



# Questionnaire Results

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## 1.0 Introduction

As part of our requirements and general research we thought it would be best to ask both patients and carers questions about the ideas we already have, if they would have any problems with the product and what they thought could be changed. We though primary research would be the best way to get a first hand opinion and since both the patients and carers are high in our stakeholder management plan we thought it would be most effective to ask both opinions.

# 2.0 Questionnaire format

At the start of both questionnaires we give a description of the application we are building and what features it will have. We then go onto ask around 10 closed question and between 1-2 opened questions.

Both the patient and carer questionnaires are very similar in questions since they will both be using the application for similar purposes. However, each has got specific targeted questions. In this section we will justify why we picked each question and what we wanted to gain from asking it.

### 2.1 Patient question

The patient question starts of by finding out basic information about the participant, questions 1-3 such as name, age and their health condition. We understand people's health conditions can be private therefore we did not make this question compulsory. However, we thought it would be useful to find out what condition people have and whether that could have an effect of them using out application.

Question 4 we are asking the participant how often they have carers, again this will be useful to know and may have an effect of the other answers.

Question 5 is a closed question, asking them whether they think this will be a useful application for them or not. This will give us an either yes or no answer but we have asked, if no why. This will help us understand if people won't use the application what we could do to change it.

Question 6 and 7 are asking whether or not the patient has an electronic device that will be able to access our application and how often they feel they would use it in conjunction to how often they have a carer. This will allow us to understand which size device this needs to be targeted too.

Question 8 is a very important question and can really effect how we build our application. This is because we need to know whether patients will mind the application having access to other information of their phone/ tablet and also storing personal information about them. Question 9 and 10 are based on the usability of the application. We would like to gather from the patient what functions they feel will be best for them and which they will need to allow them to be able to use the app.

Finally question 11 and 12 are asking about any improvement they feel we could make to the app and whether they already use anything to track their health. This question is open, which allows each participant to give their own opinion and improvements without any limitations.

### 2.2 Carer Question

The carer questionnaire is very similar to the patient questions. as we need to find out similar information. Questions 1-3a are again finding out basic information about the carer such as name age and profession. We also thought it would be a good idea to find out what area of care they specialize in. Questions 4, 5, 6, 7 and 9 are very similar to the patient questionnaire, however we thought it would be useful to get the carers opinion. Also whether or not they thought it would be useful, to find out what electronic devices they have and if they would use the application and if not why.

Question 8 again is the same as the patient question but this is extremely important to find out from a carers point of view and whether or not they mind our app having access to certain things on their phone and storing personal data.

Question 10 and 11 are again about the usability of the product. We wanted to get the carers opinion on what their patient needs and what features will be best for them.

Finally question 12 and 13 are the same as the patient questions asking about any improvement they feel we could make to the app and whether they already use anything to track their health.

#### 3.0 Results

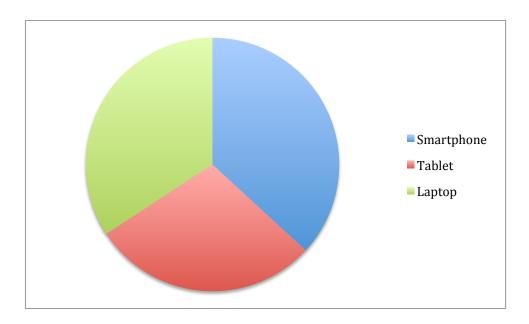
#### 3.1 Patient results

When surveying patients we tried to get a wide variety of people as possible. They were aged between 13 and 76+ and suffered from all different medical conditions from old age to cancer to a broken leg. The majority of people we surveyed also had a carer visit them more than once a week.

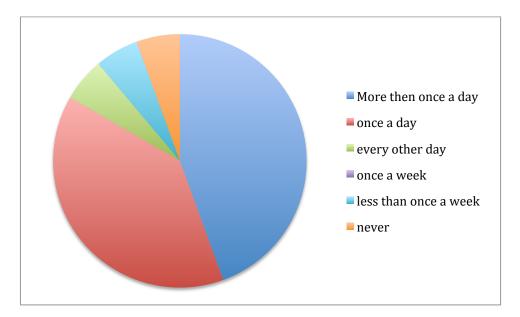
83% of people surveyed said this app would be useful for them and the 17% that did not think the app would be useful was due to either not have any technical devices or having poor computer skills.

When the patients were asked whether they had a smartphone, tablet or laptop, the most of the people had a smartphone followed by a laptop and then a tablet.

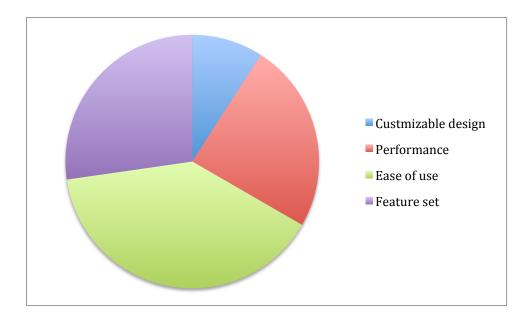
The pie chart below shows the proportion of electronic devices of the patients surveyed.



When asked how often a patient would use our app over 75% said they would use it either more then once a day or once a day. The pie chart below shows the proportion of expected use of the app.



We also asked patients whether they would mind the app: tracking their movements, accessing their calendar and storing personal data. None of the patients minded the app storing personal data or accessing their calendar. However, 30% did not like the idea of the application tracking their movements. After discussing as a team we decided that this would be an optional feature for a patient to have when downloading the app. Our patients thought, the most important features of the app would be ease of use and the feature set. The pie chart below shows this representation.



As a team we will make sure that ease of use is the primary most important part of the app. Also 60% of patients said they did not currently use any app for their health. Other features that were suggested by our patients were:

- To be able to book appointments
  - Games to learn about health
  - Links with the NHS
  - Doctors to be able to view
  - Access for partner when patient having a bad day
  - Physiotherapist access
  - Simple instructions and tutorials
  - Forums for other patients
  - Social networking
  - Compatibility with electronic bed or chair

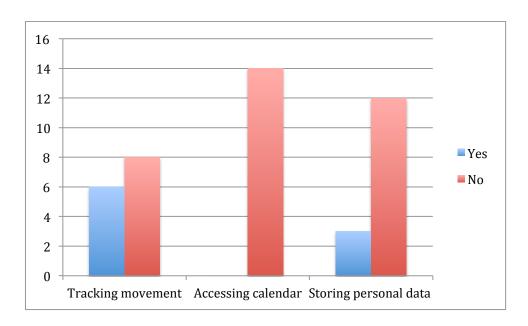
From all these suggested features, we have decided that we will have links with the NHS website and have access for as many health professionals as possible. Features such as social networking, forums and games would also be great extras to be able to add to the app.

#### 3.2 Carer results

Like the patients, we tried to question a wide variety of carers ranging between 13 and 75. However, the majority was between 24 and 54. We also surveyed a variety of health professions not just carers.

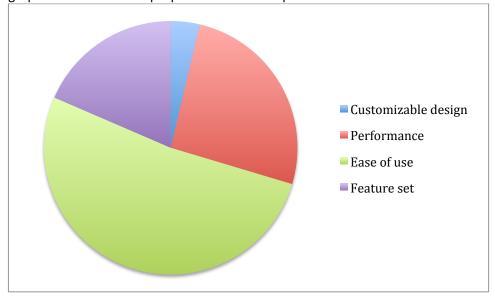
92% of the carers questioned thought this would be very useful for their patients and all the carers had a smart phone, tablet or laptop.

When we asked the carers/ health professionals if they thought their patients would mind them tracking movements, accessing their calendar and storing personal data, nearly half thought that their patient would not like having their movements tracked. Some carers also did not like the idea of that app storing personal data on their phone incase it got lost of stolen. The graph below shows the results of this question:



Also less than 1% of carers thought their patients would use this app and the most important features would be adjustable font size followed by text to speech functions and then changeable colour.

The most important feature the carer thought the app should have was ease of use. The graph below shows the proportion of most important features.



This also confirms that we need to ensure that the app is simple and easy to use.