**Stage four user-testing feedback**

**Parent workshop**

**CP comments in red.**

**In general,** you have suggested lots of good ideas but that need a web designer to do (they are quite complicated!!) – which does go beyond this project, the money we have (the animations have blown the budget!) and the time we have left. However, I think I’ll approach NIHR and suggest that if they want to improve the website further they could fund a web designer to work with Mike to implement those extra touches. Having spent yesterday staring at the website code with Mike, there is an incredible amount of behind the scenes stuff going on in the website and so what seem like minor changes are actually very difficult without breaking it and also ensuring that it works on mobiles, tablets, different browsers, different size screens etc…!

Where what you suggest would have to wait until (or if) we had more funds for a web designer, I’ve simply put “**WD\_Later?**”- and we won’t be able to do this before launch…

Also – Mike and I made these changes yesterday (or they are planned for next few days) but none of them are live yet while Mike chases down some bugs…

**General**

- All parents thought this website was worth doing, they felt there is lots of scaremongering out there so having genuine information that is easy to understand is very helpful.

- They felt it would be useful to do more research on what parents take away from this ie emotional state or mental health

- All wanted to stay in touch & see progress of site.

**Who would use it?**

Variety of experiences from the parents which dictates whether they would have found this website useful or not.

- A couple of parents would have found the website useful and would have wanted to see this data:

* JM's child was a patient at Leeds so hospital had been in the news a lot. She had time to explore the data, but it was hard to understand it so didn't help.
* KG found out about problems at 20 week scan so had time to look for information and would have found this useful.

- AJ deliberately avoided internet and any information like this as she wanted to focus on staying calm, and instead listened to the expertise of the clinicians around her.

- EG's child had an emergency appointment so wouldn't have had time to look at this type of information.

**Overall impressions**

- good, easy to read, user/parent-friendly, simple, categorised nicely, not too wordy

- important that people, particularly panicking parents, know this is serious information

- looks professional, no commercial benefit/vested interest so here for good reason

- good to have links to all of the charities: reassuring for parents, it looks official. Relationship with charities & support groups is so essential for families and parents.

SAS recommendations:

**-Consider whether charities are prominent enough; they probably are. We’ve added a link from “What Why How” to the charities to give more signposting.**

**One option might be a separate breakout box on the right, that floats up and down as you scroll the page with the text from “What this site cannot do” in it, so it can always be seen. WD\_Later?**

**I’m not sure how this would help actually. It might seem rather bizarre to have a box highlighted as strongly as this to tell you what the website cannot do? (Mike)**

**-On the homepage, you should be able to click on the four bullets under the *Everything Else* section, eg for parents, being able to click on 'Information for families' would be really helpful, and already looks like you should be able to. We can’t really do this since there are no anchors on the everything else page – not clear where it would take you! The boxes with the “>” at the top of each box on the home page hopefully makes it clear that these are the links.**

**One cause of confusion is that the Everything Else page has similar boxes containing texts which are hyperlinks. We’ve changed the design of the home page boxes slightly to make this less of an issue. We can still add links if we have obvious targets to go to. (Mike)**

**-Change title to 'Charities and support groups' (already done) done**

**-Ensure we channel parents in this section to eg case studies of other parents explaining their experiences. Could we ask CHF for good links here? I don’t think we can take on the role of the charities – we have signposted clearly now where charity sites and support groups are – parents will have to navigate to this extra info from the charity sites…**

**-Need to ensure all hospitals have links to this website (and charities) agree.**

- Parents thought *30 day survival rate* is quite blunt to hear as a parent and felt it was a bit worrying, although they later agreed this was necessary. Other parents appreciated this straightforward, plain wording, so they didn't have to read between the lines. The parents agreed these opinions probably depend again on when you find out about heart condition.

