



Using Emotional Touchpoints to Understand Experiences of Care

What are emotional touchpoints?

'A touchpoint is any moment where a user interacts in some way with the service' (NHS Institute Innovation and Improvement, 2009). Examples could be; arriving on the ward, talking with a nurse, waking up after surgery, mealtimes, being discharged etc. Emotional touchpoints 'are the moments where the person recalls being touched emotionally (feelings) or cognitively (deep and lasting memories)' (Scottish Health Council website). They can be 'big moments' in a patient's contact with a service or 'small acts' that have a huge impact on an individual whilst maybe not seeming significant to others.

Why are they helpful?

Evidence suggests that these subjective experiences are an effective way of exploring and understanding practice, enabling celebration and stimulating innovation and development (Bate and Robert, 2007; Dewar and Noble, 2013).

Talking to patients using emotional touchpoints is helpful for a number of reasons. They can help:

- To draw out how it feels to use the service
- Patients to become involved in developing services in a meaningful way
- Staff to hear both the positive and negative aspects of an experience

Sharing the stories collected using emotional touchpoints can help staff to:

- Learn from everyday practice
- Identify practical changes that can be made to improve the experiences of patients
- Become aware of and discuss some of the more cultural aspects of practice

They can also be used with staff, to develop a greater understanding of how it feels to be part of the service.

How do I use them?

A brief explanation of how you can use emotional touchpoints follows. Once you have read this, if you would like to help people to share experiences that are important to them using this approach, we strongly advise that you access the resources below, as they provide a detailed outline of the process, including ethical considerations, along with examples.

Touchpoints and emotion words (both positive and negative) can be used to help patients and/or staff to talk about their experiences of receiving or giving care or a service – to tell their story. The 'person listening to the story' invites the 'person telling their story' to select one or two touchpoints that are significant to them, and then to choose two or three emotion words that relate to each touchpoint. The 'story teller' is then invited to talk about the emotion words and why they felt this way. The story can be recorded by taking notes, by recording or videoing. The story should be typed up as soon after the interview as possible, so that it can be reviewed and amended as needed by the 'story teller', and their permission/consent for it to be shared should be confirmed.

Essential resources

This website provides a brief overview of the emotional touchpoint process, along with pros, cons and tips:

Scottish Health Council website. *Emotional Touchpoints*. Retrieved from: <https://tinyurl.com/y6tome7u> Last accessed 12th March 2024

Emotional Touchpoints in Action is a video. Belinda Dewar undertakes an emotional touchpoint interview:

My Home Life Scotland *Emotional Touchpoints in Action*. Retrieved from: <https://www.youtube.com/watch?v=IR7tZhatLDs> Last accessed 12th March 2024

References

- Bate, P. and Robert, G. (2007) *Bringing User Experience to Healthcare Improvement*. Oxford: Radcliffe Publishing.
- Dewar, B., Mackay, R., Smith, S., Pullin, S. and Tocher, R. (2009) Use of emotional touchpoints as a method of tapping into the experience of receiving compassionate care in a hospital setting. *Journal of Research in Nursing*. Vol. 15. No. 1. pp 29-41.
- Dewar, B. and Noble, M. (2013) Caring about caring: developing a model to implement compassionate relationship centred care in an older people care setting. *International Journal of Nursing Studies*. Vol. 5. No. 9. pp 1247-1258.