

Appendix

Roadmap towards Future Patient Teleconsultation Experience

Master Thesis

Wenhao Li - 5121620 MSc Strategic Product Design



Appendix 1 - Project Brief



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IDE Master Graduation

Project team, Procedural checks and personal Project brief

This document contains the agreements made between student and supervisory team about the student's IDE Master Graduation Project. This document can also include the involvement of an external organisation, however, it does not cover any legal employment relationship that the student and the client (might) agree upon. Next to that, this document facilitates the required procedural checks. In this document:

- The student defines the team, what he/she is going to do/deliver and how that will come about.
- SSC E&SA (Shared Service Center, Education & Student Affairs) reports on the student's registration and study progress.
- IDE's Board of Examiners confirms if the student is allowed to start the Graduation Project.

USE ADOBE ACROBAT READER TO OPEN, EDIT AND SAVE THIS DOCUMENT

Download again and reopen in case you tried other software, such as Preview (Mac) or a webbrowse

STUDENT DATA & MASTER PROGRAMME

Save this form according the format "IDE Master Graduation Project Brief_familyname_firstname_studentnumber_dd-mm-yyyy".

Complete all blue parts of the form and include the approved Project Brief in your Graduation Report as Appendix 1!

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family name	Ĺi	Your master program	nme (only select the options that apply to you):
initials	W given name Wenhao	IDE master(s):	☐ DfI SPD
student number	5121620	2 nd non-IDE master:	
street & no.		individual programme:	(give date of approval)
zipcode & city		honours programme:	Honours Programme Master
country		specialisation / annotation:	Medisign
phone			Tech. in Sustainable Design
email			Entrepeneurship

SUPERVISORY TEAM **

Fill in the required data for the supervisory team members. Please check the instructions on the right!

** chair ** mentor	Richard Goossens Elif Ozcan Vieira	dept. / section: HCD-AED dept. / section: HCD-DA	Chair should request the IDE Board of Examiners for approval of a non-IDE mentor, including a motivation letter and c.v
2 nd mentor	organisation:		Second mentor only applies in case the
	city:	country:	assignment is hosted by an external organisation.
comments (optional)			Ensure a heterogeneous team. In case you wish to include two team members from the same section, please explain why.

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Procedural Checks - IDE Master Graduation

APPROVAL PROJECT BRIEF

To be filled in by the chair of the supervisory team. Digitally signed by rgoossens Date: 2022.02.28 09:52:05 chair Richard Goossens +01'00' CHECK STUDY PROGRESS To be filled in by the SSC E&SA (Shared Service Center, Education & Student Affairs), after approval of the project brief by the Chair. The study progress will be checked for a 2nd time just before the green light meeting. all 1st year master courses passed Master electives no. of EC accumulated in total: _____ EC Of which, taking the conditional requirements NO missing 1st year master courses are: into account, can be part of the exam programme ___ List of electives obtained before the third semester without approval of the BoE signature FORMAL APPROVAL GRADUATION PROJECT To be filled in by the Board of Examiners of IDE TU Delft. Please check the supervisory team and study the parts of the brief marked **. Next, please assess, (dis)approve and sign this Project Brief, by using the criteria below. • Does the project fit within the (MSc)-programme of APPROVED) NOT APPROVED the student (taking into account, if described, the activities done next to the obligatory MSc specific NOT APPROVED APPROVED • Is the level of the project challenging enough for a MSc IDE graduating student? Is the project expected to be doable within 100 working days/20 weeks? Does the composition of the supervisory team comply with the regulations and fit the assignment? comments

name	date -	signature	
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Initials & Name W Li		Student number 5121620	
Title of Project Design for the Futu	re Patient Consultation Experien	ce in 2030	



Personal Project Brief - IDE Master Graduation

Design for the Future Patient Consultation Experience in 2030

Please state the title of your graduation project (above) and the start date and end date (below). Keep the title compact and simple. Do not use abbreviations. The remainder of this document allows you to define and clarify your graduation project.

start date 21 - 02 - 2022 end date

INTRODUCTION **

Please describe, the context of your project, and address the main stakeholders (interests) within this context in a concise yet complete manner. Who are involved, what do they value and how do they currently operate within the given context? What are the main opportunities and limitations you are currently aware of (cultural- and social norms, resources (time, money,...), technology, ...)

