IMPROVING COMMUNICATION SYSTEMS

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Abstract

Arthritis Care is an organisation, based in the United Kingdom, whose mission is to empower people with arthritis. Communication between Arthritis Care's eight major offices and large pool of home-based staffs is an essential organisational need. For this purpose, Arthritis Care initially requested the design of a Corporation Information Database (CID), which would allow employees to transfer critical documents between offices. This group has expanded the functionality of the CID to incorporate a simpler interface and new communication features.

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Executive Summary

The success of an organisation depends on its ability to coordinate the efforts of its staff to best serve its clientele. Communication among organisation employees is essential for the execution of these goals. Information that is kept at a single location will only benefit those people with direct access to it, decreasing the productivity of other corporate elements. By sharing information in an organized and efficient manner among offices and staff, the organisation can minimize redundant work and the loss of information.

Many businesses have adapted the idea of the internet to form a localized system, called an intranet. The intranet allows communication inside businesses with proper authorization. Recently, non-profit organisations have been trying to save money, gain efficiency, and improve productivity as corporations have been doing by creating their own intranets. Intranets within these organisations, particularly Arthritis Care's Corporate Information Database (CID), allows staff to communicate effectively between offices. This communication enables the organisation to coordinate its efforts to provide service to people with arthritis.

Over the last three years, the Arthritis Care information system has been developed by three different WPI project groups. For this project, a background on the design of an information system was assembled by studying database design, human-computer interaction, and technology training. The database design research examined several different methods of implementing such a system as well as various security techniques. The study of interface design was used to make the new system user-friendly.

Finally, popular methods for technical training were examined, including electronic-based learning.

To better understand how the CID could be used to communicate, as well as how widespread the use of the CID was, three specific research methods were used: surveys, interviews, and focus groups. These methods aimed to answer two research questions. The first question was, "Which of Arthritis Care's organisational needs can be met by implementing a CID?" and the second was, "Will functionality improvements to the CID increase usability?" The first data source was a survey. This survey was sent out in two forms: electronic and paper, the latter was used at the UK Office. An email was sent out asking all employees to fill out the electronic version. Because the UK and regional offices could use the CID differently, interviews and focus groups were conducted at two of these regional offices: Central and South West England.

The results from this research were then tabulated and displayed in charts. The key data we examined from the surveys involved usage statistics, preferred training methods, and glitches reported in the CID. The main data from the interviews revealed that the CID had not met its potential as a communication tool; rather that it was being used almost exclusively as a document repository. Lastly, the focus groups showed that there is a lack of training for regional and home-based employees.

There were important trends revealed in this data. The only department using the CID regularly was the Resources Directorate, and not surprisingly they had the most documents stored on the CID. According to all three of the research methods there was a pressing need to turn the CID into a communications tool. In order to meet this need for communication, a series of discussion boards and department-specific news areas were

added to the CID. Prior and potential training methods were also examined. The most popular choice for training, according the survey, was the training manual.

Our group has arrived at several conclusions regarding department level usage of CID features. CID usage will only increase in Arthritis Care offices that make a concerted effort to post relevant data on their section of the document repository. Updating news postings and engaging in message board discussions will also result in increased usage. In order to achieve the optimal level of CID usage, it is essential that offices begin to send data immediately to their sections of the CID rather than using fax, telephone, e-mail or postal mail, which are the traditional means of data communication. Using the CID in this manner will encourage other offices to follow suit, until CID usage becomes routine throughout the organisation.

In order to maintain the CID and avoid loss of user confidence whenever minor glitches occur, Arthritis Care should train and/or hire staff whose task will be to support the CID. The CID Champion will be a person, already working for Arthritis Care, whose expertise with the CID allows them to effectively train new employees to use the system and who will be an advocate for CID usage within their office. There will be a group of CID Champions working from every office in the organisation to promote the CID. The CID Administrator will be responsible for clerical system tasks, such as adding new users, updating organisation level news, and maintaining discussion boards. The CID Administrator will also report system glitches to the CID Programmer, an outside contractor, who will use these bulletins to make sure that the CID remains functional.

1.0 Introduction

The success of an organisation depends on its ability to coordinate the efforts of its staff to best serve its clientele. Communication among organisation employees is essential for the execution of these goals. Information that is kept at a single location will only benefit those people with direct access to it, decreasing the productivity of other corporate locations. By sharing information in an organized and efficient manner among offices and staff, the organisation can minimize loss of information and redundant work.

Many businesses have adapted the idea of the internet to form a localized system, called an intranet. The intranet allows communication inside businesses with proper employee authorization. Recently, non-profit organisations have been trying to save money, gain efficiency, and improve productivity by joining the ranks of corporations and creating their own intranets. Intranets within these organisations, particularly Arthritis Care's Corporate Information Database (CID), allows staff to communicate effectively between offices. This communication enables the organisation to coordinate its efforts to provide service to people with arthritis.

The problems inherent in an intranet at the corporate level are magnified in a system implemented at a non-profit organisation because non-profit organisations can afford to spend less on information technology. Training is important because of a high employee turnover rate. In many cases there are few people with expertise in the field of information technology within the organisation. For the specific case of Arthritis Care, a non-profit organisation that works throughout the United Kingdom, information sharing and communication problems have been solved, in the past, through multiple network

and database systems. However, the design of such systems is a complex process. In this case, the concurrent use of three separate systems has produced glitches and errors, which lead to a lack of confidence in these systems within Arthritis Care's employees.

The study of database design examined the various options that are used in current corporate databases. Databases are typically run from a central location or are set up in a distributed fashion, with information in many locations. There are several methods for guaranteeing non-redundant database entry and protecting the security of the information system. Users of a database system interact with it differently. Each database has an interface, through which the user operates it. Users must be trained to use the system and an organisation conducting this training has a wide array of training methods from which to choose.

The seeds for improving communication within Arthritis Care were planted by previous WPI project groups, who have worked with this organisation for four years. These projects encompassed the development of information databases that could be installed at Arthritis Care's offices, allowing employees to send files between offices, look up information about corporate functions, and communicate through message boards. Expanding our knowledge of the organisation from that garnered by previous groups requires study of the usage capabilities and needs of each section of Arthritis Care's employees. We will benefit insight gained by previous IQP groups into database systems, training of personnel to use information technology, and enhancing the flow of data between offices. Also, a study of the different user groups within the organisation will aid us in assessing and understanding the organisation, thus helping to close the gaps in Arthritis Care's communication systems.

Our group diagnosed communication issues and a lack of information being shared within the Arthritis Care organisation. To accomplish this task we implemented research methods such as surveys and interviewed employees of Arthritis Care to find out what are the specific glitches that need to be repaired. This study compares how each office of the organisation uses the information system and whether the information technology in place is accessible to those within Arthritis. We are also working to increase the usage of the system to make it beneficial to have a CID. To do this we must focus on working on the parts of the databases that are used most. This research is important to the organisation because we can finally restore Arthritis Care's confidence in having a database system. After implementing the system, we worked to set up a new training program for the employees. We taught an employee from each department the details of the system so that they could train the remainder of their department. This redesign and restoration of confidence in the database systems will improve internal communication among Arthritis Care's offices and will then improve its contribution to society.

2.0 Background

To develop basis for a study of Arthritis Care's database systems and its users, one must recognize prior work in the fields of database design, system usage, and technology training. Further, an understanding of arthritis is required, specifically as it affects people using computers. It is also important to understand why businesses and non-profit organisations implement information and communication systems and what these groups stand to gain from these systems. Previous project groups and independent studies examined how users interact with information systems as well as the design of these systems. A basic understanding of training and the ways people learn to use new technology will be fundamental as we employ these methods at Arthritis Care.

2.1 Arthritis Care Organisational Information

2.1.1 General Arthritis Care Information

Arthritis Care is an organisation dedicated to empowering people with arthritis. It is the largest non-profit organisation concerned with arthritis in the United Kingdom. An accurate description of the organisation's goal would be: "Arthritis Care aims to give all people with arthritis the information they need to make informed decisions about how they manage their arthritis and their lives" (Arthritis Care, 2002a). Learning about Arthritis Care involved understanding its basic mission and the methods of communication used to exchange information between its offices.

2.1.2 Organisational Structure

The main office of Arthritis Care is located in London. This office is named the UK Office and all major departments operate out of this main office. The UK Office has fifty-five paid employees. The office is divided into three Directorates: Resources, Marketing & Fundraising, and Public Affairs. Prior to the CID project (Cormier, Lovisolo, Strus, 2002), all communication within the organisation was done on paper. The only department in the UK Office currently using the CID effectively is the Resources Directorate. Other departments continue to use alternative forms of communication.

Arthritis Care is spread throughout the United Kingdom with offices in Scotland, Northern Ireland, England, and Wales. Seventy thousand people are supported by Arthritis Care's programs. The company has over seven thousand volunteers along with its paid workers. Improving the functionality and user-friendliness of the current information system will affect tens of thousands of people. Many of Arthritis Care's communication problems can be explained by the relationship between the regional offices and the central office.

2.1.3 Regional Office Structure

There are seven separate regional offices, making it difficult for shared information to be kept organised, especially since many of these offices are small with only a handful of employees working at the office. Table 2.1 below displays the number of employees for each of the seven regional offices.

Table 2.1 Regional Office Employees

Office	Number of employees
Southeast England	13
Central England	13
Northern England	12
Southwest England	17
Scotland	15
Wales	12
Northern Irleand	14

Each regional office is much smaller than the main office; it would take at least three regional offices to match the size of the main office. Many of the employees are home workers, and some office workers typically work out of their homes. The regions represented by these offices are large, and employees can live up to three hours away from the main base of the region. The large size of each region makes computer-based communication between offices essential.

2.1.4 Fiscal and Governing Body of Arthritis Care

Arthritis Care has a defined structure with its governing body. The organisation has a president, chair, and treasurer, but is principally overseen by a board of trustees (Arthritis Care, 2002b, p. 2). These trustees have the responsibility to decide on the direction of Arthritis Care's programs. The trustee's primary responsibility lies in the making sound financially sound decisions (Arthritis Care, 2002b, p. 5). They are in charge of making sure expenditures fall within the applicable laws of the organisation, as well as careful documentation of all expenditures. The budget must be approved by the board of trustees before it can be put into place for the following year.

2.2 Significance of Information Systems

2.2.1 Advantages of Using an Information System

Businesses and organisations employ information systems to make tasks easier and more efficient for their employees. Information systems also save paper by reducing reliance on fax and postal services, using e-mail and document sharing techniques. Using information systems reduces the time required to perform routine tasks, allowing workers to focus on their projects.

If documents needed to be transferred from one office to another, before the implementation of an information system the worker would need to fax the documents one by one to each office. With the use of an information system, a user at any location can upload the document to other offices. Information systems also have the advantage of transferring multiple files transfers rapidly and efficiently. This is because machines are better at performing repetitive actions such as document transfers (Shneiderman, 1998, p. 84).

Furthermore, an information system increases the convenience of sharing. Instead of having large amounts of paperwork to store, and needing to search through them to find a document, millions of documents can be all stored on a few centralized servers which can be easily categorized and catalogued. Information can be accessed instantaneously by people rather than having to send a request to whomever is storing the document (Wijaya, 2003, p. 92).

2.2.2 Disadvantages and Limitations of Using an Information System

Despite the advantages information systems provide, there are disadvantages. There are situations where the application of information systems would be inappropriate

or limiting. Misuse of an information system could lead to erroneous data and lost information. The CID project group that worked for Arthritis Care in 2002 put an emphasis on designing the system to accommodate users with arthritis. They concentrated their efforts to offer users easy ways to navigate the CID with a keyboard rather than needing to use a mouse (Cromier & Lovisolo & Strus & Wilson, 2002, p.37-38). Providing alternatives for a user is necessary when in developing an information system since basic system operation can become an obstacle for system use.

A company which relies entirely on information systems faces the possibility of neglecting those who do not wish to use one. At Arthritis Care, the staff within the Information Technology department was comfortable using the CID; however, other employees must feel this way before the advantages of an information system can be seen (Frysinger & Gogos & Kent, 2003, p. 19).

2.2.3 Technical Reluctance with Information Systems

Whenever a new system is implemented at an organisation there is a chance that users will be reluctant to use it. It is human nature to stay in the comfort area of what we know. To effectively use the new system, employees need to be trained and then have to change their daily work routines. The burden for having a useable system, therefore; falls on the designers

A report by an organisation, CGI, examined how to avoid reluctance within the organisation and outlined three steps to help speed up the integration (CGI, 1999, p. 3). These steps are quality of training, availability of support, and user attitude. The system training program must cover the primary areas of the system. After initial training, it is necessary to have a support network in case the user needs to look up a feature. For that reason it is very important in the second phase of integration, to have a full-time training

program. Examples of full-time training include manuals and support staff. According to CGI, most problems during the integration stage will require no more than ten minutes to solve (1999, p.4). This primary support network will need to be available for four months, or until most of the staff have been trained. The best ways to reduce user's reluctance to use the system are demonstrated that the system is reliable and to examine the human factors in integration (1999, p.4).

There are three human factors in system integration: quality of the interface, morale, and change in work habits. Interface is listed as the first priority (CGI, 1999, p. 5). According to CGI, if an interface is tedious and difficult to navigate; the user will feel it is not worth their time to learn to use the system. Because of this, graphical clarity and intuitiveness are essential during the design of the interface. Morale is tied to the quality and reliability of the system. If the information system is unreliable, difficult to navigate, or crashes often, user's morale in a system will inevitably fall (CGI, 1999, p.5). Employees will necessarily change their work habits when first using an information system. For example, files saved on the CID are saved to a central server, rather than the worker's personal computer. Users that need access to the file will then have to retrieve it from the CID, a change that may make some users uncomfortable.

The Usernomics study supported CGI's article on overcoming user reluactance caused by poor interface design. A poor interface will negate any postive aspects of the system by discouraging its use. "How the user experiences the end product, is the key to acceptance" (Usernomics, 2003). The Usernomics shows that usability testing is most effective on system novices.

2.3 Arthritis Care Information Systems

2.3.1 Systems Background Research

The first WPI project with Arthritis Care took place in January and February 2000. The students involved were, Kristin Blitsch, Jonathan Perreault, and Eric Tripodi. The purpose of their project was to develop a recommendation for an information exchange system to be used by Arthritis Care. The project involved an assessment of Arthritis Care's organisational needs (Blitsch *et al*, 2000, p.10).

Some topics examined by this project group were organisational theory, design of appropriate information technology systems, and Arthritis Care as an organisation. Research of the organisation focused on organisational division, mission and aims statements, organisational structure, and existing communication systems. After examining Arthritis Care policies, this project group began collecting data from Arthritis Care employees. Using data, the group formulated a prioritised list of what information needed to be shared and how this sharing could be accomplished. Using the study, the project group was able to recommend that Arthritis Care incorporate an information system that would accommodate their needs and increase organisational efficiency.

To validate this recommendation, the project group interviewed 59 Arthritis Care staff members: 24 volunteers, 20 regional employees, 12 UK office managers, and 3 hotel employees (Blitsch *et al*, 2000). These interviews they provided information such as: how employees communicate with each other, how often they communicate with other regional offices, what information employees require access to, and what their opinion was on a computer based information system (Blitsch *et al*, 2000, p. 46-54).

