

Task 1. Evaluating help file.

1a. Scenario two is telling about how to change the sharing, thus being instructions supporting skill learning.

Recognisability: The first steps are described in plain text, thus no obviously recognizable interface items. The window for selecting visibility options is recognizable. Later, the user list is also a screen shot, while other instructions are plain text.

Sequence: The sequence is also in plain text. There is a diversion to Scenario 2 if a condition is not met. There is also a reference to Scenario one and when not to do the operation in the end of the instruction.

Feedback: The text says where you will be after specific steps. The two screenshots are strengthening feedback. It does not provide any means for checking that all the users have received the link. Some may turn up in the Viewing now list.

1b. The introduction tell that this help file addresses the problem of sharing a Google spreadsheet. It explains what a Google account and a Doc are, probably aiming at understanding these concepts.

Recognisability: A screenshot of a spreadsheet is shown, however, it is not referred to in the explanation of Doc. No screenshots of Google account is given.

Sequence: This part does not include operations, such that sequence does not apply.

Feedback: Also not relevant due to lack of operations.

Task 2. Training superusers

2a.

Day 1: The superusers should be able to use all parts of the system which they are supposed to use and be able to search for help.

Day 2: The superusers should be able to organize training, train and support their colleagues on using the system.

2b.

All five superusers from each department in a batch.

Day 1

9-10: Presentation on why the new system and plans for its implementation and the superuser role. Discussion.

10-12: Short introduction to the new interface. Using the functionality known from the previous system on the new system. Searching documentation for navigating. Mainly hands-on. Pair working cross departments

13-14: Setting up user accounts. Explanation of user roles. Setting up user accounts for the staff in their departments. Discussion of user roles when appropriate. Mostly hands-on individual.

14-16: Visit types. Entering visit, hands-on, short. Explanation of visit-types. Generating visit-types for the department. Discussion of common visit types for the whole hospital. Reworking visit-types for the departments. Mostly hands-on, 2-5 working within department collaborating

Day 2

9-10: Planning the organization of time and people for training in the department. Introduction and group work for the five.

10-12: Selecting and sequencing topics. Introduction to training: the need for communicating the reason for the new system to all users and the need for them to spend most of the time hands-on practice. Selecting and adjusting training material for the department. Each superuser prepares one topic for training.

13-15: Each participant carries out training of her/his topic.

15-16: Planning of support during the weeks after installation.

2c.

Since the functionality for users is preserved, the new system only requires new skills in handling the interface. Navigating in menus is a learning issue, such that the superusers need to know how to search.

For both superusers and users, it is necessary to understand the reasons for changing systems to avoid negative attitudes.

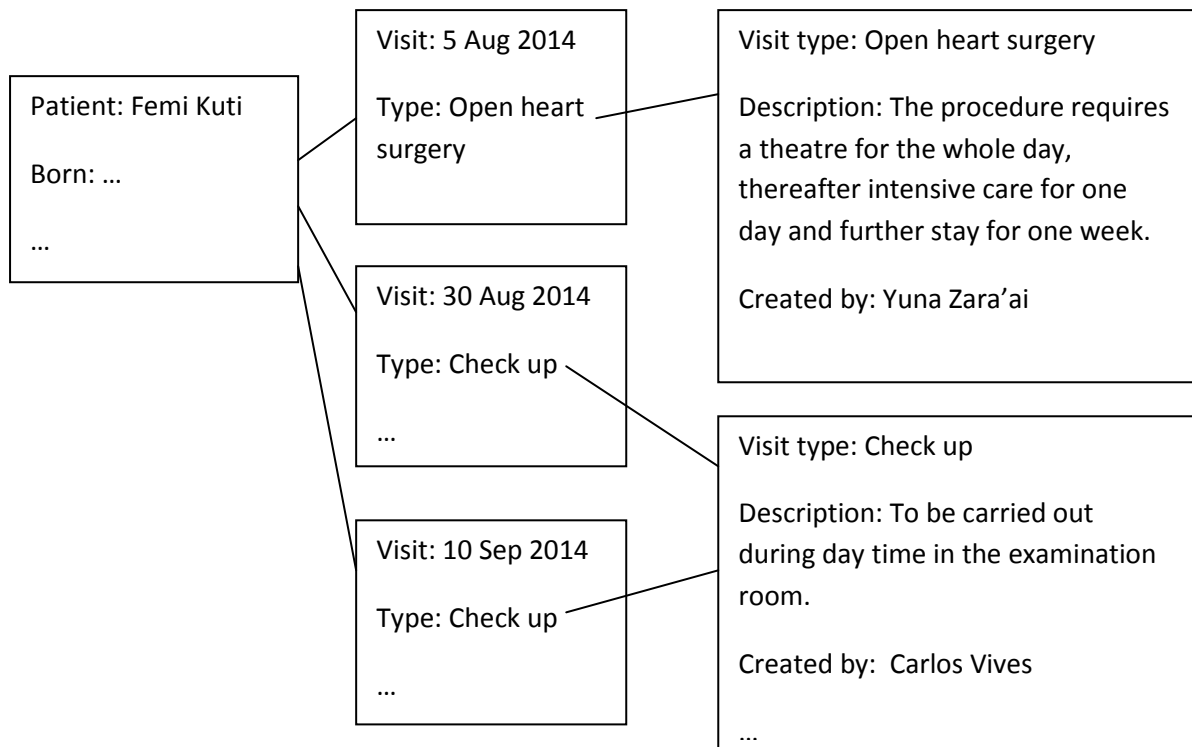
Two new functionalities for the superusers plus the role of training others. Visit types is a more abstract entity than visits, such that a thorough explanation is needed in addition to the hands-on. Visit types may become more concrete through generating the department's own types, which should be more or less known to the superusers.

Due to the need for all users to master the system when switched on, the training that the superusers will carry out in their departments needs to be well organized and of reasonable quality. Therefore, the whole of the second day is allocated for the preparation of training and support.

Pair working across departments is useful for getting to know superusers outside own department.

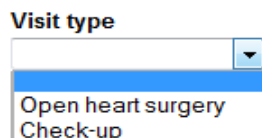
2d.

A patient can have several visits during treatment, and some of these visits can be of the same type, see the figure below.



New visit types can be defined under the Tailoring menu.

All visit types for the department will appear as an option list when booking visits for a patient:



When defining new visit types, discuss which types to include with your colleagues. Make sure that you include those who have long experience with the particular type when describing it.

2e.

The first explanation and the data model intend to create a structural understanding. The New visit ... sentence is there for navigation. The All visit types ... sentence and illustration intend to create understanding of the output of the operation and its use in another operation.

The last paragraph is included to make the visit types as relevant as possible for the department.

2f.

Choose one of the types in the drop down list. If none of these fits, contact a superuser.

2g.

Day 1

What is the main benefit of the new system?

Or

What is a visit type?

Day 2

What is the most important issue for users to learn?