In healthcare, the doctor-patient interaction is most commonly held in the Consultation Room, which hasn't changed much over the last few decades. However, new technologies such as virtual reality, artificial intelligence, speech to speech translation and so on are available now. These developments provide new opportunities to support all processes in the consulting room, of which communication between doctor and patient is only one component, and may even set the stage to extend current processes, such as offering extra services to the patient outside the consulting room. Such as: consultation space on the way, home based diagnosis and monitoring, new way of doctor-patient interaction, etc.

This project is part of the Consultation Room 2030 initiative, which seeks to investigate how the future of healthcare will change in the coming years. My personal interest is in utilizing technologies to alleviate patients' anxiety during consultation journeys in telemedicine contexts. There are two main points I want to further elaborate on. On the one hand, people frequently feel tense and anxious during consultations due to various reasons: worry about disease, fear of death, unfamiliar with medical environments, feel helpless due to lack of facilitation, etc. And, in remote scenarios, this situation may worsen due to a lack of knowledge, experience, and support. Telemedicine, on the other hand, has grown rapidly in recent years, particularly since the pandemic, and has the potential to be the future of healthcare. At present, telemedicine is mainly applied in rural areas where professional medical staff is lacking. But in the future, telemedicine has the potential to be widely used in cities to further facilitate people's medical needs (HealthyMePA. 2018). It leaves many spaces for emerging technology applications and innovation in the consultation process.

Doctors, nurses/ facilitators, family members and, in most cases, patients are the primary stakeholders. The patients should have sufficient somatic capability to complete the consultation process and communicate without barriers.

Due to the pandemic and some medical regulations, access to doctors and nurses in hospitals might be difficult, and most interviews may be conducted online for time efficiency and safety. But, to make up for it, I'll make good use of the online resources such as youtube videos and patient forum and use the "patient simulator" to obtain user insights and evaluations when needed.

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nitials & Name	_W Li	Student number 5121620	
Title of Project	Design for the Future Patient Consultation Experience in	n 2030	

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Personal Project Brief - IDE Master Graduation

introduction (continued): space for images

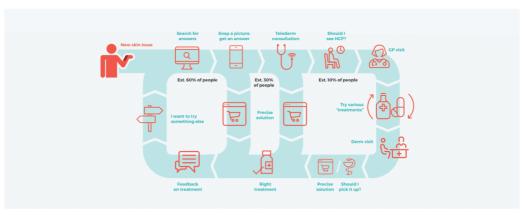


image / figure 1: Evolving the patient journey through Artificial Intelligence (Bourlioux and Christensen, 2018)



image / figure 2: ___Medibus als mobiel laboratorium in strijd tegen COVID-19 (VDL, 2020)

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Initials & Name W Li Student number 5121620

Title of Project Design for the Future Patient Consultation Experience in 2030

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PROBLEM DEFINITION **

Limit and define the scope and solution space of your project to one that is manageable within one Master Graduation Project of 30 EC (= 20 full time weeks or 100 working days) and clearly indicate what issue(s) should be addressed in this project.

Most people experience stress and anxiety from time to time, but there are still nuances between them. According to the American Psychological Association(2020), stress is defined as an emotional response typically caused by external triggers. Anxiety comes from "fear of the unknown, as disproportionate to the threat involved, related to the future (Wilson - Barnett, 1976)". At the Delft Institute of Positive Design (DIoPD), anxiety is described as a negative emotion experienced by individuals as a response to an ambiguous threat and defined as the feeling when "You think about bad things that could happen to you. You are on guard, because you don't know what the threat is." (Emotion Typology, n.d.)

Also, it's vital to distinguish and Trait Anxiety and State of Anxiety. Trait anxiety is the "tendency of a person to experience anxiety" and this depends on his/her personality, or the tendency to "perceive the world in a certain way and in dispositions to react or behave in a specific manner with predictable regularity". With state of anxiety, it refers to the emotional and physiological manifestations of anxiety that a person shows when he/she is subjected to a stressor (Mai, 2015). Therefore, I will define trait and state sequentially in the research section.

The research question could be divided into several sub-questions to structure the specific research goal: How to utilize technologies to alleviate patients' anxiety during consultation journey in tele1medicine context in 2030? SQ1: What are the key elements that arouse/influence anxiety?

SQ2: How can technology be applied to lighten anxiety?

SQ3: How to entail the technologies into the desired future vision?

