Registration and dashboard research

Usability testing prototype version 7

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Methods

- Heterogenous sampling

- Remote research sessions

- Multiple methods:

  – Interview (exploring user context)

  – Usability (testing the registration journey)

  – Concept testing (exploring dashboard content)

Participant characteristics

ID	User group	Region	MCCD completion	Ease of MCCD completion	Scenario
P4.1	Dual role (ME/Consultant)	South East	1/month	Extremely easy	ME
P4.2	ME	North East /Yorkshire	N/A	N/A	ME
P4.3	AP (Consultant)	North West	Few times a month	Fairly easy	AP
P4.4	Dual role (ME/GP)	North East /Yorkshire	Less than monthly	Very easy	AP
P4.5	AP (GP)	London	Few times a month	Fairly difficult	AP
P4.6	ME	South East	N/A	N/A	ME
P4.7	AP (GP)	South West	Few times a month	Fairly easy	AP
P4.8	Dual role (ME/GP)	East of England	Few times a month	Very easy	AP
P4.9	ME	Midlands	N/A	N/A	ME
P4-10	Dual role (ME/GP)	North East /Yorkshire	1/ month	Fairly easy	ME

Findings

Important context

- There is hope that the digital MCCD will be **better** than the paper form

    - Easier, quicker to complete, more accurate

- If it isn't **as good**, there's a risk users will stick with the familiar

- Some* areas have established processes through pilots

- The MCCD may be the last thing completed, following scrutiny which is recorded in purpose commission systems
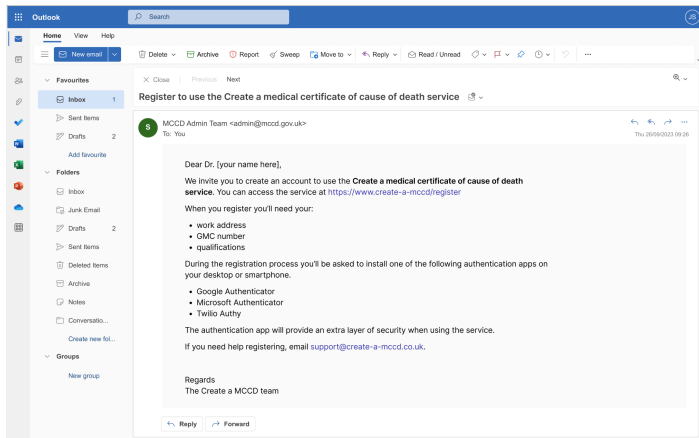
1 – Registration journey testing

Scenario 1 – Activity 1

You're at work and you just received this email. What are your first impressions

Starting point: Email design

Scenario 1 – Activity 2

Can you show me how you'd create an account? [asked at the end of activity 1]

Starting point: Product start page
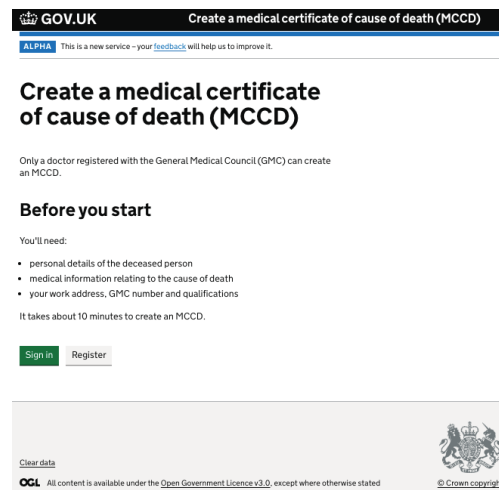
Overview of screen performance

Review	• **Email**
Review	• **Start page**
No issues	• Which of the roles below best describe you?
No issues	• What is your full name?
No issues	• What is your GMC number?
Review	• **Is this your primary medical qualification?**
Review	• **Where do you work?**
No issues	• Check your answers
No issues	• What is your email address?
Review	• **Set your password***
Review	• **Set up your account with an authentication app**
Review	• **Get security code**
No issues	• Your account is set up