Six focus groups were conducted by the team at the UK office, Wales and Southeast England regional offices and the hotels. Eight topics with several sub-topics

were discussed (Blitsch *et al*, 2000, p. 55-56). These topics included communication, information access, potential computer–based information systems, and training. The hotel focus group revealed that this department is a separate entity with different issues than other Arthritis Care offices. Also when the team spoke to Arthritis Care management, it was discovered that they were pleased with their current means of communication. New issues that were mentioned at focus groups and not at interviews included the web site needing to be updated, as well as volunteer and information technology awareness (Blitsch *et al*, 2000, p. 57).

This project group also distributed surveys to the focus groups. The questions asked in the survey were the same as used in the interviews. Again, the goal was to answer questions about current information exchange, better access to information, most used sources, and communication methods (Blitsch *et al*, 2000, p. 59-62).

Using this data, Blitsch, Perreault, and Tripodi focused their analysis on three areas of concern: communication, information needs, and the idea of a computer based information system. Their surveys revealed that Arthritis Care's information exchange system as well as communication system needed improvement. With an improved communication system, productivity and overall service would improve (Blitsch, *et al*, 2000, Fig. 16). Employees spend much of their day on communication within the organisation. More than half of Arthritis Care employees communicate to those within their office as well as with other regional offices, on a daily basis (Blitsch *et al* 2000 Fig. 4). This study revealed five basic methods of communication: telephone, fax, written, email, and personal contact. Of those interviewed, all used the phone and some used written letters to communicate. E-mail use was not wide spread because of limited access. The UK office and hotels communicated using personal contact. Many regional

office employees are home-based, which makes personal contact impractical (Blitsch *et al,* 2000, Fig. 5).

Arthritis Care employees were asked if their location had an impact on their ability to access information. UK office employees reported having access, but information retrieval was taking an extensive amount of time. Surprisingly, regional employees said they h ad less difficulty obtaining information they need. In addition, all of the hotel employees and most of the volunteers were always able to obtain information they required (Blitsch *et al*, 2000, Fig. 10).

All employees and volunteers surveyed also needed to retrieve directory information, staff listings with contact information, position, and location. According to the study almost half of Arthritis Care employees wanted to have better, more up-to-date information (Blitsch *et al*, 2000, Table 1). Also, a quarter of the regional employees requested increased access to directory information. The topic of directory information was discussed in five of the six focus groups conducted, and was especially important at the UK Office. The focus group showed that Arthritis Care employees needed accurate contact information. One method suggested by many employees, was to make information available in a computer based information system.

Arthritis Care employees were asked their opinion about the possibility of a computer-based information system being implemented at Arthritis Care. The focus group and interviews responded positively to this idea. The majority of employees survey thought it would improve communication at Arthritis Care and they encouraged it (Blitsch *et al,* 2000, Fig. 10 & Table 1). Despite support among employees, volunteers were not as approving, possibly because they were not as used to using computers. Because this attitude was also expressed by two of the focus groups, the project group

concluded that an information technology system could not replace current communication systems, but could supplement them (Blisch *et al,* 2000). A computer-based system would assist the information exchange for most, but not all, Arthritis Care employees. Therefore, any computer based information systems should enhance the existing methods of communication and information exchange in order to ensure that everyone an equal ability to work.

Again, during the six focus groups, employees commented that an IT system would only be supported only if adequate training were provided. Arthritis Care staff strongly expressed their concern that Arthritis Care not spend a large amount of money on a computer-based system if sufficient training were not supplied (Blitsch *et al*, 2000, Table 1). Employees valued training, but prior training methods were not effective. Previous training sessions has provided a lot of information, but did not have any reference material for after the training session. Focus group participants said that they would have liked to receive more training sessions to better learn to use the system (Blitsch *et al*, 2000).

Another concern for the Arthritis Care employees was system maintenance. According to the focus groups, that Arthritis Care would purchase the necessary technology for a new system. However, maintenance for this new technology would not be adequate because maintenance the current equipment was already neglected (Blitsch *et al*, 2000, Table 1). Maintenance of an information system not only includes the system, and the needed technology, but also the information contained within it. Employees reiterated the importance of having current information on the information system. If Arthritis Care planned to invest money on new technology, then an equal investment in the maintenance of it was needed.

Employees at Arthritis Care also requested an employee directory. The Blitsch, Perreault, and Tripodi's study showed that eighty percent of the regional employees and more than half of the UK Office and volunteers interviewed would like to have the employee directory made available online. Participants at five of the six focus groups also asked for directory information to be incorporated into any information system (Blitsch *et al*, 2000, Fig. 11 & Table 1).

The ability to search for data within the information system was also an essential need expressed by many staff members. A search function would allow people to find documents and directory information. Additionally, respondents felt that it was necessary for the system to work throughout the organisation, including access for the UK Office and all regional offices. The information gathered clearly showed the needs of the organisation; information has to be available for all employees. An information system needed to be developed that contained information for employees and helped them communicate throughout the organisation.

2.3.2 Intranet

A project group in 2001 built the foundation for the current communication system. They designed an intranet, an internal version of the Internet, a directory which would be expanded later to include news and a directory. This group also researched the best ways to implement the intranet. This information was gathered using three distinct methods: a workshop, focus groups, and surveys.

This group's first step toward implementing an intranet was to set up workshops showing what an intranet is and how it could benefit the organisation (Gwizdak *et al*, 2001, p. 41). Two workshops, with three participants in each were conducted. The foucs of these workshops was to compare the intranet to a typical website and show how the

security features kept the intranet safe from outside access. The project group used this preliminary data to aid in intranet design and to anticipate concerns and issues which might arise later.

Following the initial workshop, the group distributed a survey, and only received 21 returns of 67 total back. This survey asked for responses on comfort of computer usage and training preferences (Gwizdak *et al*, 2001, p. 43). Survey results showed a fair level of comfort with computer usage. Eighty-four of those surveyed percent said they do not have problems using a computer and two thirds understood what search functions and pull down menus were.

The second part of this study examined training. Over half of the respondents preferred training by demonstration and group discussion. Employees stated that they were hesitant to use training manuals because of past bad experiences with that method. These manuals had been poorly written and were confusing (Gwizdak *et al*, 2001, p. 44). This information made the group more cautious about the design of their training manual, specifically making sure it was user-friendly.

The focus groups were also concerned with features Arthritis Care wanted to have on the intranet. Over fifty people were interviewed about what features they would like to have on the intranet, and not surprisingly, a document repository with directories was the top response (Gwizdak *et al*, 2001, p. 48). The document repository was needed to increase inter-office communication. This meant that the organisation required a communication device that provided sharing with a neat organised interface.

Using this design, a basic intranet was set up at Arthritis Care (Gwizdak, 2001, p. 77). The intranet consisted of a document repository for each department, a directory, and an administrator area. The directory had a search feature allowing for quick data

retrieval. A training manual for the system was made available. The project group had wanted to personally train some users, but were unable to meet this objective.

This project group began programming that system that has resulted in the current CID. The data gathered by this group reinforces the findings of other studies: Arthritis Care wants to improve internal communication and ahs constructed an information system to meet this need. Implementation of this system must continue in a neat and efficient manner to ensure that Arthritis Care employees feel comfortable using it.

2.3.3 Flo

Flo was design and implemented by a WPI Project group in March and April 2003. Their primary concerns were that Arthritis Care's information be stored in an efficient manner. The Saturn database, which holds information on subscribers, financial systems, and many other areas of Arthritis Care's businesses needed to both be available to regional offices and protected from inaccurate or redundant data.

The only office that had access to the Saturn database was the central UK office. When other regions needed to access information in the Saturn database, they were required to fill out a request form and then send it to the Supporter Development department at the UK office. Supporter Development would then forward the request to the Saturn Corporation, in Maryland, USA, if they are unable to satisfy it. Inforation often was not received until up to a week after the initial request.

It was apparent to the regional offices that relying on the Saturn Database was inefficient. To remedy this problem, these offices created and maintained their own databases storing information used by their office. As the database grew in size, the

regional offices became more independent from the UK office. Over time, the redundant information became inaccurate and communication between offices was minimal.

The Flo project group based their design on the fourth WPI project with Arthritis Care, by Sicilia Wijaya. She analysed Arthritis Care's data management practices at each office and was able to look at data flow between organisational databases. Once the Flo project group arrived,, they extended and altered their project goals after interviewing key Arthritis Care communication figures such as Dave Wright, then the Information and Office Systems Manager, Elizabeth Lendering the Director of Resources, and Simon Goodwin in information technology support, representatives from hotels, and Kieran Kettleton, Director of Communications. Four goals were established for the Flo system:

- Consolidate the databases of the four regional and three national office

- Coordinate Flo with the Saturn database

- Coordinate the resulting multiple databases with the CID, creating a unified system

- Develop a user manual for the staff along with documentation for future design of Flo (Frysinger et al, 2003).

The team was not able to complete all of these goals during their project. Flo was not completely implemented and there were also problems with discrepancies in its data. Inaccurate information on Flo created a barrier for those who wanted to use the system, but were concerned with the validity of the reports created by it.

2.4 Arthritis Care System Usage

2.4.1 Security and Databases Access

In order to protect personal and sensitive information, Arthritis Care implemented several databases to store this information. Each database has a different security access level, where a user will not be able to access information if they do not have the proper permissions. The Saturn database stores a majority of Arthritis Care's subscriber's contact information. The UK Office has access to information on Saturn, but other offices need to send a request to the UK Office for reports from this system. These requests can take anywhere from days to several months to process (Wijaya, 2003, p. 92). Because the regional offices needed to gain information faster, they developed their own databases.

Separate databases, maintained by each office, have caused several problems. The largest problem with separate databases is that data will be duplicated (Wijaya, 2003, p. 90). Regional offices could update their own database and neglect to communicate these changes to the UK Office, meaning that the information would not be updated on Saturn. This would cause the Saturn database to contain out of data, inaccurate data, lowering its usability.

2.4.2 Interface

A system interface is the display through which the system communicates information with its user. Systems with well designed interfaces are more efficiently used. Similarly, a poorly designed interface can lead to an excellent system being neglected by potential users. An effective interface should be easy to learn, require little time it takes to perform basic tasks and have a low rate of error (Shneiderman, 1998, 15). Additionally, disability concerns must be considered during interface design.

The WPI project team that designed the CID included a training manual along with their report. Because some of the Arthritis Care employees and volunteers have arthritis, a poorly designed interface would lead to unnecessary movement which could be painful to use. To address this concern, their system implemented both keyboard and mouse navigation, allowing additional ways for the users to perform their tasks (Cormier, Lovisolo, Strus, & Wilson, 2003, p.36).

2.5 Database System Design and Implementation

2.5.1 Centralized Database Design

One method for managing data involves placing all required information in a centralized computer. This machine then services all requests for data from users of the system, regardless of their proximity to the main computer. This scheme is often referred to as a "data reservoir" (Bell & Grimson, 1992, p. 2), where information suppliers travel to the database and drop the materials into the tank while users of the system need to walk over to the reservoir and fish out their queries. The reservoir remains in a fixed location and users may need to navigate through several other systems to reach it.

There are both advantages and disadvantages to the central database scheme. Because the data are located in one physical space, it is a relatively simple matter for staff to maintain and add to the system (Bell & Grimson, 1992, p. 2). When machine and software updates need to occur, only the central machine will require these fixes. Should the system become unstable, experience a security breach, or become physically damaged, it requires only a single instance of maintenance or replacement.

The disadvantages of centralized database systems involve the usage requests commonly made of them. With data being stored in a single place, often a single

machine, systems quickly become bogged down with requests for reports and information made by users across all sectors of the organisation (Goodman, Suri, & Tay, 1985, p. 416). Machines have limitations on processing power, and networks have caps on the quantity and speed of data being transferred between terminals. People in different parts of the company can also corrupt data in a central store if the system has no safeguards for situations where multiple users access the same data at the same time and makes changes to this information in the database. This topic of synchronization, the process by which data are sequentially added to and retrieved from the data store, is discussed later in this section.

A first step towards a full fledged information technology solution for Arthritis Care was made in 2003, with the creation of the Corporate Information Database. This system was designed as a central database, hosted on a single server outside of Arthritis Care (Cormier, Lovisolo, Strus, & Wilson, 2003, p. 54). The WPI students responsible for the CID recognized its potential to minimize wasted time and resources, as workers were encouraged by a single location for information exchange within Arthritis Care to move away from old paper-based systems, such as fax and mail. In addition, this group noted that a centralized database system would decrease the amount of data duplication errors in the system.

2.5.2 Distributed Database Design

A distributed system differs from a centralized database in that information storage can take place across multiple machines, often across many different locations (Doorn & Rivero, 2002, p. 15). Materials might also be kept in a virtually partitioned structure on a single machine. Because the general schematic structure is similar for both

instances, and since Arthritis Care has implemented the former design, physically separate systems will be the focus of this discussion.

An organisation with offices in various locations around a country could hold data specific to each location at a local database, while company-wide documents are housed in a central database, rather than all information being collected in a single reservoir. Users at each site could still access materials at different locations, but would need to use more than one machine to provide comprehensive coverage of the organisation's data systems.

Distributed databases are used by organisations that value the ability to relieve stress caused by extensive use of their systems. The ability to spread the total data store over several machines means that the overall system will be better able to service each user's request with less performance degradation (Bell & Grimson, 1992, p. 16). Also, because data pertaining to each local office of an organisation is stored within the confines of that specific site, managers at that locale will have better control over the use, access, and currency of their information. James Larson (1985, p. 59) also points out that distributed systems protect data, for instance, if the system goes down at one local office, many others will still be able to use the database for productivity.

There are also disadvantages to distributed systems. According to Matsushita, Hikita, Yamazaki, and Yoshida (1980, p. 119), these can include the difficultly of keeping data current, the need to detect faults in user submitted updates and requests, and a loss of efficiency as a large amount of traffic is generated by users crossing from one database system to the next. It is important to note the distinction between this traffic problem, which is due to use of the corporate network and the benefit of increased efficiency in distributed databases due to faster database processing times. Finally, Doorn

and Rivero (2002, p. 15) show that there is a high risk of redundancy when data are spread over multiple machines and systems. Duplicated materials at multiple offices are wasteful and harmful to the integrity of the data store since altering a file at one source produces corruption of the stored information.

2.5.3 Synchronization

All databases risk spoiling the integrity of the information they house when they let multiple users retrieve and alter the same set of data concurrently. Often, this results in one user's change or update to the organisation's information systems to overwrite those of another user, rendering one set of changes null. When these small deformities in the overall data flow are perpetuated system-wide a company faces financial loss, personnel mismanagement, or more serious issues, depending on the importance of the corrupted data.

To combat this issue, database system designers generally employ a set of system management techniques. The most popular protocol for handling multiple connections to a central database is locking (Goodman, Suri, & Tay, 1985, p. 415). This procedure is only concerned with users gaining access to the same single piece of information concurrently. To avoid this, the system insists that, when a data request is sent to the system, the request is processed atomically, that is, data are sent to only the requesting user and are locked until released by this user (Larson, 1985, p. 60). This is a system that guarantees data integrity, but sacrifices some level of efficiency whenever multiple users need to work on data in the same table of the database.

