

FROM THE  
EDITOR

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**To Cite:** McCausland T. Patient feedback can inform healthcare design. JHD. 2018;3(2):102–103.**Corresponding Author:**Tammy McCausland  
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[editor@johd.info](mailto:editor@johd.info)**Copyright:**© 2018 The Authors. Published by Archetype Health Pty Ltd. This is an open access article under the [CC BY-NC-ND 4.0 license](https://creativecommons.org/licenses/by-nc-nd/4.0/).**SUMMARY**

This special edition focuses on innovative ways of gathering feedback from patients to inform design. Thank you to The Point of Care Foundation for facilitating and contributing to this edition.

**Key Words**

Patients as co-designers; patient experience; innovation; healthcare design

**INTRODUCTION**

We are pleased to bring you our latest edition. Our partnership with The Point of Care Foundation (PoCF) continues and we are thrilled to have submissions from The PoCF and its network of healthcare professionals. Their contributions focus on “innovative ways of gathering feedback from patients to inform design.”

This edition’s editorial is authored by Bev Fitzsimons, Head of Improvement at The Point of Care Foundation. She discusses the challenges of using patient feedback to inform design. While patient data are used in many ways, many opportunities remain for patients to contribute to issues around safety and improving patient care, to name but a few. Fitzsimons argues that “a culture of curiosity is a prerequisite for making best use of patient insight data for improvement”. She also suggests there is growing potential for involving patients more in co-designing improvements in care.

“Using patient narratives to design an intervention to reduce noise in the intensive care unit” is a research insight paper that highlights how patient narratives can be used to guide improvement in patient care, and that the accelerated experience-based co-design (AEBCD) method is an effective approach. The authors suggest that including patients and staff in the design team can keep the focus meaningful and ensure that an intervention is both acceptable and deliverable.

Adding more funding and/or staff does not guarantee an improved patient experience. In the audit, “Shadowing and goShadow: Tools to discover and co-design ideal care experiences”, the authors report on a process improvement project about a “goShadow” app that enables a shadower to provide accurate, quantitative feedback on a care experience.

In “Photo-ageing for smoking cessation in pregnancy: A pilot study”, researchers highlight the challenges of recruiting pregnant women to a smoking cessation study. Despite numerous protocol modifications, only one woman was recruited—consequently, the study was discontinued. The researchers attributed the study’s failure primarily to pregnant women being reluctant to disclose their smoking habits due to the stigma associated with smoking during pregnancy. The researchers’ findings yield important lessons for other researchers engaging or planning to engage in similar studies and smoking cessation initiatives during pregnancy.

“Who knows what ‘healthy weight’ looks like?” is about a study that aimed to explore whether the general population can identify a healthy body mass index (BMI) and accurately perceive their own BMI using a visual scale. Researchers

found that overweight participants were significantly less likely to correctly identify their own BMI and were also most likely to incorrectly think that they are a healthy size. The results suggest that individuals who are overweight may require help to identify that they are overweight, so that associated health issues can be addressed.

We are delighted to share the experiences of the authors who have kindly submitted their ideas for dissemination. We heartily thank The Point of Care Foundation, and especially Bev Fitzsimons, for contributing to this edition. We also thank the other authors who published in this issue.

Thank you, as always, to our contributors, reviewers, and readers. Your support validates our mission to improve the design of health care for an improved patient experience. Here's to better design for better health!