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KEY:

Cannot decipher = (unclear + time code)

Sounds like = [s.l + time code]

I: = Interviewer (Interviewer in bold)

R: = Respondent.

I: So, yeah, what do you think?	
R: I think it's a great idea. Um in terms of ways of connecting people, it is that kind of needs lead like I'm talking about, that kind of needs lead, finding out what's important to the person. But I really like the idea of actually it giving you a framework of this is how old somebody was. And almost like what were the main events of that year. You know, what were the main news stories, what were the, as you say, what were the main, what were the most popular singers. It is a way of connecting with somebody's history. The only thing that I said to you is I would be a little bit tentative about is that informed consent, that there would have to be um, because to keep information and to share that, if you were just using it for yourself, as a granddaughter then I don't see a problem with it. But if you're then sharing it with professionals and more that professionals and then sharing it with you, there'd be ethical restrictions around that. So, it would, I mean, it's certainly not, it's not something that you can, that is insurmountable by any means.	
I think it will just be around establishing. In the same way that you would, when you go and work with somebody anyway and family members and staff in a care home where they share information, there would be an assessment of the person's capacity to consent to what you're doing. Whether it's in their best interests that it goes ahead, you know, there'll be those kind of assessments and policies and procedures in place anyway just for just general information about the person. So, it needn't be anything be anything massive on top of that, I don't think but it will certainly be something if particularly, I mean, I	

wouldn't be able to share information about a patient with a family member without their consent unless some kind of extenuating circumstances, you know, unless they didn't have capacity but actually it was hugely in their best interests. But it's a very, very kind of tricky line. And you have to be very careful.	
Um if it's just information with family members and stuff then I don't see, there's no real difference from picking up the phone and saying, "Oh, I had a chat to dad about this today," or something. But if you're just, I think, that can be sorted. I think by and large the technology, something like that is a fabulous idea because it not only gets you to share that, what's helpful and what works across family members but I like the idea of those prompts of connecting. And it might be those things that come up aren't what the person was interested in at all but at least they tell you. Might be, "Oh, that was rubbish." Or, "He was awful, he couldn't stay the notice." But you know, it's conversation, isn't it?	
I: Yeah, exactly. Yeah. And then you built off that, I guess, and find out different things.	
R: Yeah. Don't ask them about whoever. [Laughter].	
I: Yeah, definitely. What about the prompts themselves and the kind of content that that kind of, that you'd produce if you're using them. So, the, er sorry, the er the prompts are quite generic um and when I was designing them um deliberately made a decision to try and get things that might not have any negative connotations for people. So, for instance, talking about schools, it's quite difficult you know, because I'm like the bully at school and that kind of thing. How do you feel about that kind of design choice or should it just be kind of everything in there and not worry if something was negative or something?	
R: It's difficult, isn't it? Because different things will touch a nerve with different people. Um so, again it's difficult to have like a formula for things to say and not to say because for some people, school might have been the most positive time in their life but as you say, it might be the most traumatic. Um I don't know, I don't know whether just the use of open questions and again, I use the word curious but you can't go far wrong if you come from that position where you go, "Ah, you know." So, if I want to find out somebody's history, I'll often ask, "Who was at home when you were younger?" Um, "What did you do when you left school?" You know, just those kinds of things.	
And often conversation just goes from that. Um so, I suppose again, it's just not making any assumptions on asking about somebody's school specifically like a specific question, just more like, "Oh, how old were you when you left school?" Um or, "What did you do after that?" You	