SAS Homepage recommendations:

**Homepage**

* **The logo needs to be larger (top left) Mike is investigating this for wide screen formats – but it can’t be larger for mobiles or ipads…**
* **The logos at the bottom need to be evenly spaced, evenly sized and smaller, e.g. <https://www.skrill.com/en/> - that site is v lovely but pretty advanced! Mike and I think this has to wait for WD\_Later? We are adding “about us” and “contact us” to the footer thought, next to the logos.**
* **At the moment we the logos behave well in some screen sizes but look unbalanced in others - I’ll be able to improve things in time. <https://www.skrill.com/en/> avoids the problem by hiding logos in mobiles. We could do the same.**
* **The three modules need to be the same size – we experimented with this earlier but it is too hard to do when switching between wide screen and mobile views.**
* **Top left logo is home button so home button not needed – we think you need both. Lots of people might not know that the logo is a link (eg my mum!!) But it’s sensible to make the logo a home button too.**
* **Consider adding the 2 min video tutorial with big option to mute sound or unmute (if you try this SAS could send two version of homepage to parents). Talked about this but have decided not to – the video really doesn’t make much sense on its own – ideally we want people to read what/why/how first, but if they don’t then it still makes most sense to have it with the data. BUT we have clearly signposted this video on the homepage in the data box. (and in fact video 2 as well in the everything else box). We are considering adding a thumbnail of the video to the data box which people can click on if they want. (possibly?) . People do not expect to see big mute buttons for videos. There is a mute button inside the video controls anyway, which is where they would expect to see it.**
* **The three remaining tabs/buttons at the top need to be much larger – see first comment above. I can do this (larger static logo and larger buttons for wide screens). Since the header is going to be static, we will of course lose some height for displaying site content. It calls for different sizes for different screens.**
* **The header should be the whole purple section, not just half and should stay when scrolling Mike is going to do this**
* **Repeat the 3 bullet points currently top on homepage as slide at end of video, and consider adding a 4th bullet point added as reminder not to compare hospitals (see below) – we discussed this but if the video stays where it is (on the data page) then this doesn’t make much sense… I think we have added text to the video tab on explore the data saying what do to next (MIKE – if we didn’t we probably should signpost to the “choose a hospital” or “hospital overview” tabs)**

**What, why, how**

**The text on this page can afford to be much bigger as long scrolling page are standard now**

People can change font size using the zoom functions on their browser? (CTRL+) – I quite like the size it is now?

**Functionality**

* **Mike: to explore what happens when people google/search for the website. And what happens if/when people might enter through other pages, ie not home page first. Is there any way showing key points wherever people enter the site (e.g. repeat them on each page)?**
* **I don’t think we will be able to force people to see the keypoints wherever they enter the site without annoying people who are just navigating through normally.. but we could explore this if we later got a web designer involved..**
* **It is quite possible to overlay stuff when people first enter a site. Personally I find sites that do this incredibly annoying. Even if I’ve Googled a page and entered a site deeply, the first thing I want to see is something on that page that relates to my search rather than something the site owner wants to force on me.**

**- Mike: Make sure external links go to a new tab, not the same tab. (Participants at the 4th professional workshop also commented on this eg on the NICOR report) Done on dev system**

**- Add a link to NICOR: Most parents would want to know where to look for it. (behind NICOR on the “What, Why, How” page) Done on dev system**

**- Ensure visitors get taken to the top of the page each time, eg click on new FAQ rather than start half way down Mike to do this. Done on dev system**

**Explore the data**

- liked that it shows # operations: felt it shows extent of experience of the hospitals

- all looked very clear, very straightforward, to the point

- if you're looking for data, is fantastic

**Map view** on specific hospital: parents felt it was nice that everything is in one place, really clear

- **Black dot** = most participants seemed to understand that this was survival rate after 30 days

- **Blue areas** = parents were more unsure on what this meant.

* JM thought light blue = still acceptable so not cause for concern, but had to read this several times. She felt outside light & dark blue is probably where there's a problem.
* KG: understood higher and lower than predicted for both light blue & dark blue.
* Parents thought it was inconsistent that the blue area in an individual hospital view & the blue area in the 'What does this mean' bit at the bottom didn't match.

