

Review of: "Applying User-Centered Design Methods to Improve The Experience of the NHS APP"

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Potential competing interests: No potential competing interests to declare.

This is an immature manuscript, and if sent to a journal in this condition, would likely be “desk rejected.” It is a rework of parts of a student thesis – this is obvious as the manuscript still contains references to “dissertation” and “chapter.” Before submitting for any type of review, make sure you have made the work into a paper and consider word limit, style, and use of giveaway words such as the above.

Other comments on the paper:

Age 20-40 is not the target age group for peak use of the NHS. This is likely a convenience sample of students.

The lack of mention of the impact of Covid on the NHS, and particularly the resulting provision of telehealth and the shortage of staff, is a real shortcoming of the paper. These things must be addressed for the paper to be relevant.

Proofread for sense-making, tense, and person. None of these is consistent in the paper. There are large sections in the second person that read like a textbook or guideline.

The description of UCD is immature, out of date, and over-simplified, but some explanation of UCD could be necessary depending on the journal you submit to and the likely background of the reader, so I suggest keeping this and improving it. Just two examples: you mention “intuitive design” but do not define it, and you never make any reference to the importance of iteration.

Some references are out of date (e.g., on page 3, stats about numbers of people accessing health apps are 10 years old, one citation relating to UX is 20 years old).

Before you state the RQs, you need to introduce them. Right now, they are tacked on to the end of the UCD description.

In the description of the talk aloud protocol, the necessity of setting/observing a task that is undertaken to prompt the protocol is not mentioned – the task is assumed, and the reader has to make their own sense of what it might be.

You could also consider including the ISO definition of Usability in your measures of success.

Please define and explain Fig. 1.

In the method, you have missed out a stage which, as far as I can tell, you did undertake – re-design of the app. How you went about this using the data already collected to do this needs to be described, and the design process acknowledged

as a step of the method. How many prototypes were presented and how they were presented to participants also needs to be explained.

Please make it clear whether participants used the app during the interview to generate the verbal protocol or whether they talked from their memories of using the app. Also state at the front of the paper how many participants did which study and whether they were some of the same people. I only found this on p. 23 in limitations.

The NHS website <https://www.nhs.uk/> includes some of the aspects you mention in your discussion about the app. Acknowledge the existence of the website and consider how it relates to the use of the app.

I suggest you link your quotes from the interviews better to the text in the results so that the text flows better.

Many medical appointment systems, such as HotDoc, do push notifications, and you should acknowledge that.

All tables need captions and an introduction to the purpose of the table within the text.

The claim that your app could save traffic accidents is a strange one to make – this work could have much more direct impacts and benefits, and this claim is indirect at best. The claim that UCD is unexplored in telemedicine is also untrue.

I suggest that before submitting this to another reviewer, you familiarise yourself with how a paper is laid out and how studies are explained so you can make your process much clearer. A mentor to help you produce a paper based on a thesis would also be very beneficial.