



**Industry:** Healthcare

#### THE CHALLENGE

Transition from a manual communications system to an automated digital solution

#### THE SOLUTION

Moderated, on premise study to create an optimized layout on hospital room tv screens

#### THE OUTCOME

- 91% of patients said the information displayed was easy to read and understand
- 91% of patients said they would give the experience the highest rating for satisfaction
- 100% of patients said they trusted the information displayed

## A hospital system uses digital experiences as ultimate “display” of best in patient care

Automation improves communication accuracy and workflow for staff

### The Challenge

A regional hospital system wanted to explore using technology to address an outdated communications practice that was proving unsatisfactory to hospital staff and patients alike. As standard in hospital rooms, there would be a white board upon which nursing staff would use a marker to write important details to keep patients informed— such as their nurse or doctor’s name or other medical details related to an upcoming or completed procedure.

The practice was time-consuming for medical staff. Additionally, things are always changing in a medical facility, so the risk of displaying inaccurate information was high. The white boards weren’t serving the purpose of providing up-to-date, relevant and helpful information for patients.

The team wanted to see if there was a way to automate this process: pulling vital patient data from their electronic medical records system to display on television screens mounted in hospital rooms, thus freeing up their nursing staff to provide patients with the best in care.

### The Solution

The team created a proof of concept of how information would display on the screens and then conducted a moderated, on premise study using Live Conversation. The UX Researcher on the project explains, “We went to the hospital with our entire nursing team, including representation from emergency care, labor and delivery, internists, rehabilitation, respiratory therapy—everyone who could help us ensure that our final product matched needs across all hospital departments.

“We then spent about two hours with the hospital staff, dividing them into two teams. One team went with us into the hospital rooms, and sat in the beds holding the remotes and looking at the layouts that we had created. We conducted interviews with the other half of the group, asking more targeted questions using UserTesting to capture their feedback.”



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**We want beautiful things and pleasing things, but sometimes the most beautiful thing is simple and ordinary and just works.**

He points out that using Live Conversation for the interviews helped the team stay more engaged. “We relied a lot on Transcripts in the process. When someone would raise their hand to answer a question, we could just walk over with our computer and capture their insights, instead of being heads down and focused on typing notes. It allowed the team to be more present and in-the-moment, and riff off of what people were saying and ask follow-up questions to keep the conversation going.”

### **The Outcome**

The team took all the feedback from the daylong session, organized the ideas into themes and then came up with final concepts and designs that they then submitted for final review. They also continued to gather customer feedback as they refined their designs during roll out.

The UX Researcher remarks on a few scenarios where having the video evidence helped the team drive consensus and create a truly customer-centric experience.

**1. Justify the inclusion of design elements.** The final designs included the hospital’s logo, and the leadership team questioned its placement, thinking that a branding element was taking up precious “digital real estate.”

In fact, the presence of the logo had a specific purpose beyond branding. “We heard from a lot of patients that it might be good to see the hospital logo if you woke up from surgery. It grounded you, giving you information on where you were in a moment when you might be disoriented and be most in need of it. We knew this based on our research and had it in our back pocket—to support our rationale for our designs if questioned.”

**2. Build customer empathy.** Having customer feedback, in some ways, helped to bridge the digital divide between those designing solutions and the end customers. “A majority of the people on my team are under the age of 35. So their screen experiences include things like Roku, Apple TV, and Xbox. We wanted the team to think beyond the typical set top box experience and to give them context: ‘you’re in a hospital, you’re in a bed, you have a remote control beside you.’”

The videos helped younger, tech-savvy individuals, many of which have probably never had an extended stay in a hospital, better understand the needs of an older audience. The UX Researcher adds, “We ended up going with a more stripped down layout, more similar to the Weather Channel-style of design. It was just the information, nothing too overwhelming, and it would rotate enough times and at a slow enough pace so that you could consume the information.

“These were some of the nuances that we picked up on from the feedback and that we kept tweaking in our designs along the way.” He also notes that feedback from older audiences informed the sizing of fonts and elements on the screen—namely that they had to be larger and more clearly represented.

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Adds the UX Researcher, “We want beautiful things and pleasing things, but sometimes the most beautiful thing is simple and ordinary and just works.”

**3. Drive consensus in a large, cross-functional project.** The 8 month pilot was a huge undertaking, involving product owners, business owner, architects, UX designers— not to mention all the customers and other stakeholders. Jokes the UX Researcher, “My favorite line from the television program Parks and Recreation is: ‘A camel is a horse designed by committee.’ We were very concerned that we were going to ‘build a camel’ if we took into account all the ideas and opinions of everyone involved in this project. What was great about UserTesting was that it kept it from being based on personal bias or personal opinion and it took it back to the patient perspective.”

The insights were especially helpful when getting buy-in from business stakeholders. “As UX researchers and designers, it’s our job to listen to the patient and then try to translate that into something that will work for all of these audiences, including patients and clinicians.... We were able to present our design ideas and we pointed to all of the things that we had tested with the patient personas. And the response was, ‘Okay, we feel good about this. Let’s start getting this in front of clinicians and getting this built.’”

Following rollout, the pilot program has garnered positive reaction and has generated interest from other hospitals:

- Ninety-one percent (91%) of patients surveyed said the information displayed was easy to read and understand
- Seventy-five percent (75%) of patients said all of the information displayed was important
- Ninety-one percent (91%) of patients said they would give the experience the highest rating (a 10) for satisfaction
- And all (100%) patients said they trusted the information displayed



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