

Moving myself: insights for future patient experience journeys in orthopaedics

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This paper reports aims, approach and results of an exploratory study into the patient experience in health of joints (e.g. hip replacement). Treatment is improving, yet as hospital stays get shorter specialist-patient communication is not optimal (e.g. Jimenez, Romero and Keyson, 2011). The study aims to innovate on the patients' pathway (Zander & Bower, 1987) and identify salient communication opportunities. The project is a research collaboration between a hospital orthopaedic department, an orthopaedic supplies manufacturer and a university industrial design faculty.

In a multiple case study approach (Runeson & Höst, 2009) various stages of patient experience journeys were addressed. 20 industrial design master students investigated different contexts related to joint health through qualitative interviewing, observational research and design prototyping research (eliciting people's responses to various possible interventions). Content analysis of the 20 cases revealed five main drivers for the development of future patient experience journeys in orthopaedics:

This paper describes the drivers that emerged and illustrates them with examples from the diverse contexts. In a further step of the project, these drivers will be used to define areas of intervention and design a future set of patient experience journeys.

References

Jimenez Garcia, JC, Romero N, and Keyson, D 2011, Capturing patients' daily life experiences after Total Hip Replacement, in proceedings of the 5th International Conference on Pervasive Computing Technologies for Healthcare (PervasiveHealth), Dublin, Ireland, IEEE, pp. 226-229.

Driver	Implications for patient experience journey
Experience of Time	Detect and support critical points in patients' journey by probing their experience.
Experience of Body	Generate information patients can use to understand and adapt their body. E.g. direct feedback on muscle activity.
Knowledge	Forms of knowledge presentation are needed that help people adjust their behavior and also provide feedback to specialists.
Behaviour	Specialists can assess the effects of behavior change through metrics to monitor and adapt treatment. For example, biofeedback on posture.
Context	Social interaction is important in patients' behavior adaptation: it motivates, corrects, commits and helps. Treatment and advice options should probe for this.

Runeson, P & Höst M 2009, Guidelines for conducting and reporting case study research in software engineering, *Empir Software Eng*, no 14, pp 131–164.

Zander, K & Bower, K 1987, *Nursing Case Management, Blueprint for Transformation*. Boston: Center for Nursing Case Management, New England Medical Center.