There are aspects need to be considered. First, since the time horizon is in about 10 years, the future vision needs to be practical and verifiable. Second, the solutions should be as universal as possible to provide an inclusive medical solution. Third, Since all user data will be processed through the network, it's vital to consider data privacy.

ASSIGNMENT **

State in 2 or 3 sentences what you are going to research, design, create and / or generate, that will solve (part of) the issue(s) pointed out in "problem definition". Then illustrate this assignment by indicating what kind of solution you expect and / or aim to deliver, for instance: a product, a product-service combination, a strategy illustrated through product or product-service combination ideas, In case of a Specialisation and/or Annotation, make sure the assignment reflects this/these.

This project will explore how to alleviate patient's anxiety during consultation journeys through implementation of emerging technologies. A strategic roadmap leading to a future vision will be designed. The whole project will be divided into 5 stages as a variant of the Double Diamond Model (British Design Council, 2005).

The first assignment is to understand the research context. Literature review and expert interview will be conducted to map out the patient journey in real context and discover potential needs.

The following challenge is to discover opportunities in future. The research will be more future oriented to detect what will be the cutting age technologies in 10 years and how will people's value evolve in the following decade. Strategic trend research and technology scouting techniques will be adopted.

To better define the problem, key user insights will be gathered through co-creation sessions to understand what elements arouse people's anxiety, how to measure it, how to alleviate it, etc.

Prototyping and verification will be a spiral process using Research through Design method during the 4th stage. While iterating on the prototype, the research through design method will be used to elicit user insights. The results will be incorporated into the final design roadmap.

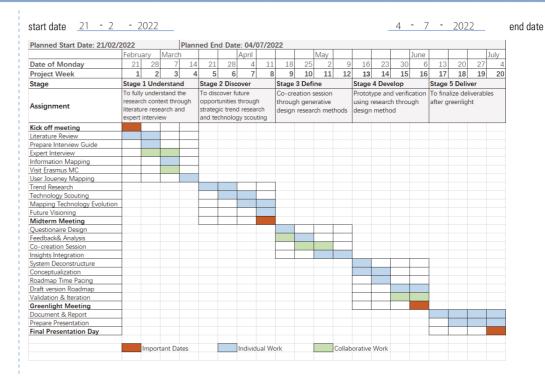
The last stage is scheduled after the Greenlight Meeting to complete all the deliverables and prepare for the final presentation.

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Title of Project	Design for the Fu	iture Patient Consultation Experience in 2030	



Personal Project Brief - IDE Master Graduation

Include a Gantt Chart (replace the example below - more examples can be found in Manual 2) that shows the different phases of you project, deliverables you have in mind, meetings, and how you plan to spend your time. Please note that all activities should fit within the given net time of 30 EC = 20 full time weeks or 100 working days, and your planning should include a kick-off meeting, mid-term meeting, green light meeting and graduation ceremony. Illustrate your Gantt Chart by, for instance, explaining your approach, and please indicate periods of part-time activities and/or periods of not spending time on your graduation project, if any, for instance because of holidays or parallel activities.



The entire project is scheduled to last 20 weeks. The Midterm will take place 8 weeks after the Kick-off meeting, and the outcome will be a clear future vision. The Greenlight meeting is scheduled 8 weeks after the Midterm, at which point the project will be approximately 80% completed. The final four weeks are allotted for completing all deliverables. If there are any delays or changes in the process, another two weeks are scheduled.

To understand the research context, I'll begin with a literature review and expert interviews in the first stage. A patient journey will then be mapped following a field visit at Erasmus MC in the first 4 weeks. During the second stage, strategic trend research and technology scouting will be conducted to identify possibilities. A map of technological evolution will be created, and a future vision will be depicted as a key node of the first eight weeks

The third stage will begin with a questionnaire survey. Following the analysis, I will screen out target interviewees and conduct co-creation sessions to gain insights. The information gathered will be combined into a "integrated worldview" to contribute on the design process.

The fourth stage is to formulate the design roadmap following the deconstructure and time pacing strategy. The outcome of previous stages will be applied for the conceptualization. After the spiral iteration process, a draft roadmap will be created before the Greenlight.

The last stage is scheduled after the greenlight meeting for refinement and finalizing all the deliverables.

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MOTIVATION AND PERSONAL AMBITIONS

Explain why you set up this project, what competences you want to prove and learn. For example: acquired competences from your MSc programme, the elective semester, extra-curricular activities (etc.) and point out the competences you have yet developed. Optionally, describe which personal learning ambitions you explicitly want to address in this project, on top of the learning objectives of the Graduation Project, such as: in depth knowledge a on specific subject, broadening your competences or experimenting with a specific tool and/or methodology, Stick to no more than five ambitions.