know, just those kinds of things rather than, “What was school like for you?” Does that make sense? So, it’s more just like an open question around who was at home um, “What were your friendships like as a kid?” You know, I don’t know, those kinds of things.	
I: Yeah. I can see what you mean. So, especially about what actually happened to them, kind of.	
R: Just what was that like and who was around and um what did you used to like to do in your spare time when you were a kid? Those more kind of generic, open questions, I think, would be helpful. Um because people will talk about it.	
I: Yes. Okay, yeah, so that’s good, take that into consideration. Um the other thing I was going to ask as well, so we talked about a lot about kind of memory boxes and life story boxes er and this kind of thing. So, I think there’s quite a large overlap between that and tickets still I think in a lot of ways. But I was wondering kind of how you think technology like this would work in a family er wherein a family member had a diagnosis of dementia. Because um thinking like the (unclear 0:06:16.2) like 60 of your family care, give it um.	
R: That did cross my mind. That did cross my mind.	
I: Yeah. So, I think that might be quite tricky. And then you know, like everyone might have grandchildren as well or access to phones so it might be quite difficult for someone to use something like that and the memory box might be quite useful for them. I don’t know. What are kind of your thoughts on that, do you think—	
R: Again, it depends on the family. You know, you get some families who, you know, some families I’ve worked with where there’s people in their 80s and they’re better on a smartphone than I am. You know, again, it’s just, I suppose it’s just making it okay that this’ll suit lots of people but it won’t suit some. Um and that’ll just be the case really. I think but it’ll be a huge benefit to lots of people, I think. But um some people will disengage because I mean, my mum can’t even switch the flipping thing on. She’s a nightmare. She’s 75 and she just, yeah, I have to ring her at least, it has ring out at least three times before she even tries to pick it up. So, that would just, she wouldn’t even go there. Um but for younger family members, for grandchildren, it might not be so much of a generational problem.	
Um but as I said, there might be lots of people with older family members that love all the tech. So, I think again, it’d just be reassuring yourself that actually this’ll be hugely beneficial for lots of people but it won’t suit everybody. And that’s all right because you’re never going to get something that fits all. Um it could be that something more tangible like	

a physical photograph or a memory box or cassette or something. Um it's helpful for some people but that's all right, that's okay. You can't be expected to cope with that something that suits everybody. It's impossible.	
I: Yeah, exactly. It's never going to work. [Laughter].	
R: But I don't think that then makes it unusable, I think almost the opposite. Um it's again just finding out which families it suits.	
I: Yeah, okay. Okay. Er so I'm wondering if um a person with dementia had a profile about them on [s.I Tickets Talk 0:08:43.9], they couldn't log in and see that profile themselves. There's no option for them to do that. They can only like log in through someone else's account and see their profile. What do you think about that kind of to some choice?	
R: Again, it goes, it comes back down to capacity to consent. So, it's whether or not the person knows you've got this information, whether they have the capacity to understand why you've got that information in a way that you have, whether it's more harmful for them to know that than to not know that. So, it'd be very much a clinical judgement that would have to be around where somebody is in the illness and the people working with that person. Um I mean, in terms of freedom of information, that might give you, I don't know whether that would give you any um pointers or framework in terms of what the legalities are of that because people should be able to access the information that if something's about them. Um but there are limitations to that like especially working in mental health, there are times when we get information that would be harmful for the person to know. And so, that's kind of kept, that's like an aside, you know, that's like an exception. It might be something similar, I don't know. But again, depending on what you're sharing, if it's just stuff about somebody's life, there shouldn't be (unclear 0:10:14.0) there shouldn't be a problem with them seeing it. It's about them.	
So, if somebody had loads of information about me, I'd want to see it. [Laughter]. So, I don't know. Again, I don't know about the whole legal side of it from that point of view. Um that would be something that you could you know, iron out. But again, it would probably be on an individual basis. The details of it, I mean, there would have to be like the information sharing policy that's kind of low. If somebody wants to contact us and wants to see what I've written about them, they have the legal right to do so and I have to disclose that. It's how it's set up in terms of the framework. Is it something for the staff? Is it something for family? Who's it for? And that'll dictate what needs to be thought	