2.5.4 Database Security

Maintaining a database that is secure from outside or unwanted intrusion is critical for any organisation that wishes to employ databases as information management solutions (Janczewski, 2000, p. 8). Security breaches create the same types of issues that poor synchronization creates, but can also lead to destruction of critical data, distribution of sensitive information and malicious pollution of information resources, especially with payroll, budget and banking systems. These problems will significantly cripple any organisation unfortunate enough to experience them, making security a top issue in database design.

Information systems often contain an entry screen, or access point, through which users gain the ability to retrieve and manipulate data stored in the system. This access point can keep people outside of the organisation from accessing the systems and also serves to detect the internal information each user has the ability to view and allows that person access to these specific data, but not others (Bhattacharyya, 1988, p. 52-53). For example, not every user should have access to the payroll system, but might require a company directory database to accomplish their working goals.

There are also issues of local laws to consider when developing database systems. Some areas insist that organisations meet strict standards of privacy and security in their data stores. In the case of Arthritis Care, English law is directly applicable. There are eight general principles for adequate information protection, set out by the UK. Information Commissioner (2002, Data Protection: Your Information Rights), which include keeping personal data accurate, secure, and for only as long as it is needed by the organisation. Data may not be transferred to countries where it would not be protected by

these principles and may not be excessive or irrelevant to the needs of the collecting organisation.

Implementation of such security solutions varies somewhat, depending on the overarching schema of the data system. According to R. K. Bhattacharyya (1988, p. 55), distributed systems must guarantee that all access points contain the same security features and share a common protocol for user access. Data should also be encrypted as they are sent between databases and to each end user. All users are required to keep data secure on their machines and encrypt any transfers they make to the distributed system (Bell & Grimson, 1992, p. 292). Central database systems require the same basic set-up of access and transfer security but do not need to worry about database to database security, as all information is contained in one location.

2.6 Human-Computer Interaction in Design

2.6.1 Human-Computer Interaction

Quality system development incorporates not only functionality requirements, but also an understanding of optimal human-computer interaction (HCI). HCI involves the development and design of computing systems that interact with human users. (Hewett *et. al,* 2004). An example of quality HCI is the Apple Macintosh computer's operating system. Idenpendent of the type of program being used, buttons and symbols remain in the same location, virtually unchanged. Its ease of use has made the Macintosh operating system widely popular. This difference etween the Macintosh and Windows operating system has been a key marketing point for the Apple Corporation.

2.6.2 System Changes to Improve HCI

When changing a system's functionality, it is important to take into account that the new system will be unfamiliar to old users. The programmer must consider the new system options and address HCI concerns with these new options. Good HCI practice will be advantageous in a number of ways. For example, the addition of a quick search option to a system that has a detailed search function lets users browse the system quicker, since thy do not have to leave the main screen to conduct a search. Saving screen space is also important in the implementation of successful web pages(Hewett *et. al,* 2004). Reducing the amount of screen space used by design features allows for more features to be readily available. However, care must be taken to not reduce feature sizes to the point where the user can no longer read them.

Simplification and removal of duplicate hyperlinks from pages saves space and avoids redundancies. This reduction allows for pages to be condensed especially, main pages where there is a second set of links with graphics attached to it. Similarly, site navigation can be made easier by implementing collapsible menus. A novice user will be able to easily navigate the site because it will be a step-by-step process rather than an overwhelming page of information (Hewett *et. al,* 2004). These design techniques ultimately make sites single pages, rather than disaggregated masses of hard to navigate menu items.

Designers must keep in mind that users who have always used features, such as the detailed search, may neither be aware of new features nor not know how to use the detailed search may neither be aware of new features nor know who to use them. Consolidating links in menus could cause confusion with users used to the old link locations. If these users know that the link at the bottom of the screen, then they may

automatically go there without looking to see if the link is located somewhere else. It is important in any design to keep in mind the intent of usability along with functionality.

2.6.3 Simple HCI Improvement

Colour schemes can also be a source of trouble. Choosing appropriate colours can improve HCI within a design. Some web pages use dark fonts on dark backgrounds, which makes information difficult to read. Others have flashing signs or objects that take the user's attention away from more important news or information on the site.

Effective design must maintain a balance between fonts and background colours and stay away from flashy objects to make the site more accessible. Fonts need to both readable and not cause eye strain. Human Factors recommends that font size be one-eighth an inch high as this corresponds to the typical graphical browser default font size (2004). Text style can also signify the importance of an item. For example, if the text is larger than everything around it and is in bold, then it will stand out, attracting the users attention.

2.7 Methods of Training

2.7.1 Previous Training Survey

The CID project (Cormier, 2002) group was the first WPI group required to train the Arthritis Care staff. This group examined research gathered prior project groups, to decide on the best training methods.

Figure 2.1 Preferred IQP Training Methods by A.C. Staff

(Cormier, 2002, p. 40)
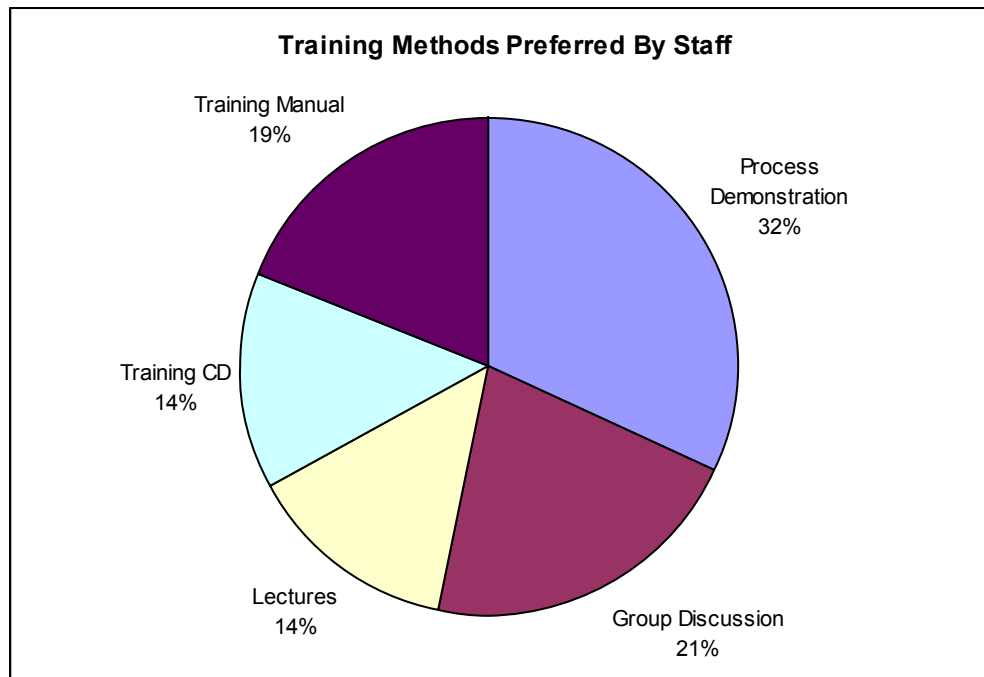
From Figure 2.1 shows that the majority of people in Arthritis Care were most comfortable with personal training. Approximately one-third felt more comfortable learning by reading. This section looks at ways to teach people to learn to use new information systems.

2.7.2 Justification

The National Research Council (2000) reminds us that learning is most effective when the people being taught feel it is helpful. "Learners of all age are more motivated when they can see the usefulness of what they are learning and when they can use that information to do something that has an impact on others" (p.61). Trainees must be shown that using the information system will benefit their organisation. Reliability and proof that the system works will help Arthritis Care and is the best way to convince people that our system is worth learning.

To maximise database usage, we must include those features which people working for Arthritis Care want most. The overall project goal is to repair the glitches that currently exist in the CID. If we fix all the glitches and have the same database system that was in place before our arrival, these changes will have a limited impact on the employees. We must also consult with the employees and explain our ideas, taking their thoughts into consideration. This will increase the likelihood that employees will use the system

2.7.3 Teaching and Training Styles

Training does not always need to be direct; there are several other methods to teach people. To find out which are the best techniques for teaching Arthritis Care employees to use the information system, we must first examine teaching styles and ways people learn. There are some training and teaching methods that will be especially useful for this purpose. The methods of teaching can be extracted into different categories: one as described by the National Research Council (NRC) and the other from Mortimer Adler.

Adler (1984, p. 17) examines teaching as three distinct styles: seminars, coaching, and didactic learning. Adler states that seminars are generally for the exchange of ideas from the leader to a group of students. They are a way to share a problem or discuss a given topic or subject. Seminars can run from ninety minutes to two hours, depending on the amount of information needing to be covered. At Arthritis Care, seminars could be used as tool to gather rather than a way to teach the system to employees.

Another method is coaching, which Adler relates to a tutorial session (1984, p. 32). A common method for coaching is to take one person through a problem or example

and explain the steps, then have them show what they learned from the process. The expectation from coaching is that the learner develops the skill set required to accomplish a given task. The method of coaching can often be bridged into technology-based learning. The term, "tutorial" is often associated with computers. Microsoft Windows™ has a tutorial associated with its basic operations. Adler's coaching method is often used during with business training, as we will see in the next section.

One of the oldest and most common learning methods, conducted in the United States, is didactic learning. This approach can be broken into two subjects: reading and lecturing (Adler, 1984, pp. 48-49). Though the topic may appear simple, there are a few key points to keep in mind about learners in this process. The teacher must tailor the learning device to the audience being taught. Teachers should not talk "above their ability to grasp what is being said…or talk down and lose their attention by being obvious, condescending, and dull." (Adler, 1984, p. 52). The didactic method is a method that can use be used to inform employees of a new system or design. Whether it is a lecture, group discussion, process demonstration, or product manual, the system's teaching process will require didactic methods.

During a training session for a new system or idea, people will ask questions. According to the didactic method, the teacher should explain the system and how it works, and then gives the learners time to ask questions. This fits Adler's definition of didactic learning. The length of training sessions varies, but most styles of lectures Adler (1984, p. 49) describes are less than two hours long. Retaining a lecture-based style will be helpful to those who learn best from hearing and seeing a topic explained and then applied by an instructor. Adler's methods are a traditional way to examine training and

teaching methods. More recently, the National Research Council presented a more modern approach for these teaching methods.

The NRC separates learning methods differently than Adler's. Instead of methods of teaching versus methods of learning, they create a more stylistic approach. The NRC (2000, p. 22) breaks the techniques into five styles: technology-enhanced, lecture-based, skills-based, inquiry-based, and individual versus group.

Adler and the NRC agree on two of these topics. Lecture-based is comparable to didactic learning, as Adler mentioned above. The NRC believes that lecture-based learning includes reading and oral lectures to enhance the learning experience. Both authors agree on coaching methods. Skills-based learning consists of individual drills and practice. The skills-based definition of the NRC is similar to Adler's coaching method (2000, p. 22). Of these models, lecturing is a common teaching style, used in many training programs. It is often used in conjunction with other methods of training. The other methods posed by the National Research Council differ from Adler's seminar approach as they delve more into group and individual learning styles.

NRC's individual versus group and inquiry-based learning styles are similar. Both of these methods involve independent learning styles, such as individual and group projects, and how to balance individual learning with group learning (2000, p. 23). Although both of these methods are useful in day-to-day learning, the project-orientated learning style is not the best way to learn about an information system. Assigning people to research the systems, learn to use it, and then give feedback would take several weeks. The less time spent on research, the more time the instructor has to teach employees about the system. The inquiry-based style has the learner seeking to gain information on their own by asking questions. This style requires motivation on the part of the learner.

Technology-based learning is a new concept that is still gaining academic acceptance (National Research Council, 2000, p. 155). System simulations increase learner's interests. Hands-on activities, video demonstrations, and presentations with visuals give the learner a more vivid understanding of a given topic. This style is called kinaesthetic or hands-on learning. All of these methods and concepts can be used to teach employees how to use a new program or information system.

There is no single solution for teaching information systems use, as Emerald (2002, p. 14) reminds us. A balance between traditional learning techniques such as lectures, readings, etc., and technology-based techniques is often the best way for people to learn. This type of learning is called blended learning. It is a, "system which focuses on optimising achievement of learning objectives by applying the *right* learning technologies to match the *right* personal learning style to transfer the *right* skills to the *right* person at the *right* time" (Emerald, 2002, p. 15). According to figure 2.1 about 30% of Arthritis Care respondents would prefer technology-based learning approach. This matches Emerald's model, which say where 25% of learning methods in businesses' apply technology.

2.7.4 Training Methods in Other Organisations

Companies value well trained employees. Current business trends balance electronic learning (e-learning) and traditional methods of training. An examination of three organisations shows a definite emphasis on combinational learning.

An organisation that has experimented with blended learning is Clerical Medical. Clerical Medical offers long term savings, investments, and pension management to individuals and companies (Emerald, 2003a, p. 21). This company originally used a two

day training program with a reference manual containing the information presented during the training sessions. Employees had trouble retaining information after the training period (p.21). The company chose to have its multimedia team create a story-board from the training session and turn in into an online training presentation. The employees then used the electronic training as preparation for seminars. This plan gave all seminar attendees common background knowledge, allowing the instructor to focus on system intricacies, rather than general knowledge (p.22). This style proved a success for the company. It had a 100% approval rating during the trial run. Now this method is applied four or five times a year at sales and management staff training sessions, and has continued to be successful.

Other companies have also had success balancing e-learning with the traditional styles of training. Nokia, one of the frontrunners in the cellular phone industry, holds training sessions and seminars at least twice a year between regional managers and lower country representatives (Emerald, 2003b, p.16). It was as expensive to have regional managers to be transported from site to site, prompting Nokia to find a cheaper alternative. Rather than have seminars presented with power point slides and a lecturer, Nokia decided to create chat rooms and bulletin boards allowing discussions on marketing strategy between managers and the lower country representatives. This technique saved both time and money as managers had to travel less and employees were trained in a day, rather than the previous two days (p.18).

The final company, Prudential, located in the United Kingdom, recently asked employees to rate the training techniques they found most useful (Emerald, 2003c, p. 4). The majority of the respondents answered wanted more e-learning incorporated into the training programs. Prudential designed a training program called Einstein and allowed

employees to access the online training programs directly through their system. The experiment was a success. Instead of needing to organise hundreds of training sessions, employees accessed the system, at their convenience over a six week period (p 5). The most popular learning modules thus were those involving generic business skills training, and financial training, related directly to Prudential. The average employee accessed the training programs two times a month, with an estimated savings of £3.5 million.

The results of these training programs show that adapting a balance between electronic learning and traditional training techniques can save organisations time and money. Cost reduction is important to an organisation, especially those in the non-profit sector. It is important to note that previous training by a project at Arthritis Care balanced e-learning and seminars.

2.7.5 Previous Project Training Methods

Previous project groups created new information systems at Arthritis Care. These teams recognised that Arthritis Care employees would not be familiar with the new systems. To solve this problem, groups used a variety of training methods to increase system usage.

In order to train Arthritis Care's employees, the previous groups researched their learning preferences. One survey listed several training methods, and the group chose four styles of training based on these results. The first and most broadly applied method was a series of lectures (Cormier, 2002, p.75). The group determined that lectures appealed to both novice and advanced users of the CID. The lectures received mixed results; some felt they were too slow, others remarked that they were intimidating. The lectures helped answer many of the user's questions and concerns about the system.