This project first came from my long-standing interest in psychology and emotional design. At the outset, I wanted to design for people with mental health issues in order to provide a better psychological consultation journey. Then I received the project brief from Tingting and Guido, which matched my interests perfectly. I learned more about the Consultation Room 2030 project after several discussions and found it to be a very interesting topic to delve into. Therefore, I reconsidered my direction to focus on people's psychological aspects during medical consultation in 2030.

As a strategic designer, I always hold a positive attitude toward the application of technology, even though I am not an avid technology geek. Technology, like money, is a two-edged sword. As long as it is used correctly, it has the potential to elevate people's lives to a whole new level. People should, of course, retain the right to reject such changes. At the same time, I believe that the medical industry is one of the scenarios in which the value of technology can be maximized, which is why I chose this as my research field. I want to investigate objective problems, fulfill significant needs, and design for the real world. Regardless of the fact that there is a significant gap between my output and a truly feasible solution, I hope to consider the actual situation as much as possible during the project process.

Throughout the SPD program, I learned a variety of design methodologies, including design roadmapping, generativedesign research, qualitative and quantitative research methods, and so on. Among these, I am more concerned with how to sort out research context in order to define problems. The graduation project truly allows me to apply the methodologies and techniques I've learned to my own project, and I believe it will be the one to which I will devote the most energy during my postgraduate studies.

For my future career planning, I'd like to pursue a human-centered interaction design direction. Therefore, for my graduation project, I'd like to delve deeper into how to leverage the user's experience level and define the principles of a good experience. To summarize, there is still far too much to know and learn. I hope that the graduation project is more than just a summary of the postgraduate stage, but that it also allows me to improve my ability to think independently as a designer.

FINAL COMMENTS

In case your project brief needs final comments, please add any information you think is relevant.

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nitials & Name	_W Li	Student number <u>5121620</u>	
Title of Project	<u>Design for the Future Patient Consultation Experience in </u>	n 2030	

Appendix 2 - Expert Interview Guide

Doctors' Version

Main research question

• How to alleviate patients' anxiety during the consultation journey in 2030?

Preparation

- Graduation project background on Consultation Room 2030
- Introduce the main themes in this interview
- Ask permission to record

Part 1: Anxiety status in hospitals/ medical context

- Introducing your job and duty?
- Interaction with patients?
- Have you noticed how's the patient's anxiety?
- Obvious manifestation
- What type of trait is more anxious? Influencing factors such as age, gender, and personality characteristics?
- · Relevant with the severity of the disease?

Part 2: Personal interpretation of patients' anxiety

- Will the anxiety status influence doctors' work?
- Do healthcare workers pay attention to patients' anxiety levels?
- Does Focusing on Patient Emotional Health Increase Physician Workload?
- Possible influencing factors you think?
- · Waiting time/far distance/noisy environment, etc.
- Dealing methods/ conditions?
- Related experience with anxious patients?

Part 3: Future outlook from experts' view

- An ideal healthcare context in the future
- Attitude towards telemedicine and other trends
- Attitude towards other new technology such as VR/AR coming into the healthcare industry?
- Attitude towards emerging software and computer technology? Happy to use or feel burdened?

Designers' Version

Main research question

How to alleviate patients' anxiety during the consultation journey in 2030?

Preparation

- Graduation project background on Consultation Room 2030
- Introduce the main themes in this interview
- · Ask permission to record

Part 1: Anxiety status in hospitals/ medical context

- Introduce your related project and experience?
- What's the most difficult part of it?
- · How did you solve it?
- Do you have any suggestions for other designers/ new hands in this field?

Part 2: Personal interpretation of patients' anxiety

- About patients' anxiety, how do you address/ define it?
- What do you think are the key influencing factors?
- Any experience in solving patients' emotional problems?
- How did you do that and what's the outcome?

Part 3: Future outlook from experts' view

- An ideal healthcare contest in the future?
- Attitude towards telemedicine and other trends?
- Attitude towards other new technology such as VR and AR coming into the healthcare industry?

