Reflection Guide

The UPL Reflection Guide contains a series of questions to help you evaluate and reflect on how the UPL and its Principles have been incorporated to tailor the communication of your content to patients.

As you build your patient communication, the Reflection Guide can be used to:

- Guide the way information is conveyed and presented

- Keep communication priorities in order

- Identify strengths and opportunities for adjustments

Use this guide along with the *UPL Rules* so you can refer back to the specific rules being referenced.

Resource contents:

◯ Guidance, standards, and best practices

◯ Building blocks or assets

☑ Assessment methods and tools

Applicable to:

☑ All patient communications

◯ Specific topics

✓ **Primed and Polished:** This tool has been validated extensively, and significant changes will be infrequent.

Resource to be reviewed:

Name of resource: _____

What is the goal of your patient communication?

_____

_____

_____

Who is the intended audience?

_____

_____

_____

At the core of the UPL are seven foundational Principles and practical tools that guide the creation of patient communications.

There are four principles that are most applicable when **planning:**
> We will **enable patient learning.**
> We will **share qualified, quantified data.**
> We will **design for digital first.**
> We will **demonstrate empathy for patients and caregivers.**

The remaining three principles are most applicable when **building:**
> We will **use plain, uncomplicated language.**
> We will **communicate visually at every opportunity.**
> We will **format resources for understanding.**

These Principles are deliberately high-level and conceptual. They are supported by a set of rules that provide very specific and detailed guidance about how each of the Principles can be applied in practice. If a question is not applicable, simply mark N/A.

If you would like to dive deeper into any of the following guiding questions, refer to the rule(s) cited in the accompanying parentheses.

Enable Patient Learning

Equip patients with the knowledge they need to help better understand complex topics.

How does this resource prepare the patient for the information, so they understand how it is relevant and useful? (Rules 2, 4)

_____

_____

_____

How does this resource explain the medical concepts that patients need in order to understand their disease state? Is the level of information appropriate for the particular audience? (Rules 1, 8)

_____

_____

_____

_____

How does this resource explain the concepts that patients need in order to understand their options as well as their role in decision-making? (Rules 1, 4, 5)

_____

_____

_____

Does the resource provide links to more detailed information, should the patient want it, and direct the patient to speak with their healthcare team? (Rules 3, 4, 8)

_____

_____

_____

Share Qualified, Quantified Data

Present complete, relevant, and unbiased data in context.

Your Treatment Journey
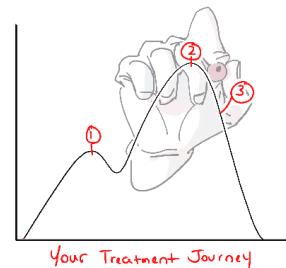
How does this resource contextualize the data so that patients can make sense of the information? (E.g., are raw numbers provided alongside percentages?) Is the data relevant to the target patients' concerns and needs? (Rules 9, 10)

_____

_____

_____

_____

How does this resource provide patients with what they need to make the appropriate data comparisons? (Rules 9, 13)

_____

_____

_____

How does this resource present numbers? What visuals were used? Could the visuals be misleading in any way? (Rules 11, 12)

_____

_____

_____

_____

Design for Digital First

Consider how patients want to navigate and engage
with information.

How does this material direct patients to additional resources with relevant information? If print materials include links to additional resources, are the URLs easy to enter? (Rule 17)

_____

_____

_____

_____

How does this resource allow patients to find information that is most relevant to them? If the resource is in print, how easy are sections to navigate? (Rule 16)

_____

_____

_____

_____

If the resource is digital, has multimedia (video, sound, animations) been used to demonstrate complex ideas? Does this resource allow patients to digest information at their own pace, and sort it based on relevance to their situation? (Rules 14, 15, 16)

_____

_____

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_____

Demonstrate Empathy for Patients and Caregivers

Acknowledge the experience of patients and their caregivers and establish an emotional connection.
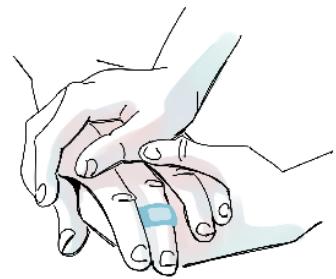
How does this resource reflect an understanding of "where the patient is at" in their healthcare journey? (Rules 22, 24)

_____

_____

_____

How might patients identify with the images in the resource? (Rules 23, 26, 27, 28)

_____

_____

_____

How careful is the resource with language and imagery that could evoke unnecessary fear in the patient or caregiver? (Rules 23, 24, 26)

_____

_____

_____

How might the shapes, colors, and words used in the resource affect patients? Do they create a sense of comfort? Anxiety? Validation? (Rules 23, 26, 27)

_____

_____

_____

Use Plain Language

Explain complex topics in a straightforward and accurate way.
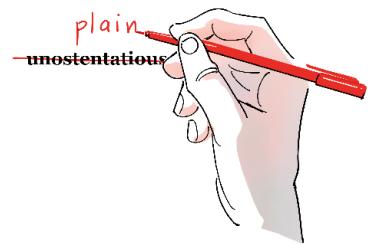
Is the tone of the resource approachable and conversational or formal and clinical? (Rule 29)

_____

_____

_____

Does the resource use the simplest words possible to convey the message? If complex words are used, how patient-friendly are the explanations provided? If acronyms are used, are they spelled out or explained? Are there any complex sentences? (Rules 30, 31, 33)

_____

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Have any cultural references or colloquialisms that could be confusing to patients been used? (Rule 34)

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_____

Communicate Visually

Visualize complex information to make it more digestible.
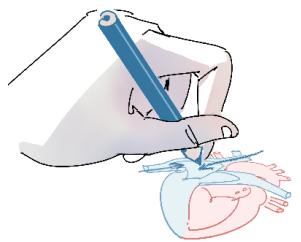
How have words and visuals been used together to represent important concepts? (Rule 35)

_____

_____

_____

How effectively are illustrations used to describe things that cannot be seen (E.g., how a drug works)? (Rule 36)

_____

_____

_____

Are visual elements used in a consistent way to provide patients with recognizable visual cues? Are standard, recognizable shapes used when appropriate? (Rules 37, 38)

_____

_____

_____

Does the resource accommodate for color blindness? (Rule 39)

_____

_____

_____

Format for Understanding

Design layouts that are purposeful and easily navigated.

How easily can patients find the information they need in this resource? How has visual hierarchy been created? Does attention gravitate towards the right elements? (Rules 41, 42, 45)

_____

_____

_____

_____

How has space been used? Is there space for the eyes to rest? Does the space improve readability or scannability by grouping relevant elements closer together? (Rules 43, 44)

_____

_____

_____

_____

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Patient Experience

We are determined to ensure the voice of our patients is continuously present - to both inform and inspire - in ways that help teams across all business units achieve their goals, meet the needs of our customers, and provide a positive patient experience.

bridgeable

The UPL and its applications were created with the support of Bridgeable, a service design firm based in oronto, Canada. Bridgeable has worked with BMS on all elements of the UPL, from overall strategy to creating and applying design capabilities and UPL tools, training BMS employees in UPL, and designing UPL.org. The team includes design strategists, interaction designers, and service designers, plus a team of biomedical communicators who specialize in visually communicating science and medicine.

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