There were two especially successful training styles. Individual tutoring was one of the most effective methods, however; because of the time only regional directors were given individual training (Cormier, 2002, p. 76). Developing a training manual was a priority for this group, since it was a good complement to lectures. Many novice users felt inundated during the lectures. The manual served as a supplemental guide and is still in use.

In addition to the training manual, this group put the power point slides used in their lectures on a CD. This training CD allowed people who missed the seminar to examine a reference guide to the CID. The slides on the CD were more detailed than those used at the lectures. The CD was considered to be a permanent training tool, for use after the project group left Arthritis Care. Putting effort into effective training of the staff and leaving behind a well designed e-learning program allowed knowledge of the CID to spread beyond the UK office.

2.8 Arthritis among Employees

2.8.1 Arthritis and Technical Systems

Because the condition of arthritis can cause people with it discomfort while working with an information system, quality interface design must account for possible user disability. One of the areas where people with arthritis notice their condition is in the hands, which can make operating technology that involves buttons or keys difficult. In one case (McCoy, 2002, p.37), a sixty-year-old lady was attempting to use an ATM (Automated Teller Machine) to access her bank account. The ATM required her to perform tasks which were uncomfortable, given her arthritic condition. First, she had to insert the bank card into a narrow slot, then type her pin number in by punching several

small keys, at which point the machine would only just recognize her as a bank customer. At this point the elderly woman could no longer manage; the process of completing a bank transfer was too difficult for her. If the engineer of the ATM had considered a wider range of users, then the machine would have accommodated this woman and her condition.

Computer users are often asked to perform repeated tasks that require their hands and fingers to operate the machine. An employee's ability to use their hands is critical in their day-to-day work, but common tasks, such as typing can be painful for people with arthritis. Another task strongly associated within a computer environment, that requires the use of the hands, is navigation of the cursor. Changing a cursor position requires grasping the mouse, moving it around, and in some cases repositioning it by lifting the mouse above the mouse pad or surface (Hanson, 2001, p.14). The motion of the mouse is often jerky or irregular (Lopes, 2001, p.100). This results in problems when using the mouse buttons and rolling a scroll wheel. Clicking on an icon can be especially difficult if it is small. Simple necessary computer operation tasks cannot be accomplished if these concerns are not accounted for, which makes the machine useless to the user (Lopes, 2001, p.101).

2.8.2 Solutions and Accommodations

To help people with arthritis in their quest form a more comfortable work environment. Special provisions need to be taken into account. Access to Work is a government-funded organisation in the United Kingdom that has been established to provide people with special needs a proper work environment based on their individual requirements (www.ucl.ac.uk). Company representatives travel to the place of

employment to assess needs and cover much of the cost for the required equipment. In providing this service, Access to Work allows all people an equal opportunity to work. Access to Work will cover all expenses greater than £10.000. However, if an employee is assessed within the first 6 weeks of their employment then the employer will have to pay the costs in full. If the assessment occurs after this time, a deductible of £350 is required, with the rest of the cost covered by Access to Work. In addition to this, any person who is still employed at the same company for three years and has previously been assessed by Access to Work will be reassessed, since their needs may have changed in that time.

During a workplace assessment, Access to Work looks for ways that an employee's condition can hinder them in their work environment. After the initial assessment, Access to work incorporates equipment that can aid the employee, based on this condition and the type of work that needs to be accomplished. Typical situations at an office that might be considered include: if prolonged typing is bothersome, buying software that allows a worker to speak into the computer, which then types what they are saying and would relieve the pain in their wrist and fingers from typing. Also a user-friendly keyboard, provided with some computers, is an important part of software accessibility (2003, MSDN: Guidelines for Keyboard User Interface Design). This keyboard allows users who have certain motor skill deficiencies to use an application. These users may lack the ability to operate a mouse, and may rely on alternative technologies that include keyboard enhancement tools; on-screen keyboards, screen enlargers, and screen readers.

In order to solve any problems that come from navigating the mouse, workers can use a finger-operated touchpad. Since a touch pad requires only a finger to use, wrist and hand movement is decreased, which also reduces the amount of pain experienced when

navigating the pointer (Paciello, 2000, p. 67) and when double-clicking the mouse. which An alternative to using small mouse buttons would be to implement an oversized, manual switch. Once the icon is highlighted, it would not open or run until the oversized switched is pressed. This eliminates small mouse buttons and the double-clicking method (Lopes, 2001, p. 102).

If sitting all day is a problem for cause a person to feel pain in their legs, or knees, occasionally activity while doing some other aspect of the job for periods of time will help (Mayo Clinic, 1999, p.165). If the back or neck is the problem area, using wireless accessories, such as a keyboard and a mouse that allows the user to sit back comfortably in their chair, can ease the pain. These suggestions are typical methods that Access to Work could uses in office environments, to help the employee complete their work comfortably..

Making accessibility options active in an operating system, such as StickyKeys, FilterKeys, ToggleKeys, and MouseKeys, increases the keyboard's range of usage. These options help users run applications with the keyboard. If all system information is on one page then scrolling and the hand movements associated with it are eliminated. To prevent problems associated with clicking on small icons, the icons must be large enough to accommodate sudden movements that are a result of the user's arthritis (Lopes, 2001, p.102).

2.9 Summary

When implementing any information system it is necessary to examine at the design possibilities and how to introduce the system to the users. This system must have an interface that is user-friendly and aids users with arthritis. Designing the system to be

user-friendly will be helped by an understanding of the factors in human-computer interaction. The motivation behind the implementation of this system arises from the need to make communication as inexpensive and efficient as possible.

3.0 Methodology

To facilitate improvement of the communication systems at Arthritis Care, our group asked two research questions of their staff. First, "Which of Arthritis Care's organisational needs can be met by implementing a CID?" Expanding on this point, we addressed two related research topics. These were whether recurring problems existed within the CID and how to best train employees to use the CID. Our next research question was,, "Will functionality improvements to the CID increase usability?" This question gauged whether improvements to the communications system benefited the organisation. A sub-question of this asked which offices use the CID and what can be done to encourage other offices to use this system. The goal of this research was to gain new insight into the operation and design of the CID to guide our enhancements.

3.1 Research Questions

To accomplish our project goal, we developed a set of questions for research. These questions related to the balance of technological and social needs of Arthritis Care. Research focused on the two questions posed above. In addition to these questions, we asked more specific questions that allowed us to gather the necessary data.

The main purpose of the CID is to improve communication within Arthritis Care. We decided how the CID should structured according to the feedback we received from each department and regional office of Arthritis Care. We needed this information to improve the design of the current CID in order to fulfil the communication needs of the organisation. Related to this question, we inquired as to whether there were identifiable recurring problems with the CID and which methods of training would be preferable for

Arthritis Care staff. We examined these two problems in order to determine what sections of the CID needed the most attention. Repairing the CID was our primary concern when addressing this first part of the question. The aim of the second part was to identify the best ways to encourage CID usage through effective employee training.

The other main research question pertained to functionality and how improving this would increase usability. Our goal was to determine the relationship between functionality and usage. We realised that there was a balance between functionality and user-friendliness. We also wanted to understand why some departments used the CID more than others. Final we asked, what could be done to balance the use of the CID throughout the organisation? There are some sections of the CID that will always be used by one department more, but our overall goal was to make the CID a communication source for all of Arthritis Care.

3.2 Research Methods

To accomplish our research goals, we used three research methods: surveys, interviews, and focus groups. By using three different methods, we were able to examine and compare our results, while testing the validity of each against the other two. All three processes took place in the first four and a half weeks of our project with Arthritis Care. This allowed our group to spend the final two weeks on analysis and recommendations. The first method we implemented was the survey. The results of this survey were used to guide out other methods of research, which were interviews and focus groups.

3.2.1 Surveys

The survey was designed to be simple. It contained 18 questions, including short answer, multiple-choice, and open-ended questions. We arranged these questions so that the survey did not appear to be monotonous. The survey responses were stratified by the respondent's office. One question asked the user to fill in their department, whether it was a regional office or one of the divisions at the UK Office.

Each of our research questions was represented by several questions on our survey (Table 3.1). Our first research question was addressed by survey questions 1, 3, and 5. These parts of the survey asked respondents to describe how they understood the CID to benefit Arthritis Care and which CID features they used to accomplish their tasks. Reponses here gave us an idea of whether the CID was meeting organisational and department specific needs.

Table 3.1: Research and Survey Question Correspondence

Research and Survey Question Correspondence				
Research Question	**Survey Questions**			
A.) Which of Arthritis Care's organisational needs can be met by implementing a CID?	1.) Describe your understanding of the CID and Flo.	3.) List the three features of the CID or Flo that you use most often.	5.) Describe what you would consider to be the best features of the CID and why.	
A1.) What are the recurring problems with the CID and how can it be maintained to fix these problems, within Arthrits Care's resources?	4.) List the three features of the CID or Flo that you use least often.	6.) Describe what you would consider to be the worst features of the CID and why.	12.) Have you encountered any glitches, bugs or technical difficulties while using the CID or Flo?	13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these

				systems.
A2.) What are the best methods to train employees to use CID features that are relevant to their position?	8.) Were you trained in the CID or Flo?	9.) If you answered Yes to question 8, how did you primarily learn to use the CID or Flo?	10.) Did you think the method used to train you was the best available training method?	11.) If you answered No to question 10, what method of training would you rather have had available?
B.) Will functionality improvements to the CID increase usability?	2.) How often do you use the CID or Flo?	5.) Describe what you would consider to be the best features of the CID and why.	6.) Describe what you would consider to be the worst features of the CID and why.	16.) How would you rate your technical ability, compared to your colleagues?
B1.) Why do some departments use the CID more than others?	3.) List the three features of the CID or Flo that you use most often.	4.) List the three features of the CID or Flo that you use least often.	7.) Do colleagues in your department use the CID or Flo?	17.) How would you rate your skill with the CID or Flo, compared to your colleagues?
B2.) What can be done so all departments can use the CID effectively?	14.) List three improvements you would like to see made on the CID or Flo.			
Other	15.) General Demographic Information: Department.	18.) Do you have any physical condition that may hinder your work? If so, can you describe it?		19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work?

Our first research question contained two sub-questions. The first of these questions dealt with recurring CID problems. This topic was covered in our survey by questions 4, 6, 12, and 13. It was important to ask users which areas of the CID were not useful or disliked. Infrequent usage or dissatisfaction could be signs of CID problems at

the system programming or user interface levels. Questions 12 and 13 dealt with the similar issue of CID malfunctions. Information obtained from these questions identified program level problems in the CID and revealed the areas which needed the most improvement.

The second sub-question to our first research question was to determine, what training methods were best for Arthritis Care information systems? This question was represented on our survey questions 8, 9, 10, and 11. Questions 8 and 9 provided us with knowledge of the types of employee training Arthritis Care had conducted in the past for the CID. Questions 10 and 11 helped our group to determine what types of training would be appropriate for future CID users. Discrepancies between these two pairs of questions would indicate that new training tactics were necessary.

Our second research question focused on whether changes to the CID would increase system usage among Arthritis Care employees. Questions 2, 5, 6, and 16 helped gather the information we needed. Question 2 identified the level of system usage present at each Arthritis Care office, while questions 5 and 6 contrasted system features that either prompted workers to use the CID or caused a loss of confidence in the system. To determine if users were unable to use the CID because they lacked general computing skills or CID knowledge, question 16 addressed the respondent's overall technical skills.

Our second research question also contained two sub-questions, addressing the relationship between functional improvements and system usage. Survey questions 3, 4, 7, and 17 were used to determine which departments used the CID and why they used the system. Questions 3 and 4 contrasted CID features and usage of them. Question 7 allowed us to observe whether a survey respondent who frequently used the CID was an

anomaly or the norm in their office. Question 17 reported on the employee's knowledge of the CID and usage of it compared to their colleagues.

Our final research question asked how we could improve department level CID usage. Question14 on the survey asked the respondent which improvements they would like to see made to the CID. The impetus behind this question was to collect ideas for CID improvements. Our survey also included a brief question, 15, which we used to determine which department each respondent worked at. The purpose of this question was to obtain a data set for stratification.

In addition to our research questions, our survey included two additional sections. These provided our group with information about certain respondents. First, question 18 asked those surveyed to identify any physical disability they might have that would impede their work, specifically their interaction with the CID. We wanted to know if Arthritis Care employees were having trouble interacting with the system interface because of disability. Lastly, at the request of our liaison, Elizabeth Lendering, we asked if the respondent was a paid or volunteer employee. Ms. Lendering suggested the addition of this question as another stratification element for our data.

The survey was done in two formats: paper and electronic. The paper version was distributed only in the UK Office. Fifteen copies of the survey were placed on each floor of the office with notices to alert the employees. The electronic survey was made available on the CID and was accessible to anyone with a CID account. Four sets of organisation-wide emails were sent to request that employees answer the survey. Our goal for the electronic survey was to receive input from the regional offices, which would be difficult with the paper version. The electronic version also increased responses at the UK Office from employees who did not want to write out their answers.

The surveys were collected by the internal mail service at the UK Office, and returned to us for tallying. The electronic based survey results were automatically entered into a database. Our group entered the paper survey results into the same database. Because these results were stored electronically, they could be tabulated and analysed by a program. This program generated a report of overall trends in the responses, saving our group time when analysing data.

3.2.2 Interviews

Following our survey, we began interviewing Arthritis Care employees. The goals of these interviews varied, but chiefly examined with the different needs of the organisation. The first set of interviews involved members of the Central England office, with more interviews taking place at the South West England office. We conducted one interview at the UK office. Using these interviews we determined the expectations of each office with respect to the CID and Flo.

The first round of interviews, as mentioned above, involved visiting Arthritis Care's regional offices. Ws we contacted the information services manager of two of the regional offices. The information service managers (Arthritis Care, 2002b) are in charge of meeting the education and informational needs of Arthritis Care's customers and promoting Arthritis Care's services throughout their respective region or nation. We decided to contact this group because they are heavily involved in Arthritis Care's internal communications. We first visited the Central England Office in Nottingham. Nicki Hastie, the information service manager for the Central England Office, contacted our group to discuss her experience with Flo. She was an active participant in our research, providing comments on our updates and design. Her experience with Flo

allowed us to ask technical questions about the CID and Flo, as well as ask how her office uses the CID.

We also interviewed John McGregor, the regional operations manager for the office in Nottingham. He is currently the director of the Central England Office. Mr. McGregor was provided the original momentum for the RANDi database designn. The purpose of RANDi is to integrate data at Arthritis Care's regional offices in a single, centralized database system, similar to Flo. We developed an interview protocol (Appendix H), which we used for these interview sessions.

Next, we travelled to the South West England Office, in Exeter. This office was one of the first that showed interest in our work by sending input, via email, regarding our progress. We interviewed two people in the South West England Office, \ Jayne Dunn and

Jane Robson. Jayne Dunn is head of Information Services for the South West England Office, and Jane Robson is one of the employees who showed interest in our project. We asked similar questions at both this office and at the Central England Office, but did not inquire about Flo at the South West England Office. Rather they pertained exclusively to Exeter's knowledge of the CID and their use of the system.

The interview we conducted at the UK Office was with out liaison, Elizabeth Lendering. We chose to interview Ms Lendering because she an active member of the organisation who has exclusive knowledge of Arthritis Care's needs. In addition, Ms. Lendering identified candidates for CID Champions and shared her knowledge of Flo. Although Flo has not been the main focus of out project, we integrated it into our interviews with key members of Arthritis Care namely, Nicki Haste, John McGregor and

Elizabeth Lendering. The purpose of gathering this information is to aid the following Arthritis Care project group.

After conducting our interviews, we reviewed the responses and produced a document for each person interview that outlined their key points (Appendices I, J, K, L, and M). We then sent a copy of each set of responses to the respective interviewees for them to verify that what we had written was in fact what they had said.

3.2.3 Focus Groups

The focus groups were our final source of data. This method was used to address organisational needs and training requirements. We conducted two focus groups, one at the Central England Office in Nottingham and one at the South West England Office in Exeter. The focus group in these regional offices were similar to our interviews with Jane Robson, John McGregor, Nicki Hastie, and Jayne Dunn. One of our expectations of the focus groups was to record how regional office employees used the CID to communicate with UK Office and other regional offices. We involved everyone at each regional office in these focus groups. In Nottingham, focus group participants were John McGregor, Nicki Hastie, Margo Basri, and Debbie Harrington. Ms. Basri and Ms. Harrington are administrative employees. At the Exeter office, our focus group consisted of Jane Robson, Jayne Dunn, Sandrine Dakin, and Joy Price. Apart from inter-office communication we used the focus group to discover problems with the CID that went unnoticed in the UK Office.

3.2.4 E-mail Responses

Prior to our arrival in London, our liaison set up an e-mail feedback system for the employees of Arthritis Care. The purpose of this section was to recommend changes or

problems encountered with the CID or Flo. All of the employee's responses were arranged by Ms. Lendering and sent to our e-mail address at Arthritis Care. Elizabeth Lendering divided e-mails into three groups: database problems, reports, and "blue sky".

Each response category has a separate folder in our e-mail application. The database problem folder identified common problems encountered in normal usage of the CID. These problems often concerned simple malfunctions and small interface suggestions. Our response in the reports category suggested turning the CID into a report generating device. Also, this reports folder contained suggestions on which types of report templates and reports employees would like to have available on the CID. The final category, "blue sky", contained ideas employees would like to see incorporated into the CID, no matter how difficult or unlikely they seemed.

3.3 Conclusion

Our research methods allowed us to identify key problems, relate the CID to the organisational needs of Arthritis Care, and prioritise the system repairs based on these findings. To get a better understanding of these needs, we questioned both the UK Office and regional offices, gathering information about CID and Flo usage. Having two sets of information provided a broader view of Arthritis Care's needs, rather than just the needs of the UK Office.

4.0 Data and Analysis

The CID is intended to be a communication tool for the Arthritis Care organisation. For this reason, it was important to research Arthritis Care's organisational needs and determine how the CID could meet these needs. To accomplish this, we first collected data around two central research questions. We further analysed this information with two specific sub-questions to each of our main research questions. Analysis of these data showed us the actions necessary to improve communication within Arthritis Care, using the CID.

4.1 Organisational Needs Data

The first research question for which we collected data, asked how the CID could serve the needs of Arthritis Care. To help answer this question, two other questions were asked. First, "What are the recurring problems within the CID?" Second, "How can these problems be addressed within Arthritis Care's financial resources?" We also researched the best methods to train employees to use the new CID features. Data was obtained using four tools: e-mail responses, surveys, interviews, and focus groups. We also read a report written by our liaison and other managers regarding Arthritis Care's organisational needs, which was used for supplementary data.

4.1.1 E-mail Feedback

We divided e-mail responses into two sections: access problems and searching functions. Access problems involved users who were unable to log into the CID. The password retrieval function was not working. Users who did not have CID accounts did

not know how to obtain an account. Out of nine total e-mails we received four regarding access problems. Three of these involved employees who had forgotten their password and because of that no longer used the CID.

Of the same nine e-mails, five requested a system, within the document repository, that would allow them to search for documents or directories based on the name of a file or folder. Regional offices specifically requested this feature. Employees at these offices had a difficult time locating files they needed on the CID. Data for their local office was contained in one directory, while data from the UK Office was dispersed over several department folders.

The final two e-mails indicated a need for increased internal communication on the CID. These e-mails suggested that the CID could make better use of bulletin boards and the news section. Each person reported that they rarely used these parts of the CID because the news section was never updated and the discussion boards had been disabled.

4.1.2 Surveys

The survey was our method of gathering information on employee interaction with the CID. The survey was available both online and in paper form. In four weeks, we received thirty five responses between Arthritis Care's seven regional offices and the three directorates within the UK Office (Fig. 4.1 & 4.2). The UK Office represented 70% of the responses to our survey, divided among the three directorates and the hotels department. The seven regional offices accounted for the other 30% of the responses.

Figure 4.1 Survey Responses by Office

Survey Responses by Office

Office Name	Population	Responses
UK Office	55	28
Wales	12	0
	17	3
South East England	14	1
	16	1
Northern Ireland	14	0
	13	1
Central England	14	1

Number of People (0, 10, 20, 30, 40, 50, 60)
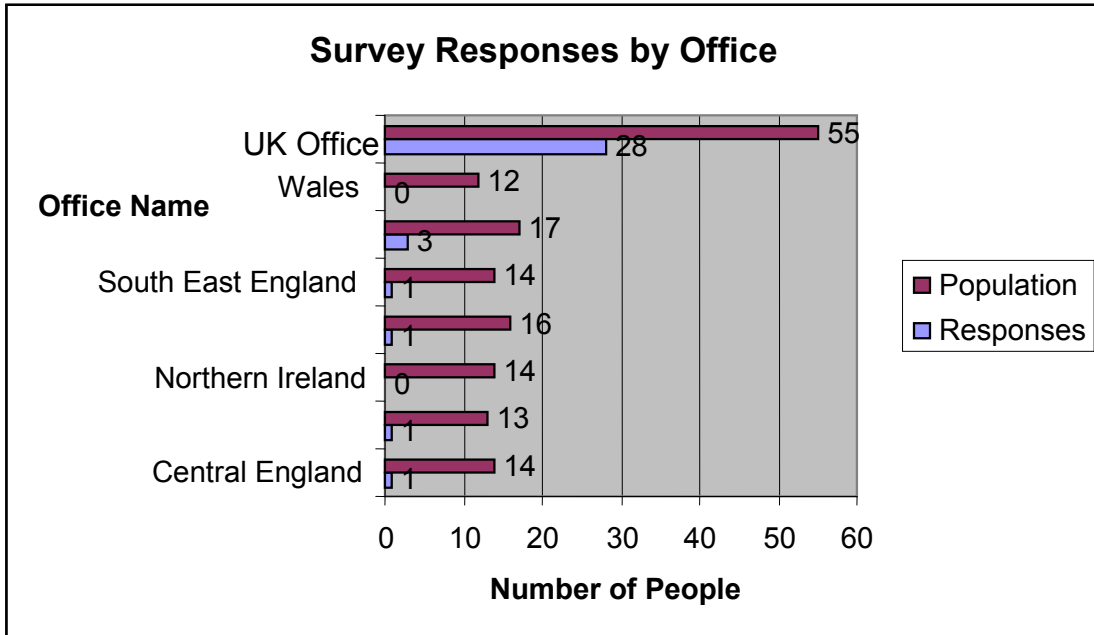
Figure 4.2 Completed Surveys by Department

Completed Surveys by Department*

- Resources 26%
- Services 20%
- Fundraising 6%
- Communications 9%
- Directorates 9%
- Other Regions 30%

*Percentages based on 35 responses
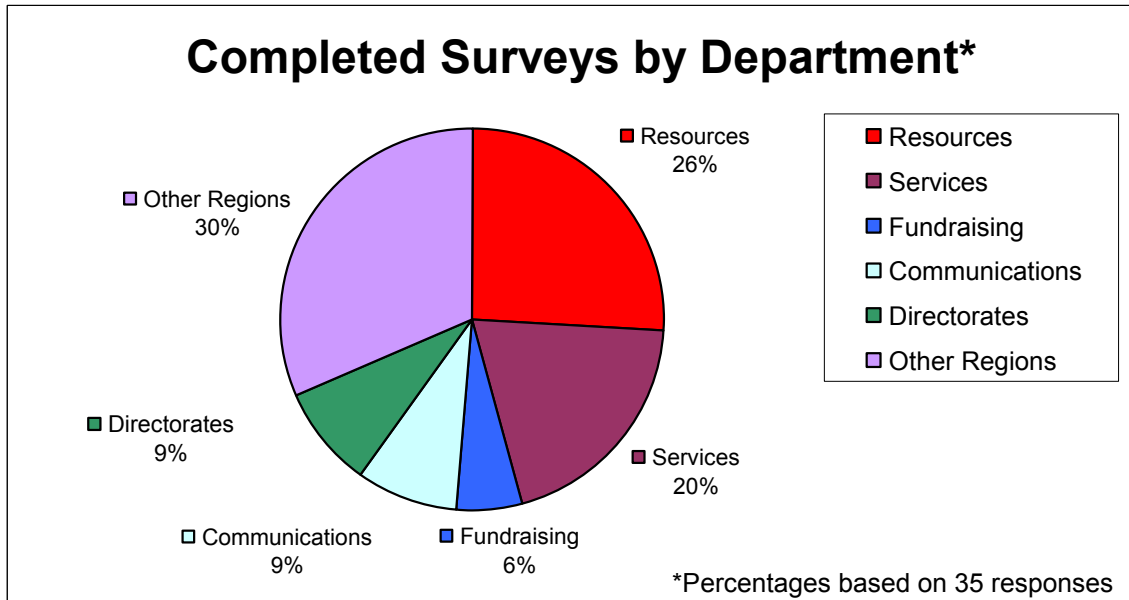
Survey results (Appendix E) concerning organisational needs were separated into two categories: CID problems and training statistics (Fig. 4.3). Of 35 returned surveys, 24

51

people reported problems with the CID, while the other 11 respondents left this field blank. Of those that did not respond, they had either not encountered any problems or were unfamiliar with the CID. The most common CID problems included information transfer. Information transfer problems included the inability to upload or download documents from the document repository and access problems, such as lost passwords or not being able to log onto the CID. The other major CID problem was system crashes.

Figure 4.3 Common CID Problems
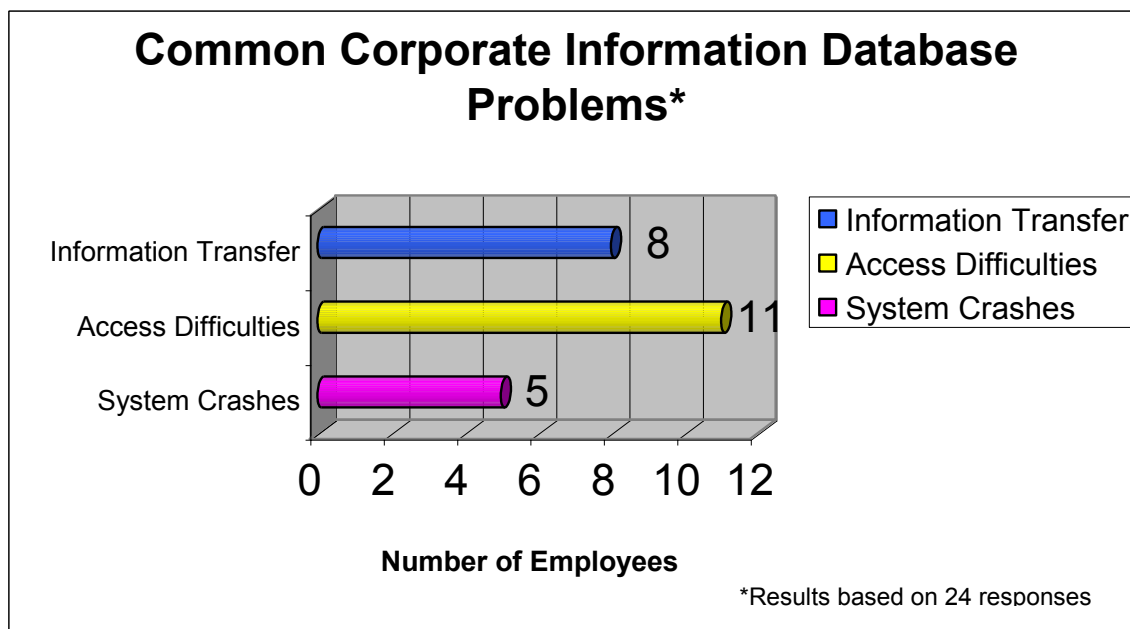
Figure 4.3 shows the number of responses received for each CID problem category. The majority of respondents had difficulty accessing the CID and a third of the users who were able to obtain CID access had problems transferring documents to, and downloading from the document repository. One comment, common to these responses was that it took several minutes or longer to post small files on the document repository. Others had trouble retrieving documents from the CID. They would be logged off of the

system if they tried to open the document in another window because of the way

Microsoft Internet Explorer stores information for secure system accesses.

Beyond CID problems, we collected data on prior CID training methods.
Questions 8 through 11 of our survey (Table 3.1) allowed us to address two points: were
the employees trained to use the CID and, if so, what type of training did they prefer?
We separated training data by department (Fig. 4.4).

Figure 4.4 Training by Department
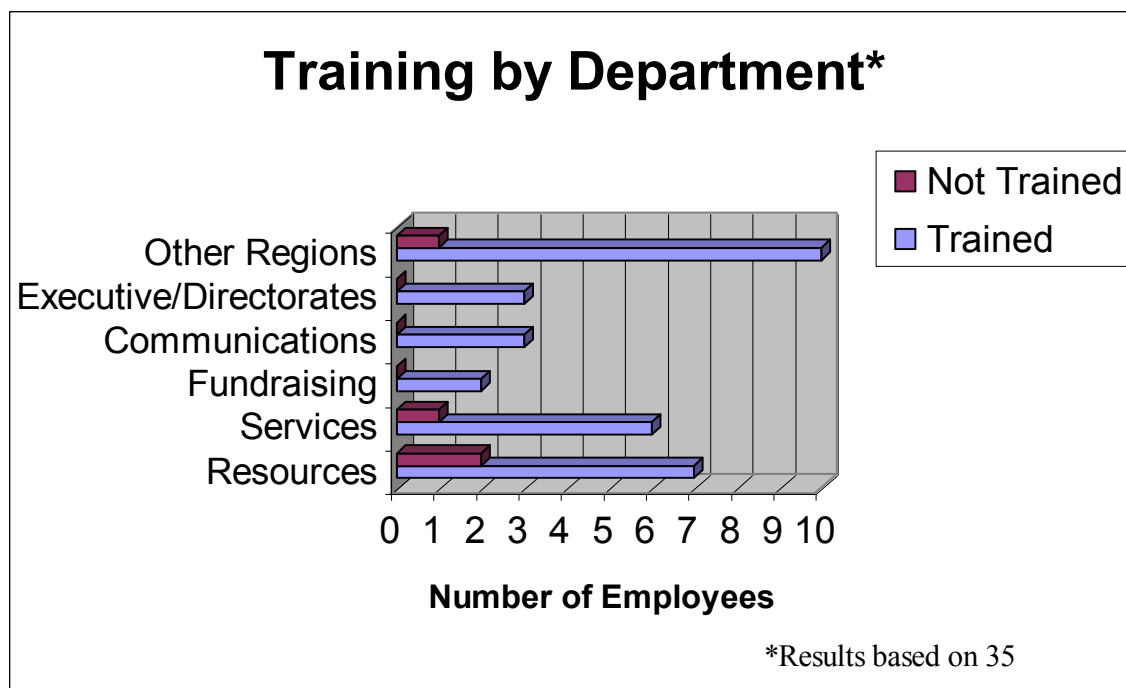
Our group discovered which training methods were used in the past from our

survey. The majority of people who responded to our survey, 89%, had been trained to

use the CID. Figure 4.5 shows that the printed training manual was the primary source of

training for 65% of the respondents. This training manual is available at all Arthritis Care

offices and is given to some employees when they begin working for the organisation.

