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SO WE CREATED A STUDY TO SEE IF WE COULD MAKE FEEDBACK FROM PATIENTS AND CARERES EASIER TO COLLECT, MORE MEANINGFUL AND MORE USEFUL FOR IMPROVING SERVICES SO WE CREATED A STUDY...



Flip page to reveal text WHAT WE DID.



WORKING WITH TWO GROUPS OF LONG-TERM SERVICE USERS...



Reveals 2nd group & text: PEOPLE WHO USE SERVICES FOR LONG-TERM PHYSICAL ILLNESSES LIKE ARTHRITIS

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...OUR STUDY WAS DIVIDED INTO FOUR PARTS.





FIRST WE DISCUSSED CURRENT OPINIONS AND IDEAS







QUESTIONNAIRE 000

AND THAT DETAILED COMMENTS WOULD BE MORE THEY CAN BE PROPERLY ANALYSED.

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MANY STAFF ALSO FELT DISTANCED FROM THE PROCESS OF GETTING AND USING FEEDBACK.



ESPECIALLY IF IT TOOK PRESSURE OFF STAFF.



A LOT OF STAFF AND PATIENTS FELT THAT CURRENT QUESTIONS WERE TOO GENERAL TO BE MEANINGFUL FOR IMPROVING SERVICES...

BUT PEOPLE WERE POSITIVE ABOUT THE POTENTIAL FOR DIGITAL METHODS...



Turn page- new heading says PART TWO: TEXT MINING. PART TWO: TEXT MINING



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AND AS LONG AS OTHER OPTIONS ARE CONSIDERED.



L: WE THEN DEVELOPED COMPUTER PROGRAMMES TO ANALYSE RESPONSES GIVEN IN QUESTIONNAIRES – A PROCESS KNOWN AS 'TEXT MINING'



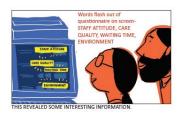
TO SUIT SPECIFIC SERVICE SETTINGS AND INDIVIDUAL NEEDS.

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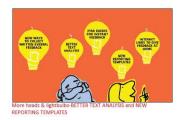




















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FINALLY WE TESTED THEM.



LOTS OF PATIENTS WERE APPREHENSIVE ABOUT USING THE KIOSKS.









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RESPONSES WERE MIXED ACROSS DIFFERENT SITES. DESPITE GENERAL POSITIVITY....





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STAFF THOUGHT NEW WAYS OF ANALYSING AND REPORTING FEEDBACK GAVE NEW INSIGHTS...







BUT WE DIDN'T SEE ANY O THE TESTING PERIOD









Circles appear, saying: IMPROVE PARTICIPATION. MAKE THE MOST OF POSITIVE FEEDBACK TOO. ENSURE FEEDBACK TURNS INTO REAL IMPROVEMENTS TO CARE

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EVERYONE AGREED THAT DATA NEEDS TO BE MORE MEANINGFUL.

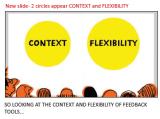


Circles read LEADING STAFF MEMBERS ARE ENTHUSIASTIC FOR CHANGES. HELP AND INFORMATION IS AVAILABLE FOR PATIENTS AND CARERS





Circles read BETTER SUMMARIES AND REPORTING BETTER USE OF INFORMAL FEEDBACK LIKE DISCUSSIONS





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