Usability issue key
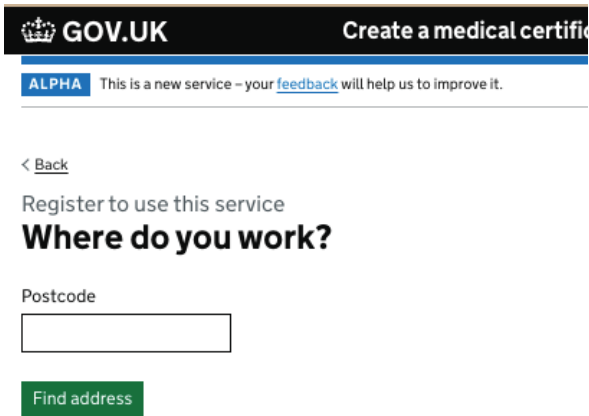
No issues
Minor/medium
Medium/high
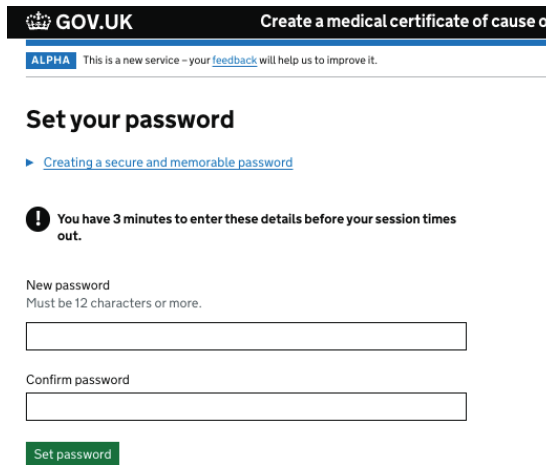
'Where do you work?' and 'set your password'

- Most participants completed this without issue
- GPs at multiple sites all chose the lead practice address

- **Difficulty identified**: how would someone like a locum or dual role GP complete this?

- All participants were able to complete
- No one clicked on the advice/expansion link
- The 3-minute warning caused concern and annoyance
- Several users expected explicit advice on what the password needed to be valid

NHS Business Services Authority, a catalyst for better health

Email invitation

- The overall content was thought helpful and clear (1-4)

- Some elements raised suspicion (5-7)

- Expect to hear about the service before it launches via trusted channels

- Unsolicited /unexpected invitations would cause concern

- Concerns email method of roll out will be ignored by some

- Some expected the service to be embedded with an organisation's process

NHS Business Services Authority, a catalyst for better health
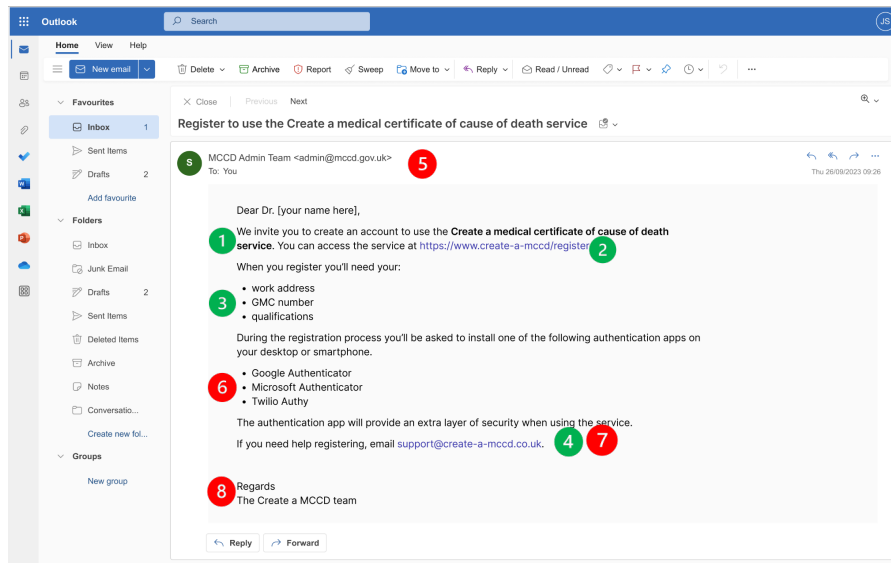
Product start page