Intended use of the training manual was for reference, but has been used as a primary

training method. Workshops, which were conducted by the project responsible for the initial CID design (Cormier *et al.,* 2002), were the second most common training method, according to 25% of the respondents.

Figure 4.5 Preferred Training Methods
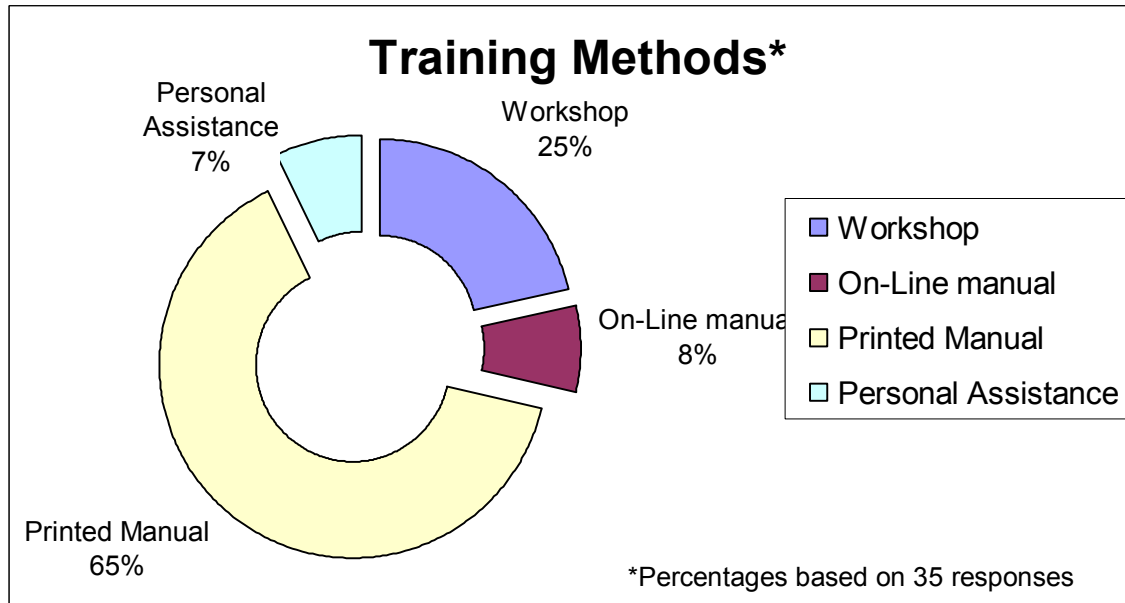
The survey also asked what types of training would be preferred by Arthritis Care employees. Nine people responded that they would have preferred a different method of training than the one they received. Of the nine respondents, eight people were trained using the training manual. Four of these respondents would have preferred personal assistance, while the other four wanted an online version of the training manual made available. The other employee was trained by personal assistance, but would have preferred the online manual. The remainder of the respondents said they were satisfied with the training they received. Half of these were trained using the printed manual and the other half had been trained with the online manual or personal assistance.

4.1.3 Interviews

Because of the differences between the operations of the UK Office and the regional offices, results from our regional office interviews gave us a new perspective on the potential of the CID. At the Central England Office, John McGregor, the Regional Operations Supervisor, and Nicki Hastie, the Information Service Manager, felt the CID would be better used if it were a communication-based system, rather than just a document repository. This communications tool would need to have news features that are easy for users to update. Those interviewed felt the addition of a discussion board where staff members could ask questions and receive information from employees in other offices within Arthritis Care, would be extremely useful. Mr. McGregor and Ms. Hastie also mentioned the need for an updated staff directory that would display employees contact information by department and region.

We also discussed CID improvements that Mr. McGregor and Ms. Hastie would like to see implemented. Their biggest concern was that a naming standard for posting documents be created. Ms. Hastie said, "It is difficult to find files on the CID because of the lack of the naming system." Many files in the document repository are named inappropriately. If a user is looking for a particular document, he or she needs to know the exact name of the document, since there is no way to search for the contents of files in the CID.

We next discussed training programs were used in the Central England Office for the CID. According to Mr. McGregor and Ms. Hastie, 75% of the office staff were currently trained to use the CID. On the other hand, home-based workers had not been trained to use the CID. There were two reasons that home-based workers were not trained. First, the previous online manual was too large to download. Secondly, they

were unable to acquire the printed manual. Mr. McGregor stated, "I would like to see the manual in online format, but in a way that people can download it, even on slow computers." He felt that an online, web-based manual would be the best way to train home-based employees.

Responses from interviews at the South West England Office were similar to those at the Central England Office. Jayne Dunn, the Information Service Manager and Jane Robson, an Administrator also felt that the CID would be more useful to their office as a communications tool than a document repository. Ms. Robson also reported trouble locating documents because of the absence of a file naming policy.

Home-based workers communication was more of a concern to the South West England Office than the Central England Office. According to Ms. Robson, although there are twelve employees at the South West England Office, there are only two or three workers at the office every day. The rest of the employees work at home and that is where communication with the office through the CID would be most beneficial. We discussed our plan to update the employee directory to Ms. Dunn and Ms. Robson and the improvements were met with approval. Ms. Dunn encouraged our group to go beyond merely updating the directory, and organise employees by office.

The core difference between the Central and South West England offices was that office workers were not trained to use the CID at the South West England Office. Only two of the four employees present at this office during our visit had heard of the training manual. Both Ms. Dunn and Ms. Robson had heard of and used the training manual. Beyond these two employees, the staff at this office had not been trained. Ms. Dunn echoed the concerns of the Central England Office by saying, "Most home-based workers

are untrained, and there are more home-based than office workers in the South West England Office." She suspected that the situation was similar at all regional offices.

4.1.4 Focus Groups

Our team held focus groups involving all the office staffs at the Central England and South West England offices. Our goal for these focus groups, whose structure is explained in Section 3.2.3 of this report, was to receive feedback about past CID problems. We also collected data on the level of CID training that a typical Arthritis Care employee received. We gathered similar responses in the focus groups as in our interviews.

The Central England office agreed with Mr. McGregor and Ms. Hastie, that the best way to use the CID was as a communication tool. This office's staff said that more information from the UK Office should be placed on the CID. Margo Basri, an administrator at the Central England Office, told us that data from the Finance Department at the UK Office needed to be posted on the CID. This would allow regional offices access to financial data without having to request a paper copy from the UK Office. Focus group participants also mentioned that the redesign of the CID as a communications tool would allow their office to request data directly from other offices.

We asked those present at our focus groups their opinions on the CID champion concept. CID champions would use their expertise with the CID to train new CID users and maintain their office's section of the CID. The Central England Office responded favourably to this idea nominated one of their employees for the position. All employees present at this focus group claimed that, while the CID Champion's responsibilities

would be an addition to that employee's work load, the benefit of having a CID trainer in the local office would be worthwhile.

The focus group at the South West England Office had similar concerns regarding their needs as a regional office compared to the needs of the UK Office. All four participants at our focus group in the South West England Office felt that the best way to improve the CID would be to improve communication between the UK Office and te regional offices. Jayne Dunn, in particular, mentioned that our planned additions of department level news and discussion boards would help to improve communication between all offices.

Focus group participants at both regional offices agreed with our interviewees that the CID should be used to connect home-based employees to their local office. According to both focus groups, Arthritis Care's regional offices have more employees who work from home than office staff. Training was important to the members of the South West England Office who were excited about the CID Champion concept.

4.1.5 SMG Organisational Needs Statement

Our liason, Elizabeth Lendering referred our group to a document produced by Arthritis Care's Senior Management Group (SMG). This memo (Appendix C) discusses necessary improvements to Arthritis Care's internal communication systems. It also discusses the lack of communication between offices and communication between management and employees. One of the SMG's proposals was increase the use of the CID to promote communication. At the time the paper was written, the CID was exclusively used as a document repository. The SMG believed that, by taking full

advantage of the CID's news features and maintaining current information, the CID could be a key communication tool for Arthritis Care.

4.2 Organisational Needs: Analysis

Our research revealed that the CID had been used only as a document repository. News items were not updated, the discussion board had been disabled, and directory information was out of date. This information confirms that Arthritis Care employees would like to see the CID used as both a document repository and inter-office communication tool.

Our interviews with Nicki Hastie and Jayne Dunn showed that department level communication through discussion boards and news postings would benefit the organisation. Respondents to the survey and interviewees asked for an improved tool for locating directory information. Arthritis Care employees were having difficulty finding directory information, since the CID only displayed a large list of all employees in the directory folder. Those surveyed would rather have a system that separates users in the directory into their respective offices. This would reduce time spent finding contact information. In addition to trouble with the staff directory, our data showed that users were having problems finding documents in the CID. Files are hard to locate in the repository because they could be named anything, even if that file name would not allude to the contents of the document. For example, there was one file in the document repository named "Document 2", which provided no information about what was contained in that file.

Users also reported that the system for uploading and downloading files from the document repository did not always work. This happened because the server on which the CID is located allows a program to run for only 30 seconds before it is terminated. If the CID is being used by many different people at once, the program will take longer to find, display, and retrieve a file, increasing the chances of program failure. If such a failure occurs the transfer of the document is halted.

A document naming standard, suggested during interviews and focus groups at both regional offices, would solve the problem of poor document names. The CID permits file names to be up to 100 characters in length, which the designers of the system felt was enough to fully describe document contents. An alternative, brought up during our interviews at the Central England Office, would be to include a description with each uploaded file. Unfortunately, because of the way files are displayed on the CID, this cannot be accomplished without a major system redesign. This is impractical because a naming standard, requiring no changes to the CID, would accomplish the same goal.

Our research regarding previous training programs indicated that nearly all CID training took place at the UK Office, while regional offices were given a paper copy of the CID manual to use for training and reference. Very few users were trained with the online manual because it took a long time to download and required CID access to obtain. Our survey results showed that the majority of users preferred a training manual, printed or online, with the remainder of those surveyed wanting personal assistance training. These findings supported our plans to develop an online manual and the need for CID Champions to offer personal assistance.

4.3 Functionality and Usability Data

Once we had discovered which CID improvements would benefit Arthritis Care most, our group wanted to determine if making these changes would increase system usage. We used our second research question, "Will functionality improvements to the CID increase usability?" to collect this information. In order for us to evaluate whether system usage would increase, we required knowledge of how the CID was being used by each office. Additionally, we needed to know what our group could do to increase usage in departments and offices that used the CID rarely. To answer these questions, we collected data using surveys, interviews, and focus groups previously mentioned.

4.3.1 Surveys

To discover which offices used the CID, survey results were tabulated by department. We classified each respondent's level of CID usage as either daily, weekly, and rarely or never. There were many employees who rarely or never used the CID in each department (Fig. 4.6). All departments had more employees who used the CID rarely than workers that used the system daily. Only the Resources department had a high level of weekly usage.

Figure 4.6 System Usage

Corporate Information Database Usage by Department
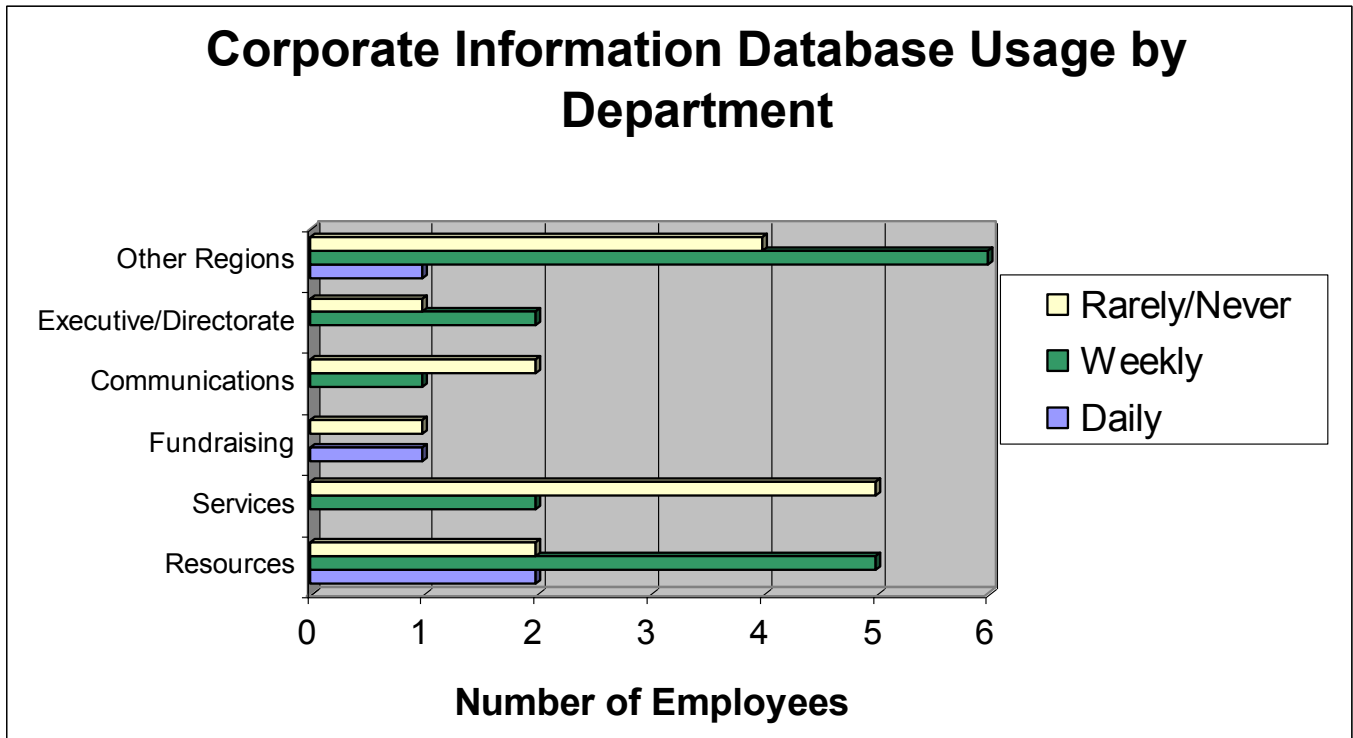
4.3.2 Interviews

The interviews conducted at the South West and Central England offices were used to confirm usage data obtained via our survey. These offices showed a contrast in usage between home-based and office-based employees. There was a distinct difference in the amount of CID usage between these two sets of employees. Office-based employees occasionally used the CID, whereas home-based staffs were either unaware of the CID or chose not to use it. Some employees at the South West England Office were required to commute long distances to work and sometimes worked from home instead. Ms. Robson told us that her daily commute was at least two hours. She would, therefore, like to use the CID to communicate with her office when she works from home and transfer documents to the regional office from her home office, before she commutes.

Ms. Robson believed the CID could make file transfers from her home to work easier, but was concerned about security. With an easy way for her to transfer files, she said she would use the CID more. Additionally, Jayne Dunn said that the South West England Office would use the CID more if it were able to increase inter-office communications

In addition to examining department level system usage, our group was interested to find out if the preliminary improvements to the CID interface simplified user interaction for Arthritis Care employees. Once the initial redesign of the CID interface was complete, we asked for comments and suggestions during the interviews at the Central England Office. Nicki Hastie told us that the new interface was an improvement in terms of user-friendliness, but needed to fit within a certain screen size (800 by 600 pixels).

During interviews at both regional offices, interviewees pointed out that the document repository was not being used to store important information that their offices needed from the UK Office. The only department identified by the South West England Office as having useful information on the CID was the Human Resources department. Jane Robson noted, "I do use CID, but only for accessing HR… documents which are comprehensively stored on it and for trying to trace phone numbers of people at other AC offices." The South West England Office specifically asked that information on arthritis collected by the Helplines department be made available on the CID. Providing this type of information on the CID would increase usage at the regional offices, according to Ms. Dunn.

All the interview responses we collected indicated that the information on the CID, particularly news items and the employee directory, was outdated. Nicki Hastie said the CID often contradicted the data each regional office had on file. These

information conflicts forced her office to use other sources of information. Mr. McGregor asked for more communication from the UK Office as he feels that, "One of the problems this organisation has is communication." To improve communication with the organisation, Ms. Hastie and Mr. McGregor recommended department-level discussion boards for the CID. According to Ms. Hastie, a discussion board system that allowed questions to be answered easily and quickly, by letting employees post any department-specific queries would cause more people to use the CID.

4.3.3 Focus Groups

During our focus groups, we asked questions to determine if functional changes to the CID would increases usage. Using these focus groups, we also gathered differring perspectives on usability and functionality. Margo Basri, of the Central England Office mentioned that CID content needed to load quickly. The Central England Office focus group pointed out that the CID would be more useful to their office if it were a full communications tool. The addition of discussion boards and department news, as described in the previous focus group section, was brought up as potential reasons for increased CID usage. The South West England Office had suggestions for what would increase CID usage in their region. Their major concern was that home-based workers in South West England were not using the CID. These employees resorted to fax or post mail to communicate with the regional office. Increasing confidence in the system among the home-based workers would then increase CID usage at this office.

The last topic discussed during our focus group was the interface of the CID. Those present also felt that a redesign of the interface was needed. Participants agreed that this process would increase system usability. They felt that it needed to be easier to

navigate as well as easy to understand. As we did for the interviews, we showed interface design and asked for comments and suggestions. Final changes had been made to the interface after our meetings at the Central England Office, but before our focus group at the South West England Office, where the only negative comment, by Jane Robson, was that the design was, "too pink."

4.4 Functionality and Usability: Analysis

Information gained from the above data shows that new features, such as department level news and discussion boards, will increase communications between the regional offices, the UK Office, and Arthritis Care's home-based employees. Increasing inter-office communication will result in increased CID usage. Analysis of this data concentrated on the functionality and usability of the CID, based on Arthritis Care's organisational and departmental needs.

It is clear, from analysis of our focus groups and interviews, that when Arthritis Care employees begin to use the CID more, other users will join them in using the CID. Our interviews indicated that the regional offices would use the CID more often if they could obtain information from the UK Office. Nicki Hastie mentioned that the Central England Office would benefit from being able to access Finance data on the CID. Jayne Dunn said that the South West England Office would make use of information from the Helplines department. If this information were made available on the CID, the regional offices would obtain the information from that source, rather than calling the UK office and asking for those reports to be mailed to their office. The biggest obstacle to CID usage, therefore, is increasing usage initially.

Arthritis Care employees will also be encouraged to use the CID if the system interface is made user-friendly. The interface needs to be able to display information adequately on a wide range of screen sizes, load quickly to avoid employee frustration, and be easy to navigate to optimize usage. Initial feedback for the newer user interface has been positive. The redesign gives the interface a more compact look, as it requires less scrolling to navigate. The other feature to attract new attention to the new CID is the discussion boards. Since home-based workers have little contact with offices outside their region, discussion boards will allow them to easily communicate with offices they were unable to easily contact previously. Since this type of communication is required of home-based employees, providing it through the CID wil. be another way to increase the use of the system.

Currently, only one-department uses the CID frequently, the Human Resources department. This office uses the CID chiefly as a document repository, but would benefit from improved inter-office communication as well. An important goal of the communication-based CID is to create a link between the UK Office, regional offices, and home-based workers, which allows more efficient communication among all offices. Increased use would then spread awareness of the policy documents the Human Resources department keeps updated on the CID.

4.5 Flo Data

Although the main focus of our project was the CID, we decided to begin researching Flo to assist the project team following ours, in March and April 2004. We first discussed Flo with our liaison, Elizabeth Lendering. Our discussion focused on what

Flo was and how it was developed. Ms. Lendering said that several staff helped with the design, especially Jo Brackenbury the head of Support Services. She is responsible for updating information on Saturn. Because of her administrative role regarding Saturn, Ms. Brackenbury was able to provide the permissions necessary for Flo to retrieve data from the Saturn database. This information is consistent with what we were able to gather from Nicki Hastie and John McGregor. Mr. McGregor went a step further to saying that, before RANDi and Flo, there was a system known as the Arthritis Care Information Database (ACID. ACID was used as a base system to design both RANDi and Flo. Ms. Hastie was instrumental in the development of Flo with a prior project team. She based the input given to that group on her knowledge of RANDi.

We then asked if they used Flo and how often. Ms. Lendering told us that she uses Flo constantly and that the system works for her. Mr McGregor never used Flo. Ms. Hastie said she used Flo when it was first designed and perhaps on one other occasion. She did not use Flo after this because it had stopped working. According to Ms. Hastie, Flo did not retrieve current information from the Saturn database. The information was unreliable, and from what she could tell, the information currently on Flo was over a year old. We next asked out interviewees about RANDi. Ms. Lendering stated that Flo incorporated some information from RANDi. According to our interviews from the Central England Office, RANDi is a stand-alone system, available only locally, at three regional offices. Both Ms Hastie and Mr McGregor said they would like to see RANDi first implemented at all regional offices, and then integrated into the UK office. After RANDi was made organisation-wide it could be combined with Flo.

We inquired further about Arthritis Care's problems with Flo. Ms Lendering told us that the data on Flo is not current and it has never been a live system. For her to get

information, she has to delete all data that is on Flo to make room for new data. Ms. Lendering also mentioned is that Flo fails to pick data up from certain cells in some databases. Again, both Ms. Hastie and Mr McGregor agreed that Flo has never worked as it was intended since it fails to consistently retrieve updated data from Saturn. Those interviewed all said that they would like to see a working Flo system. Moving away from systems store information in separate databases to a system that combines all of this data into one central location, would be ideal for the organisation.

4.6 Flo Analysis

We learned from background information and interviews that Flo is a system that was intended to collect information stored in Saturn and RANDi (Appendix M). Flo is not used in the regional offices because it was not functional after its initial implementation(Appendix I, J). In the UK office, Elizabeth Lendering has used Flo often (Appendix M). It is possible to make Flo work as intended. However, there are serious flaws in both coding and design that need to be addressed. Correcting these errors is beyond the scope of this project, but these concerns have been forwarded to the next project group

4.7 Other Data

Our group originally planned to gather data on disability concerns, with regard to the CID interface and the difference in CID usage between a paid and volunteer staffs. A question addressing each of these topics was included on the survey we conducted. The content of the question regarding disability was to find out if lack of CID usage was due

to discomfort with the CID as a result of a disability. Our liaison suggested that we stratify our data by department and type of employee: paid or volunteer.

We were unable to receive effective responses for our survey question on disability. This is probably because respondents felt uncomfortable answering this question. Our background research also showed that Access to Work (www.ucl.ac.uk) program already provided for recommendations we had planned to make in this area, so it was decided to abandon this research topic.

Similarly, our survey did not yield usable stratification group from the question on employment status. Of the 32 responses to this question, all were paid employees. The other three respondents left this field blank. While this did not provide us with a method for categorizing our survey results, it may show that volunteer employees do not use the CID, where the primary form of our survey was located, or are not concerned about the systems usage and design.

5.0 Conclusions & Recommendations

The analysis of our data led our group to several conclusions regarding how the CID can meet Arthritis Care's organisational needs. To meet these needs, we converted the CID into a tool for communication between offices, rather than the sole prior function as a document repository. While conducting our focus groups and interviews, we heard a resounding need for inter-office communication that could be met by the CID. Communication was lacking within the organisation. By making communication a central aspect of the CID, we could also promote its usage. Increased usage will help fill the current void of inter-office communication. In addition to work completed on the system, we made recommendations to retain the functionality of the CID.

5.1 Organisational Needs

Our improvements to the CID have been geared toward redesigning it as a communications tool. Appendix C refers to the need for more internal communication between Arthritis Care offices according to the SMG. The CID fulfils this need with the new communication features. A new interface was designed which complies with Arthritis Care design policies and is more user-friendly. The CID has a modern interface with a simple structure, making content on the CID easier to find. The e-mails and discussions made us aware of the employee's approval of the new interface.

5.1.1 Bulletin Board

To expand the communication potential of the CID, we added bulletin boards at the organisational and the departmental level. The new bulletin board is accessible to all

employees of Arthritis Care with a CID account. There is a general bulletin board for information pertaining to the organisation, and on a departmental level, there are specific bulletin boards, again accessible to all CID users. The department bulletin boards enable employees to post comments and questions directed to each. The objective of the bulletin boards is for departments and offices to be able to ask or answer questions in an efficient and timely manner.

5.1.2 News Board

The news section of the CID contains general and department specific news. The general news section is available only for administrators to post items, but all employees can view them. News administration responsibilities were not changed by this project. News administrators are all management-level employees. Allowing just administrators permission to post organisation-level news will prevent department-level news from cluttering the main page of the CID.. In addition to the general news board, each region and department has a news area. News can only be posted in these sections by members of that office. All employees can view news posted in any department independent of their location.

5.1.3 Updated Employee Directory

Arthritis Care's recent restructuring required an update of the employee directory. The original design for the directory was static. The directory update prevents the system from breaking in the case of future office restructuring. The directory is no longer one large list; it is now organized by department. The system also lets employees edit their own personal information. The new employee directory will allow employees to identify

specific contacts within each office and department by simply browsing to that office's section of the CID. To simplify locating employee information, there is a personnel search feature on the main CID menu.

5.2 Training

To accommodate the new design of the CID, we implemented a two-phase training program. We first identified CID champions from each department and level of the organisation. Champion candidates had experience with the CID and were computer literate. Champions at the UK office were personally trained by a member of our group. The CID champion's responsibility is to train each member of their respective office or department to use the CID and promote CID usage. Our liaison believes that CID champions will make CID training easier for new employees.

A manual has been the only source of training since the last project with the CID, in 2003. CID champions will complement the training manual. A manual is still available for reference and to complement other sources of training. CID champions will be capable of training each employee, a task that would not have been possible for our group. Champions can use a training presentation, developed by our group to make a lecture on the CID or supply the one-on-one help to a new employee. The training presentation is available on the CID champion section of the CID. The champions identified and trained currently are Rosie Brunt of Publications, Kelly Prowse of Communications, Gabriel Mejia of Facilities, Michiel Lenstra of Campaigns, Margo Basri of Central Enland, and Jane Robson of South West England.

5.3 Functionality and Usage

Functionality and interface changes to the CID are good first steps to encourage system usage. However, usage will only increase employees begin to actively use the CID. Ultimately to increase usage, the mind set of Arthritis Care employees has to change. It has been negative toward the CID thus far, and that has lead to minimal usage. Many have been reluctant to use the system, preferring more familiar methods of communication. All employees must have confidence in its ability to provide quality communication. Our interviews showed that employees were hesitant to use the CID because of the lack of information stored in the document repository. Because of minimal CID usage, the information currently on the system is not reliable.

With the added communication options, each department now has more practical uses for the CID. Presently, Human Resources is the only department to use the CID frequently. They use it on a daily basis, keeping documents and policies posted in the document repository. Each regional office visited wants other departments in the UK Office to follow this example. The more features of the CID are used by employees, the more useful they will become.

5.4 Recommendations

Arthritis Care, like any organisation, occasionally changes its internal structure. These changes require the organisation to adapt, including its information systems. We have made the CID as dynamic as possible, but if there are any organisational changes in the future, Arthritis Care will need a person in an administrative role to facilitate the restructuring (appendix F.2). We recommend someone within the organisation who is

expected to remain at the organisation and has good technical skills. A few examples of the responsibilities the employee will have are being able to add or subtract users from CID, regulate general news items, and remove obsolete information.

Some of these organisational changes will be beyond the administrator's abilities and the code for the CID will also need to be maintained. It will be necessary to have an employee who is able to repair the code or resolve to any technical issues. This person may also have to add code to the existing system, or redesign certain sections of the system. For this position we recommend an outside contractor, as there does not appear to be a person with in the organisation who can fill this position. To guide Arthritis Care in hiring the appropriate person for this position, a job description has been produced which describes the skills required (Appendix F.3).

5.5 Summary

The redesigned Corporate Information Database has the potential to improve electronic communication within Arthritis Care. An effort has been made to eliminate system bugs and a training system has been outlined with an online manual and presentation. We recommend that Arthritis Care use the CID vigorously as a solution for inter-office communication.

6.0 References

Adler, M. (1984). <u>The Paideia Program</u>. New York: Macmillan.

Arthritis Care. (2002, Dec.) Arthritis Annual Review 2002. Arthritis Care, 2. Retrieved
  November 18, 2003, from the World Wide Web:
  http://www.arthritiscare.org.uk/downloads/pdfs/AREV2002_ebook-small.pdf.

Arthritis Care. (2002, Jan.). Information Services Manager Job Description. Arthritis
  Care, UK Office.

Bell, D., & Grimson, J. (1992). <u>Distributed Database Systems.</u> Wokingham: Addison-
  Wesley.

Blitsch, K., Perreault, J., & Tripodi, E. (2000). "Arthritis Care Information Assessment."
  Unpublished IQP report, advised by Professor Holly Ault. Worcester Polytechnic
  Institute.

CGI. (1999). "CGI Impact of RDMIS on Organisations." CGI. Retrieved February 19,
  2003, from the World Wide Web:
  http://www.cgi.com/cgi/pdf/cgi_whpr_14_impact_rdims_e.pdf

Comier, R., Lovisolo, J., Strus, C., & Wilson, B. (2002). "Arthritis Care Corporate
  Information Database." Unpublished IQP report, advised by Professors James
  Demetry , Gregory Theyel, & Stephen Matson. Worcester Polytechnic Institute.