SAS recommendations:

**-Is there a way of making the width of this bar consistent with each?**

**Done on dev system**

**- Hover over instructions could be clearer, is there a way of doing this?**

**- Also is there a way of making the yellow arrows clearer what their purpose is?**

**- In hover-overs on bars, could we bold 'higher' and 'lower' than expected to make this difference clearer?**

**We have changed the layout of the individual hospital results box to make it all a lot clearer, which hopefully has addressed all these points! Done on dev system**

**- Parents would like the hospitals to be in alphabetical order on the map Done on dev system**

* **Parents didn't understand why street map was used. Didn't find it useful. They suggested using a photo of the front of the hospital instead. SAS recommend we stick with the map as this is the only group that thought this, and a photo might make it look more like patient information. We have left the map as it is.**

**We’ve left-right swapped the map and the hospital list in map view so the first thing that is seen on a mobile view is the hospital list linking to the hospital detail. On a mobile the map will be visible on scrolling down.**

**Given Tim’s insight that the map and list views are distinct because the map view shows individual hospitals whereas the list view allows hospital comparisons, we have also relabelled the Map and List buttons to make this clearer. Currently they are**

**[Map] -> [Choose a hospital]**

**[List] -> [List all data]**

**List view**

- Parents thought this view was scary as they could see which hospital stands out and KG felt there was too much data here. They felt it made the lower ones look worse.

- Overall impression of hospitals though was that they were all doing well. Parents noted survival rates were all really good and very similar, so perhaps this view emphasises the similarity?

- Parents wouldn't know to look for FAQ on what happens when falls outside predicted range

SAS recommendations:

* **Make this more prominent. Parents suggested putting this at the top of the list view, ie before you read the table. Perhaps in the heading of that column (eg survival with predicted range)? Done in dev system**
* **Could include Q in orange box too (key points) and on Map tab, have a link at the bottom of ‘What does this mean’ too. Done (or will be done) ??**

**I don’t understand what’s wanted here (Mike)**

* **Edit text in ‘What does this mean’ so it reads *The dot indicates the hospital’s survival rate* Done in dev system**
* **Consider removing italics (from a design perspective) Done in dev system**

- When asked if parents would want to sort by survival rate, most felt it would not be reassuring to do so, particularly if there's not really a choice of hospital. Most parents noticed hover over which explains that "some hospitals specialise in certain conditions"

SAS recommendations:

**- Parents felt it would be clearer if it said: "some hospitals take on more complicated conditions" – make this change.** Done in dev system

**- Mike: is there a way of making clearer that you can double click on the three letter codes. Perhaps this functionality (pop up box) should be on the bar itself in the list view rather than/in addition to the three letter code. Mike is going to explore ways of doing this. I’m thinking of making the whole hospital name box a link, rather than text and button. We can’t make the whole row a link as this then conflicts with popover behaviour.**

Animation #1- how can we predict survival range?

Now is called the 'Calculating the predicted range animation'

Overall thoughts

- Very complex: the way it's calculated & what's gone into it

- One parent felt it focused too much on surviving and not surviving, worrying as a parent.

- Parents really didn't like the black dots to indicate those children who had died, particularly as some are a jumping child; they're older. They found this emotive & upsetting. (Now resolved.)

- They agreed that erasing the icon completely/fading to nothing would be better. (Already changed on the animation.)

- They thought the language was good. eg "sadly not all children...".

- All liked the voice, they found it non-alarming, empathetic, to the point & reassuring. Pace was good.

- They felt it was very good to say early on that you can't compare hospitals in the animation. They felt this could perhaps be made clearer on actual website.

-Make this more prominent on home page? Add a fourth bullet “Find out why you can’t compare hospitals”. Or “Understand why it's misleading to compare different hospital's survival rates”

- They liked that colour wasn't used, was simple & non-distracting, as not there to entertain.

- Like that it is hand-drawn, looks like someone has taken the time to do this, sensitive.

* Updated parent feedback has shown that they like the newer version too in terms of colour & less hand-drawn, so don't think this is a problem

- They noted some of the older children look like parents. Maybe when introduce grid view, do this animated one-by-one so time to take it in.

* Is this is now resolved in latest animation?

- Parents were confused about the difference between blue, green & black?

* Is this now resolved in latest animation?

- Parents didn't mind that formula was in the animation but liked that it was small so you knew not to try to understand it. Like using the word 'formula' in the FAQs, don't need to know more details on this, would be too scientific.

- Parents seemed to understand more clearly after watching the animation that if a hospital has a lower predicted range, it's due to a series of complex concerns.

**All felt animation should be added to website , and will help it to be found eg through searches.**

**Unforeseen factors**

- Parents didn't mind wording of unforeseen factors, felt it was true; explained it well.

- But they all would like egs of these. *eg don't know how child will react to anaesthetic.*

* **Add examples: DS is working on this? Done**

-

**2nd animation**

- Good, makes it easier to understand the difference between light & dark blue

- Most parents agreed they would have liked to see this before seeing '*Explore the data'*

* Suggestion that this could be the first thing you see before entering the site & in title say that eg "this animation will help to explain the data you're about to look at" - add this text
* Title of animation needs to clearly state what it will be about. Parents didn't feel a warning was necessary

- Parents noted it only shows where the dot is better not worse

- Ensure dot is below predicted in final animation: resolved in current version?

- All felt there wasn't anything particularly missing or extraneous from the animations.

- Should add in first three slides of the other animation (already done)

- Liked the idea of having both animations in the Explore the data tab as the default when you go into this tab. Then underneath have the option of Map or List tab. (already added here; should stay here- with the 2 min video repeated on the homepage- perhaps)

- Participants felt it was important that it was emphasised that visitors to the website should view this first animation first. Should we add a sentence that says eg parents who helped us developed this website said they found these animations useful?

- The parents felt both animations made the website generally clear

Parents thought this animation should be on the homepage.

* **It isn't currently. Consider putting the 2 minutes animation on the homepage, as recommended suggested above (with a final slide added with the four bullets on to summarise the video, it could repeat the3/4 bullets on the homepage). Should we get a web designer to check the final look of the homepage?**

**The later feedback suggested that video 2 is definitely “level 2 info” – ie only for those who are interested. It is NOT necessary to explore the data (although video 1 is). To make this layering clear, we’ve decided to only put video 2 on the “everything else” tab although we do signpost to it after watching video 1.**

**Everything Else section**

- **Glossary terms**

- Parents suggested having the animations here instead as these explain these two terms much better than the wording in the glossary.

SAS recommendations:

**- Parents felt that as there were only two terms in the glossary, this wouldn't be taken seriously.**

**- Insert explanations of these terms in relevant FAQs and remove Glossary (unless add many more terms) Done on dev site**

* **Add explanation of unforeseen factors in relevant FAQs done**

- Parents asked about a search button, they thought this would be good so you can type in terms and it would pull up relevant page. They thought even search bar would be useful, although one parent thought there wasn't that much info here and as it's clearly laid out, a search bar wouldn't be necessary.

SAS recommends

* If Mike agrees, do not include a search bar as it is so difficult to get them to work well.

I don’t think we should have a search bar – I don’t think there’s enough on here to need it and also they so rarely work well!

It’s technically hard unless we add a server-side database or evoke a custom Google search service (the database may well arrive at some point, though not in this first release.) See <https://cse.google.com/cse/> for custom google searches - it costs to go ad-free.

**My family/child section**

- Parents thought this section was fine, but it should be made clear in the Q: *Which hospital should I go to* that this is about talking to your own clinician/hospital rather than discussing if you have a choice of hospital.

* Check wording on this FAQ Next step for SAS

**We have updated this text – will check wording with you (Mike – can you send wording of this FAQ to SaS?)**

**Here it is**

**Can this data inform my choice of hospital?**

**Short answer**

You can see how a hospital's survival rate compares to its predicted range, but this website cannot tell you which hospital to go to. Please discuss this with your child’s clinical team or access the support offered by specialist charities such as the Children’s Heart Federation.

**Long answer**

You can explore the data to see how the different hospitals are doing compared to their predicted range calculated for the last 3 years. You can also use the national audit website to explore how many operations of each type a hospital does and survival outcomes for each of these. However, this cannot, in itself, tell you which hospital you should go to and does not provide proof that one hospital is “better” than any other. The safety or otherwise of a hospital cannot be determined from survival data alone.

When considering which hospital, there are many factors to take into account, including how well the clinical team know your child and his or her medical history, any particular medical issues that your child has (for instance, some hospitals specialise in treating children with particularly complex medical problems) and how far the hospital is from your home.

You should discuss your child’s care with their specialist cardiologist to determine the best treatment option for your child.

You can also access the support available from national charities such as the Children’s Heart Federation or Little Hearts Matter or local charities for your specialist children’s hospital. These guides on speaking to your child’s surgeon or seeking a second opinion, written by the Children’s Heart Federation, might also be helpful.