Appendix 3 - Work Boards of User Research Sessions

Interview Session 1

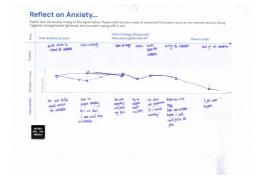
ACTIVITY 1: Reflect on your personal trait



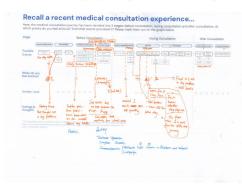


ACTIVITY 2: Mapping out the anxiety change curve



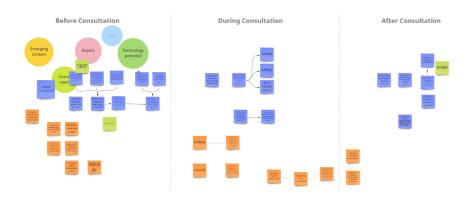


ACTIVITY 3: Mapping out your consultation journey





PART 4: Envision the future consultation experience



Interview Session 2

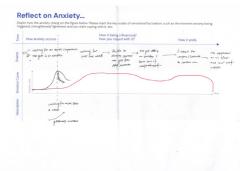
ACTIVITY 1: Reflect on your personal trait





PART 2: Mapping out the anxiety change curve

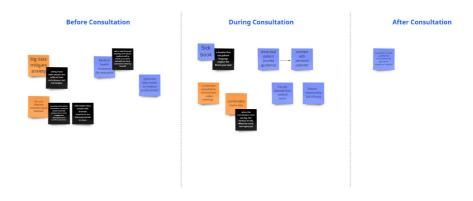








ACTIVITY 4: Envision the future consultation experience



Interview Session 3

ACTIVITY 1: Reflect on your personal trait



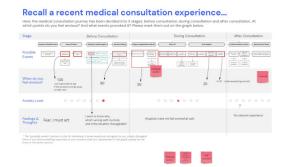


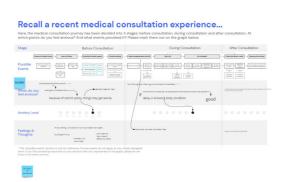
ACTIVITY 2: Mapping out the anxiety change curve



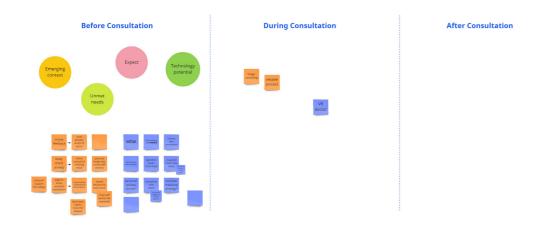


ACTIVITY 3: Mapping out your consultation journey





ACTIVITY 4: Envision the future consultation experience



Interview Session 4

ACTIVITY 1: Reflect on personal trait





ACTIVITY 2: Mapping out the anxiety change curve





ACTIVITY 3: Mapping out your consultation journey





PART 4: Envision the future



Appendix 4 - Strategy Proposals Evaluation Result Overview

	Participants	1. Value for anxiety	2. Accepta nce level	3. Future feasibilit y	4. Human- centere d level	5. Design Design quality	5.1 reliable	5.2 friendly	5.3 involving	5.4 reassurin	5.5 simple	5.6 informativ e	Average
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oy-step	2	6			5		5		6			7	5.
consulta tion	3	5										6	5.
guidance	4	7											
	5	6											
	6	7											
	7	5											
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	Participants	1. Value for anxiety	2. Accepta nce level	3. Future feasibilit y	Human- centere d level	Design quality score	5.1 reliable	5.2 friendly	5.3 involving	5.4 reassurin	5.5 simple	5.6 informativ e	Average
50	1	4											
S2 Patient	2	6											
group	3	6			6								
	4	5											
	5	5			5								
	7	6											5.
	Average	5.57		6.14	6.14								5.4
	71101080				4.		5. Design					0.40	0.1
S3 Agile	Participants	1. Value for anxiety	2. Accepta nce level	3. Future feasibilit y	Human- centere d level	Design quality score	5.1 reliable	5.2 friendly	5.3 involving	5.4 reassurin	5.5 simple	5.6 informativ e	Average
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	Average				4./1		5. Design		5.29	5	0.43	0.14	5.4
	Participants	1. Value for anxiety	2. Accepta nce level	3. Future feasibilit y	Human- centere d level	Design quality score	5.1 reliable	5.2 friendly	5.3 involving	5.4 reassurin	5.5 simple	5.6 informativ e	Average
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