- This page brand/style was familiar and reassuring

- This page worked well for APs (or those dual role approaching this in an AP capacity)

- MEs did not recognise that this service was for them and wouldn't expect to use the service

Authentication screens

Those unfamiliar with authentication apps:

- don't know:
  - whether to choose desktop/smartphone
  - which to app choose

- misunderstood the purpose of the app links (expecting it to start the download of the right app)
- Weren't always clear where to get the app from or confident they would choose the right app

2 - Dashboard testing

Scenario 2 - AP participants

I'd like you to imagine that you have been using the service for some time now. I'd like you to click continue and imagine, you've signed in/authenticated

Starting point: Dashboard

Scenario 2 - ME participants

I'd like you to click continue and imagine, you've signed in/authenticated

Starting point: Dashboard

Dashboard

- Many (ME and GP alike) were confused by the dashboard, not understanding:
  - who's dashboard was it, and who entered the cases
  - why something would be 'in scrutiny' or 'amended'
  - The different between 'draft' vs 'in progress'
- Part of this confusion was driven by the proposed process different so significantly to current pilots
- Not everywhere had integration, or across all clinical settings – in these cases, it was thought to be beneficial (especially if referral information could be included)

I was surprised by […] the scrutiny and things because that's just flip ways to how we do it. […] So, you do everything that we would normally do, how we would normally do it and then you go and fill the MCCD out, because that's what you do. That's how we do it. We do it all and then we fill the paperwork out. [P4.4 Dual Role GP]

I can see how this could be useful for hospices (if they could get the certificate ready in this platform, we'd just review it from here and approve). […] would be beneficial to add attachments [P4.10, Dual role GP]

Dashboard

- Mixed views on whether seeing 'completed' is helpful or possibly harmful

helpful to see the ones you've completed - you might need to refer back to them; having it helps with completing Crem form or other paperwork (in the same way as you'd refer to the counterfoil)[P4.7 GP]

It's kind of slightly alien to think we'd have a list coming up of all the MCCDS I've ever done, in my life and that's that can be quite emotive actually [P4.4 Dual Role GP]

- Expectation for administrative staff to have visibility

Dashboard - other observations

- Some thought the status tags were clickable

- More information would be needed to give confidence that the MCCD was being completed for the right patient
  - NHS number,
  - Date of birth

- Being able to sort by name or date of death was suggested be some

Declaration

MCCD ME Declaration confused participants and was felt to duplicate the pre-existing scrutiny process

Wording of the **second statement caused confusion**

I think in reality you might want to tick both [laughs] you might say I agree with the cause of death, and I provided suggestions [P4.1, Dual Role GP]

Several participants were **unsure why they would reject an MCCD at this point or who it would go to**

I think I'd need training on this. What's the purpose of this box? What would the registrars do with that information? [P4.9, ME]

Declaration - that's odd, they're not supposed to write the medical certificate until after it's been scrutinised [P4.6, ME]

Its rubbish, what's the point of click this and adding comments, where do they go? There should have been a discussion before [P4.6, ME]

Medical examiner declaration

○ I am a duly appointed medical examiner and following scrutiny I confirm that the cause of death is as stated on the certificate.

⦿ I am a duly appointed medical examiner and following scrutiny I have provided suggestions about the cause of death stated on the certificate.

Provide suggestions and details about your decision

Continue

Recommendations

Screen	Recommendation
Email invitation	
Service start page	
Where do you work?	
Set your password	
Set up your authenticator app	
Get security code	
Dashboard	
MCCD view	

Any questions?

Carry on the conversation: