Human Factors publication. Feb 2015 publication, 8th International Conference on Advanced Technologies & Treatments for Diabetes





 $https://www.researchgate.net/publication/279323989_INDIVIDUALIZING_DIABETES_TECHNOLOGY_USE_BY_BETTER_UNDERSTANDING_OF_HUMAN_FACTORS$

TO VAD OR NOT TO VAD: That is the question. Improving the experience of receiving a Ventricular Assist Device (VAD) publication. June 2014 publication, Proceedings of the International Symposium of Human Factors and Ergonomics in Healthcare. http://journals.sagepub.com/doi/pdf/10.1177/2327857914031039

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