about in more detail, I think.	
<p>I: Yeah, okay. Yeah, because this is the primary design for the family to use and then there was an option to kind of add like a professional carrier to it if someone was to transition into a care home. So, then they could see that. So, it's kind of like the life story box in a way that could bring that with them, that their profile would go with them. Um yeah. But then I suppose you could do that and you know, because a bit tricky I guess if they could see it or not. Yeah. Okay. Um other than your experiences of like working with families before, how effective do you think something like this would be at kind of helping like those families talk to each other and like spot conversation, do you think that kind of thing would work like could you see it, what kind of setting would you see it in?</p>	
<p>R: I think, and I think again particularly it might be helpful for families who don't live close together you know to kind of have that, that connection, that shared connection with the family member would be really useful for families that aren't, you know, because more and more families live further apart really and rely on things like Skype and things to communicate and it might just be another form of communication around you know, I've seen granddad today and sort of talked about. Um in the same way that you might put something on messenger or something, you know, it's er, so I think it'd be positive really. But also, I just think more in terms of as you go to visit the person, it'll give you that more kind of shared experience with the family around what helps and what doesn't help and this is the kind of things I used to talk about, I don't mention that. Um which again creates conversation, brings people together. So, yeah.</p>	
<p>I: Okay. Is there anything you want to add to I don't know.</p>	
<p>R: Not really. I think more about my colleagues who work in the positive behaviour support service which is like the, it used to be called the challenging behaviour service. So, that's a service specifically that tends to go mainly into care homes when people are presenting with the behaviour that other people find challenging. So, they go on and do the whole formulation of understanding a person's views. Anyway, you're coming to the end of your master's this month as of tomorrow, isn't it?</p>	
<p>I: (Unclear 0:13:36.6). [Laughter].</p>	
<p>R: Um but you know, if you're thinking of kind of practicalities and advice about rolling something like this out, you know, beyond deadline there's somebody that you know, I can put you in touch with. It'd be helpful to have a conversation about.</p>	

<p>I: Yeah. He's publicly available in the app store so you can download it as well. So, it is kind of out there already. Um but yeah. But just trying to think of ways in which it can kind of be improved. So, it's just to kind of help a bit further. Um yeah. I think those are kind of the main issues that I've kind of had troubles with. But yeah, I mean, if there's any other criticisms you want to add to it?</p>	
<p>R: No, no, not at all. If I think of anything, if I've got any more feedback, I'll drop you a line. No, I think it's really positive. I think anything we can, it's kind of promoting that needs-lead person-centred view of things and trying to get rid of those assumptions that we all have because they create barriers and just figuring out where the person is and what's important to them and you can't go far wrong. But that's hard to do, I can say that from a, you know, I still get stuck and I'm professionally trained, you know, so it is hard, it is hard, it's really hard. And depending on what type of dementia somebody has as well, their presentation can fluctuate hugely. It's like going and thinking, "Oh well (unclear 0:15:00.0) today."</p>	
<p>So, yeah, it's hard, it's hard for people to know. Um and I think something like that almost like normalises it a little bit in things we're actually using, the kinds of things that might be helpful. I wonder whether there's any um option of having almost like if you're struggling or almost like signposting to other services for ideas, you know, people like Age UK are really helpful and they do some great information leaflets around dementia and understanding different types of dementia and the kinds of difficulties that might come with that. So, I don't know whether on the app, it'd be useful to have just signposting if you want more information or if you're still struggling to know what to say or—</p>	
<p>I: Yeah. That's what I was thinking about in the, I was talking about the articles before and you could add (unclear 0:15:51.5) information there. That could be prepopulated with little things like that or there could be a separate section or something like that as well.</p>	
<p>R: Yeah. Just signposting for um, because sometimes I was working with a family whereby the lady was caring for the mum who had a dementia but it was quite a fluctuating presentation but actually the daughter has a learning disability. Um so she struggles to understand why her mum's doing what she's doing. And actually, I went online and the Alzheimer's and Dementia Society have a fantastic leaflet for people with learning disabilities. So, it breaks it down into kind of pictures and really kind of short sentences, really digestible information that again, would be useful maybe for younger children or, and I didn't know</p>	

about that, I was just kind of thinking, "How am I going to, how am I going to work with this lady to try and help her understand what's going on. And just went on the website and there's all this stuff. So, um there's loads out there and I think most people don't know. I mean, I didn't know. So, even just like the odd signpost of if you're struggling, if you want to know more information or if you're struggling to, if it would be helpful to have somebody talk to, you know, those kind of signposts really. I think that will be useful.	
I: That could be good, yeah.	
R: Um yeah. But if I think of anything else, I can just drop you a line but I know, it's like when you're coming to final stage, you just want to write the thing up and get it done.	
I: Yeah, I know.	

[End of Recording]