Propelling the country into an unprecedented health and economic crisis, the COVID-19 pandemic has put significant strain on the nation’s social safety net. Spending billions of dollars on programs to save lives and keep people afloat economically, health and human services (HHS) agencies and labor and workforce development programs are dealing with demand for services at volumes most of them have never seen before. Many individuals and families find themselves interacting with HHS agencies for the first time ever.

Given resource constraints, HHS agencies cannot simply scale up existing processes to meet this overwhelming need. To deliver service that can make a real difference for the individuals and families that have had their lives upended, agencies should shift their thinking, putting the focus on the experience they deliver to the people they serve. In times of crisis, human-centered design (HCD) becomes even more important as a way of targeting limited resources to areas where they can have the greatest impact.

HCD starts from the premise that individuals’ beliefs, values, feelings, and ambitions help to determine what those people want from organizations that serve them. When an agency designs, develops, and delivers policies and programs, HCD puts people—the individuals and families an agency serves—at the center of that effort. Bringing end users into the design process with public servants and other stakeholders, designers work to understand customer needs and then use those insights to improve service design and delivery.
Here we explore the ways in which HHS leaders are incorporating HCD practices into their responses to the COVID-19 pandemic.

How can you focus on what’s important when everything is urgent? Prioritize with data.

During a crisis, government agencies should quickly identify actions they can take that will have the biggest impact. Combining quantitative data analysis with HCD techniques, decision-makers can determine which human needs demand the greatest focus.

This principle, for example, helped one state manage a large increase in benefit applications at the start of the pandemic. Officials hoped to improve service times by encouraging more applicants to use online self-service tools to submit their applications. Unfortunately, many clients who started their applications online abandoned the process before it was complete. Marrying web analytics data with client feedback, researchers determined that the screen with the highest rate of abandonment was the final submission screen. After entering all of their data into the application, nearly a fifth of applicants were not taking the final step to submit.

Focusing on that last screen, analysts discovered an opportunity to improve the user interface. While a toolbar at the top of that screen told users that their applications were 100 percent complete, users actually still needed to “submit” their applications by clicking a button at the bottom of the screen. Some users skipped scrolling down far enough to discover that button. It took only a few hours of analysis and discussion to locate and improve the design, helping to prompt more clients to successfully submit their applications online.

Another HHS agency used HCD to respond to a significant volume of changes being introduced to its programs at a time when resources and timing were tight. The agency focused on groups that would feel the greatest impact from these changes, including those who would see their renewal periods extended, those who would see their premium payments extended, and those who were involved in multiple programs. The agency used this data to map the way information would flow when it communicated with clients about those changes. The map helped to streamline communications and create a consistent cross-channel experience, especially for people who might otherwise be overwhelmed or confused by all the messages they received about changes to their benefits.

One state used email to survey program participants about their digital experience when applying for Medicaid and food assistance. The agency received an overwhelming response. Many participants offered contact information, allowing researchers to conduct more in-depth phone interviews. This strategy helped researchers obtain a robust sample, with representation from across the state.

Another state, while designing a new digital strategy, wanted to hear from a broad cross-section of residents about their digital needs and experiences. Researchers engaged a digital market research firm that recruits participants online and provides tools for virtual interviews, digital journaling, and online focus groups. This approach let researchers collect the information they needed in less than two weeks.

How can you bring in the human perspective during isolation? Engage citizens digitally.

The HCD approach aims to develop solutions that are viable for the provider’s organization, desirable for users and other stakeholders, and technologically feasible. To find this point of intersection, designers often rely heavily on field interviews, focus groups, observations, and workshops. As the pandemic has made physical interaction all but impossible, many designers have quickly expanded their toolkits to include more digital methods. Not only can those methods promote safety, but they can also help researchers reach underrepresented populations in remote locations and can eliminate the time and expense usually devoted to travel.
How can you get to better solutions faster? Prototype and test often.

Typical design workflows move from ideation to prototyping to testing. But when an agency needs to move quickly to protect citizens’ well-being, it can use rapid prototyping to reach better solutions faster while minimizing risk. In rapid prototyping, developers can quickly mock up solutions and then validate them with a broader group of users and/or stakeholders. The goal is to create low-fidelity designs, using paper sketches and wireframes, to improve a service before it is fully deployed. Public sector leaders and decision-makers can evaluate a prototype’s performance during usability testing and then decide whether to move toward implementation. Properly used, rapid prototyping can speed the design process by swiftly gauging how well new solutions will serve the customers for whom they are designed. In times of crisis, rapid prototyping can help agencies quickly deploy new solutions without degrading the citizen experience.

One state that wanted to evaluate new methods for communicating policy changes used an existing videoconference solution to engage with constituents. Doing so helped researchers assess where people were struggling with the new materials. Researchers could also talk with users about aspects of the materials that worked well and aspects that needed to be changed. Over two iterations, developers were able to improve readability and comprehension by 40 percent.

How can you determine if people are able to use your programs effectively? Measure impact.

Given the speed with which government agencies are forced to introduce new HHS programs during the COVID-19 crisis, it is reasonable to expect that many initiatives will need to be refined after they are launched. Voice-of-the-customer feedback channels can provide cost-effective early warning signals about how well new initiatives are performing. By establishing feedback loops and impact targets up front, government leaders can discover both pain points and gain points and quickly learn what adjustments they may need to make in their programs.

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Another agency used an experience management tool to capture feedback from users of its public website. By adjusting a few keywords in its analytics tool, the agency easily automated the export of comments related to COVID-19. Those comments helped task force stakeholders better understand how customers perceived the agency’s response to the pandemic and monitor users’ changing digital needs.

As governments grapple with how best to serve their constituents throughout this crisis, it is important to stay connected with the actual human experience. HCD offers a philosophy, along with practical tools, for maintaining that connection and delivering solutions to individuals and families looking to the public sector for support to get through these difficult times.

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After it introduced a new case management system, one HHS agency used postrelease surveys to gauge user satisfaction and ease of use. Open-ended feedback provided for rich insights into the features that were shaping user experience. The development team used this information to prioritize enhancements into the weekly production support releases. These small, quick-win opportunities significantly improved the user experience. In addition, developers gave the caseworkers who used the system a voice in its design, resulting in higher user satisfaction scores after each release of the system.
Elevating the human experience in a time of crisis: Using human-centered design to meet this moment

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