

Multiple sclerosis (MS) Outpatient Future Groups: Designing tools of interaction in health service improvement activities

Keywords: Outpatient experience, multiple sclerosis, patient and staff participation, speculation in design

Context of research: The NHS has put great effort into service redesign, improving information provision and the patient experience for people with long-term conditions (Cayton, 2006). Despite this, it was reported that little has changed in MS services in England and Wales (Royal College of Physicians, 2011). The MS Outpatient Future Groups study aims to improve the outpatient experience for people with multiple sclerosis (MS) who attend the outpatient department at The Royal London Hospital (RLH).

Main aim: How can design tools be used to engage patients and staff and encourage them to imagine alternative health futures as a service improvement activity? Can this emerging design space increase sustainability within service improvement efforts?



Figure 1: Images of the Ordinance Survey outpatient map with contours and the participants prop pack using the metaphor of an ideal journey (going on holiday).

Methodology: Qualitative study using ‘future groups,’ a reinterpretation of the recognised focus groups method (Kitzinger, 1995) directed towards exploring future alternatives. This method employed metaphors and physical ‘props’ to engage participants to speculate about future health experiences and interactions, recording their feelings as contours on UK Ordinance Survey Map of the patient journey. Participants were people with MS and outpatient staff; staff nurses, nursing assistants, junior sisters and reception staff.

Results: Data from the study, together with feedback from participants showed that the success in uptake of the props was due to the design and attention to detail in crafting the metaphor of an ideal journey. Participants valued the activity and invested their own ideas and feelings in the activity. The combination of participants in the groups incorporating a diversity of perspectives and knowledge of the service led to a collaborative approach in which staff highlighted potential piratical problem and patients ensured ideas were holistic. **Conclusion:** Engagement of service users increased validity of the design proposals emerging from the future groups and encouraged adoption of the improvements. Metaphors enabled participants to remove themselves from current financial, organisational and physical constraints, enabling them to suggest sustainable improvements for the outpatient clinic.

References

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