**Why does the width of the predicted range differ between hospitals?**

- One parent felt the first sentence is very long and another didn't feel this FAQ clarified the question. They thought it is key to understand the predicted range as it's mentioned throughout, absolutely want someone to explain what this means.

- Revisit wording on this FAQ

**We haven’t done this yet**

**Misc**

**Professional workshop**

**Animation 1: *Now is called the 'Calculating the predicted range animation'***

*NB in this workshop, participants saw this animation before viewing the website*

- Most participants found this animation a bit confusing - they felt certain things were mentioned before they were explained (eg predicted range of survival) and they felt families would get lost, particularly when formulas and maths were introduced.

- They were also very concerned about the black marks over the children that did not survive, and found this distasteful. However they liked the grid and felt this was a good way of displaying %s

* (The black square issue is now resolved)

- DM felt it should be more of a journey/story to make it easier to understand eg use a case study such as X's story

* [perhaps better links to charity resources will help resolve this]

- They felt it needs to be clear that this is not for everyone, but useful for people who'd like to know more.

* Make title & explanation of this animation very clear so people know what to expect

- Participants found the voice not very engaging, quite cold and a bit posh. They wondered if female voice might be preferable

* However parents liked the voice, found it sincere and empathetic and didn't mind that it was male. So we think OK to use in the animation (already resolved)

- The participants felt the lack of colour made the animations seem cold, and the inconsistency of some numbers drawn and some written jarred.

* This is now resolved

- Participants didn't feel any language particularly jarred

- They felt the pace of the animation was too fast and went through different points quite quickly. It lost some of the participants. Others felt it was quite wordy and that it should rely more on graphics.

* Pace of animation is being resolved

- When asked why you can't compare raw survival rates, participants seemed to clearly understand it was because some hospitals have more complex cases. They felt the animation helped to get this across.

**Website**

**General thoughts**

- NL liked that on Homepage everything was listed below but these bullets in each of the three sections should be hyperlinked.

* Same feedback as parents – **SAS recommends: link these bullets to relevant bits of *Everything Else*** section see previous answer

- On Map tab, lots of people might go straight here, to their local hospital so this should perhaps have more information here about the context. They liked the hover-overs though.

* Perhaps this is now resolved by having the animations here? **I think having video 1 available here resolves this**

- DM noted there should be a note somewhere about why Dublin was here if UK data. **Consider where is best to add this? Perhaps on Dublin hover over in list & map tab? This has been added to what/why/how and also refer throughout to “UK and Ireland”.**

- DM noted he wanted a hover-over on the slider eg this is full detail, we showed you this first because it's most important. The language here is confusing as range is used elsewhere. Participants suggested zoom in and zoom out.

* **Consider** change full range & full detail to zoom in and zoom out (as range is also used for predicted range). We have changed to “full view” and “full detail”. Mike pointed out that “zoom in/out” could be confused with the web browser zoom functions. Also we are labelling slider end-points rather than two distinct actions.
* - Participants felt that if a hospital does fall outside the range, it's important to have the explanation, to reassure people next to the data. Would be good for surgeons to see & to stop people from making choices based on this. We have added links to the appropriate FAQs
* This should be explored with the updated data/model if a hospital does fall outside the range , ie specific explanation around that case or eg we're still investigating this and link to full explanation I don’t think we should go into specific s about cases (it is outside our remit) – but we should link to the relevant NICOR page where all the reports are

- Participants felt there should be more emphasis on 'you shouldn't use this to choose between hospitals' in the What, why, how and Data/Map tabs too

* Perhaps our recommendation from the parent workshop would suffice:
* *Eg could add bullet on home page under Our website will help you:* 
  + *(eg) Understand why it's not possible to compare different hospital's survival rate*
* Could this be made more prominent elsewhere too?

will have a think about this…!

**What, why, how**

* Participants didn't like the formatting and felt quite strongly that capitals should be removed. SAS recommendation: **Remove capitals** – but I thought that later the parents DID like the capitals? Anyway, we could remove the capitalisation but then I think we should BOLD the first words of each of the What, Why, How to match the formatting on the home page box. **MIKE** what do you think?   
    
  I don’t normally like capitals - too shouty - but here they do help in clarifying the connection with the page title. We’re already medium-bold for the whole title, but we could reduce the font-weight of all headings to allow bolding here. Headings with a lower weight look quite good. (Mike)

- They liked the key points (orange box) but would have liked if you could click on each of these eg to go through to relevant section eg A higher survival rate does not imply a better hospital. = link to relevant FAQ

SAS recommendations

* **Add Links to relevant FAQ in *Everything else* section from orange key points box – the key points are summaries of the what/why/how page – they are NOT FAQs about many of them! (eg why you can’t compare on survival rate). We’re going to try to make the key points box a cartoon type strip at the top of the page to make it more engaging.**
* **When there are links throughout the website, always open in new tab (participants found it frustrating to lose where they were). Done**

**Explore the data**

**List view**

- A couple of participants wondered if the list view was necessary although others liked to see all hospitals next to each other. But if included, they felt it would be important to have a note in the list view saying 'don't compare the black dots, it's about the black dot against the blue'

* **Add clarifying phrase about comparison to top of Explore the data tab? Can we use wording from this FAQ? There isn’t an FAQ on comparing on survival rate. I think video 1 addresses this. I think we need to change the wording on the “i “ on survival rate saying more explicitly that it is meaningless to sort on survival rate (I’ve made a note - M)**

- Participants seemed to have clear understanding of the black dot

- In the 'What does this mean' pop up (or scroll down in Map view), participants were surprised the bars didn't match with the individual hospital

* **As in the parent feedback: is there a way of making the width of this bar consistent with each hospital's bar width? Mike & I redesigned this individual hospital view so hopefully it’s clearer now**
* **The bars in the legend now match the bars for the selected hospital.**
* **- Participants felt it was nice to include previous years & trends although one participant pointed out this might raise issues with past trends, when the emphasis should be on the present.**
* Trouble shoot this at press launch if include previous data

David & I are talking to NICOR about this soon

**Everything Else**

- Participants weren't particularly keen on this section, they felt it was a bit "lazy" to have a section where you dump all additional info. They felt there was too much information here, and it would be difficult if you were looking for something specific. They felt that actually a lot of the questions here, you would look for in the What, why, how section. They also wondered if there should be a search bar.

* Solution? Perhaps provide better links throughout site about the questions that people most frequently ask? eg at bottom of individual hospital on map view, scroll down and have links.

- Alternative titles for the tabs were suggested as 'what is the data', 'explore the data', 'understand the data'.

SAS recommends: **Do not think these are necessarily improvements, so leave as it is unless MP, DS, CP disagree. I think we leave as is…**

**This may be a problem with the title ‘Everything Else’ rather than with its content. I think the only alternative is to go back to the idea of FAQs - since it’s mostly in the form of questions and answers. Or Q&A.**

- Participants all wanted examples of chance factors and liked the suggestion of unforseeable factors as an alternative title

* DS is working on this text – changed

- Participants didn't particularly like the images used in the 'what happens if it falls outside the predicted range' FAQ, they found these a bit random, hard to read & inconsistent. They felt pictures can help with understanding, but more weren't necessary here as it's clean, scientific info and better this way.

* **Remove these images, or use same as in animation for consistency. Have removed**

**Misc**

**- Need to ensure all language on website is consistent with language in animation eg unforseeable vs chance factors. Other examples need to be checked too – think we have done this**

- Some participants thought journalists would use this to compare hospitals

* We will have to be careful to mitigate against this in the press strategy

- Need to give clear contact details so people know where to go if more questions – CP going set up 3 emails: general website queries to SaS, questions about PRAiS risk model to CP and technical problems with website to Mike. These will be in a new Contact Us section.

* eg SaS needs to populate about us section **TO DO**

**Animation 2 (eg now called how do we present the results)**

- Participants also noted black dot was only outside the blue bar in +ve direction (ie above predicted)

* This has now been resolved (ie dot moving in several places outside predicted range)

- Participants felt this animation should go in the Explore the data tab

* Already resolved

- They thought this animation was useful, as the FAQs answer to this is very long (eg what happens if falls outside the range), so this is a nice quick summary of what you should be looking for when looking at the data.

- They felt the order of info was right and it was a nicer way of seeing what was in the graphs.

- NL thought saying *almost all the time* rather than 19/20 would be clearer

* **This is resolved in current animation version. Does this need to be changed in FAQs? I like 19/20, even if in brackets after *almost all* in the FAQ. Should ask DS for his view here? Will check FAQ**