Bhattacharyya, R. K. (1988). Security of network element databases against increasing

    threats of intrusion via operations interfaces. <u>Proceedings of the IEEE 1988</u>

    <u>International Carnahan Conference,</u> 51-64.

Doorn, J. H., & Rivero, L. (2002). <u>Database Integrity: Challenges & Solutions.</u> Hershey:

    Idea Group.

Duane, A., Finnegan, P. (2000). Managing Intranet Technology in an Organisational

    Context: Toward a "Stages of Growth" Model for Balancing Empowerment and

    Control. <u>Proceedings of the twenty first international conference on Information</u>

    <u>systems,</u> 242-258.

Frysinger, M., Gogos, S., & Kent, J. (2003). "Arthritis Care Foundation Flo System."

    Unpublished IQP report, advised by Professors James Demetry & Donald Brown.

    Worcester Polytechnic Institute.

Goodman, N., Suri, R., & Tay, Y. C. (1985). Locking performance in centralized

    databases. <u>ACM Transactions on database systems, 10</u>(4), 415-462.

Hanson, Vicki (2001). Web Access for Elderly Citizens. <u>Workshop on Universal</u>

    <u>Accessibility of Ubiquitous Computing,</u> 14-18.

Hewett, et al. Curriculum Human-Computer Interaction. (1996.). ACM, 2. Retrieved

January 22, 2003, from the World Wide Web:

http://www.sigchi.org

Honey, P., Mumford, A. (1986). <u>The Manual of Learning Styles.</u> Maidenhead, UK:

McGraw-Hill.

Human Factors International. (2004). "Font Size".   Retrieved January 22, 2004,

From the World Wide Web:

http://www.humanfactors.com/downloads/fontsize.asp

Janczewski, L. (2000). <u>Internet & Intranet Security Management: Risks and Solutions.</u>

Hershey: Idea Group.

Larson, J. A. (1985). A flexible reference architecture for distributed database

management. <u>Proceedings of the 1985 ACM thirteenth annual conference on</u>

<u>Computer Science,</u> 58-69.

Lopes, Joao (2001). Designing user interfaces for severely handicapped persons.

<u>Workshop on Universal Accessibility of Ubiquitous Computing</u>, 100-106.

Matsushita, Y., Hikita, S., Yamazaki, H., & Yoshida, I. (1980). Cost evaluation of

directory management schemes for distributed database systems. <u>Proceedings of</u>

<u>the 1980 ACM SIGMOD international conference on Management of data,</u> 117-

124.

Mayo Clinic. (1999). <u>Mayo Clinic On Arthritis</u>. New York: Kennsington.

McCoy, T. (2002). The Politics of Usability: The Importance of Users in Product

    Design. <u>In STC Usability SIG Newsletter, 8</u>(4), 35-54.

Microsoft Developer Network. (2003). Guidelines for Keyboard User Interface Design.

    Retrieved December, 16, 2003, From the World Wide Web:

    http://msdn.microsoft.com/library/?url=/library/en-

    us/dnacc/html/ATG_KeyboardShortcuts.asp?frame=true

National Research Council. (2000). <u>How People Learn</u>. Washington: National Academy

    Press.

Paciello, M. G. (2000). <u>Web Accessibility for People with Disabilities.</u> Lawrence, KS:

    CMP Books.

Shneiderman, B. (1998). <u>Designing the User Interface: Strategies for Effective Human-</u>

    <u>Computer Interaction.</u> Reading, MA: Addison-Wesley.

Usernomics. (2003). "User Interface Design & Usability Testing". Usernomics. Retrieved

    February 19, 2004, from the World Wide Web:

    http://www.usernomics.com/user-interface-design.html.

U.K. Information Commissioner. (2002). Information Commissioner. <u>Responsible for Data Protection & Freedom of Information.</u> Retrieved November 19, 2003, from the World Wide Web: http://www.dataprotection.gov.uk

Wijaya, S. (2003). "Analysing Arthritis Care's Data Management Practices." Unpublished IQP Report, advised by Professor Robert Krueger. Worcester Polytechnic Institute.

Appendix A: What is an IQP?

The interactive qualifying project (IQP) is one of the most important parts of the WPI project-orientated plan. The IQP unites the concepts of social science with technology. Much of the WPI plan has students focus on the science and math behind their field of study, but the IQP incorporates a broader perspective. Most IQP groups are made up of students of different majors and academic backgrounds. Projects often have little to do with a students actual major, and are typically tied into open-ended interdisciplinary problems. This allows the group to research an extensive process to learn about the unfamiliar concepts they will deal with.

There are several styles though generally IQP's examine how a new technology will affect a societal issue. Our project for Arthritis Care qualified as an IQP because we integrated new technology for the delivery of social services, namely communication. Much of the work we did for Arthritis Care involved technical computer programming, in order to redesign the CID. There was extensive database programming and web site design involved with this project. The most important part of the project, however; was finding what we needed to add to the system, and how the CID could best meet Arthritis Care's organisational needs.

A large part of our project focussed on social research. To successfully implement a system for Arthritis Care, we had to understand what we could do to make the system more appealing to the user. We had to examine how to make systems user-friendly and comfortable for people with arthritis to use. Our group also studied various styles of learning and researched the success rates of these styles from previous IQP projects at Arthritis Care, in order to find the best method to train people to use the CID.

The combination of technology and its impact on society is what makes a project an IQP. Our project fit well within the guidelines stated above for an IQP. Although, on the outside ours may have seemed to be a simple technical problem, we accomplished far more than just a programming overhaul. Our project used these programming techniques to develop a modern communication system that will integrate the offices of Arthritis Care.

Appendix B: CID Training Manual

B.1: Introduction

Welcome to the Arthritis Care Corporate Information Database (CID). This training manual has been developed for those not familiar with the Internet, or who have never used an intranet before. This manual can also be used as a quick reference for those who are more experienced. All of the tools and resources found in the CID are covered here. It will answer any questions of how to use it, or how to update it. Screenshots of the actual Arthritis Care CID, the intranet, will make learning its use much easier.

This redesigned CID is the result of a 7-week project executed by a four-person team from Worcester Polytechnic Institute. Careful consideration has gone into every aspect of its design and functionality. Before actually developing the final product, we spent time working with employees of Arthritis Care to see what would be most useful in it. We hope that you find this a useful tool and helpful in your work environment.

Regards,
Tim, John, Ian, and George
The WPI Consultants

B.2: Intranets

What is the difference between an intranet and the Internet? Well, it all starts with connecting computers. Two computers can be connected, and information can be shared between them. This connection is called a network. As more and more computers are added, a bigger and bigger network develops. Eventually, so many computers were networked that the "World Wide Web" emerged, and we have the Internet. Today, the Internet connects millions of computers, and is an incredible resource for information, communication, and entertainment. It is also open to the public. An intranet works in the same way, however on a much smaller scale. An intranet is meant to connect the computers of an organisation, such as Arthritis Care, and restrict access to only specified people. An intranet for Arthritis Care is just like its own little Internet.

This intranet is meant to help all the members of the Arthritis Care communicate more efficiently with each other. To connect to the Arthritis Care CID, you need only to be connected to the Internet. This means you can access it from anywhere, even home. The document repository will be a centralised location to post, store, and transmit documents. There is a bulletin board to post messages to communicate to the entire staff. A main news section will keep everyone up to date on important happenings. Also, forms and official documents can be stored here, giving you access to these whenever you need them from anywhere you can connect to the Internet.

B.3: Navigating the CID

B.3.1 - Getting to the Site

The easiest way to get to the Arthritis Care CID is to use a web-browser. The Arthritis Care CID supports the use of Internet Explorer to navigate through the web pages. The first step to accessing the CID is:
1. Connect to the Internet.
Connect to the Internet in the same way you would check your e-mail or go online. Once your computer is connected to the Internet:
2. Open up Internet Explorer
If you are running any Windows operating system, Internet Explorer is already installed. You should see an icon on your desktop that looks like thi:

You might also find the Internet Explorer icon in the Quick Launch toolbar at the bottom left side of your screen. It should look like this:
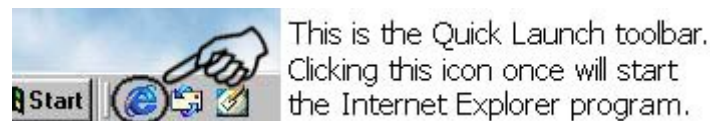
The final option is to use the start menu. To do this, click on Start Menu > Programs > Internet Explorer. It should look like this:
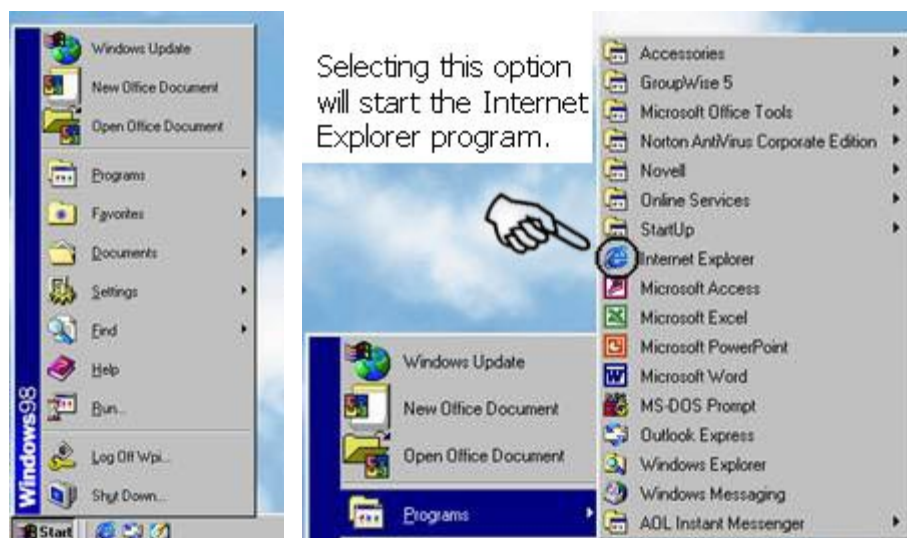
When Internet Explorer opens, you should see a toolbar at the top that looks like this:

Internet Explorer toolbar

3. The next step to getting to the Arthritis Care CID is to go to: **www.cid.ac**
To do this, first move the mouse pointer over the default text in the address bar and left-click. It will highlight the text in blue, and will look like this:

Before and after the address bar is being highlighted

Once the text is highlighted, type www.cid.ac. It should look like this:
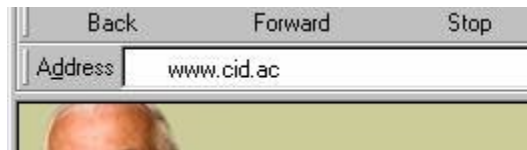
Press enter and your web browser will now point to the main login page of the CID.

Congratulations! You have successfully navigated to the main login page of the CID. You can navigate to any page on the Internet in the exact same way. You just need to know the address.

CID Login Page

B.3.2 - Homepage Designation

This section will detail how to set up your browser so that every time you open Internet Explorer, it will automatically point to the main login page. This is a convenience, not a necessity. If you do not want your browser to open the main login page whenever you open Internet Explorer, skip this section.

The first step you need to do is:
1. Open Internet Explorer
2. Click on the Tools menu in the menu bar
The File Bar is right above the Navigation Bar. Once you click on the Tools menu, it should look like this:
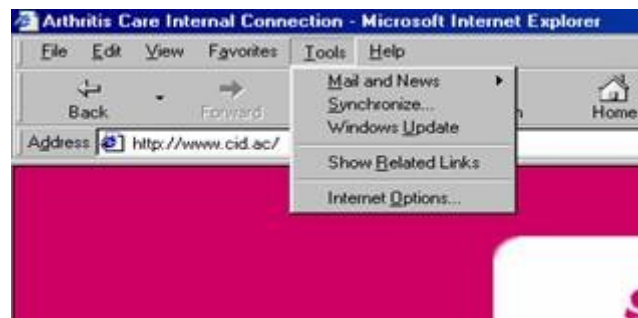
Once the drop-down menu shows, click on the "Internet Options" option, pointed out in Figure 3.11. Clicking on this will bring up this window:

When you open this window, the Address box should already be highlighted. If it is not, double-click over the address box and the text will be highlighted. Then:
3. Enter: http://www.cid.ac.
The Address box should look like this:

Now, whenever you open your browser, the Main Login Page will load automatically. To change this at anytime, go back to the Tools menu in the File toolbar and type a new web address in the address box.

B.4: Arthritis Care CID

B.4.1 - Logging In

Congratulations! You now know the basics about surfing the web. The information presented in the last section does not just apply to the Arthritis Care CID, but to any site on the web. Now that you know the basics of getting around the web, you will learn a lot more on your own.

The first step for accessing the Arthritis Care CID is logging in. Go to www.cid.ac, just as in Chapter 3. Once there, click on the login button / icon:
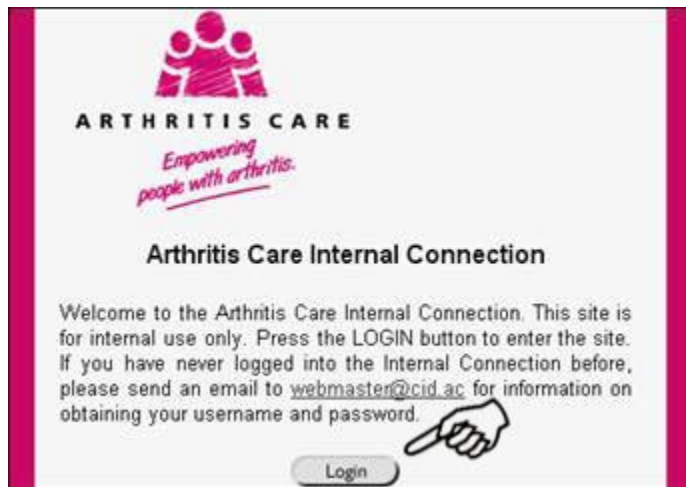
Once you click on this icon, the password screen will pop up:

Password Screen

Type your user name and password in the appropriate slots and press "OK". If you do not know your username and password, want to change your password, or forgot your password, refer to Appendix A to learn how to deal with these situations. If you accidentally press cancel and get an error message, just go back to www.cid.ac.

Once you have entered your username and password, you will be brought to the main CID page.

B.4.2 - CID Main Page

As you can see, the main page is divided up into a number of different sections. They are:

A: Top Navigation Bar - Most features of the CID can be accessed from these links

B: Organisational news *(Section 6 has more details on the News feature)*

C: Recently added discussion board topics *(Section 9 has more details on the Discussion Board feature)*

D: Side Navigation Bar - Accesses department / region's individual pages *(Section 5 has more details on these individual pages)*

B.5: Department & Region Sections

Department / Region pages is very similar to the main page, however, the news item (B), and discussion board topics (C) will be specific to this department / region. You can also access the document repository, directory, and discussion board of this department / region from the links (A).

B.6: News Feature

B.6.1 - Introduction to the News Feature

This is the Arthritis Care CID news system. Urgent news will be highlighted in red, and regular news will be highlighted in blue.
A: The titles of the news story
B: When highlighting a news article, the box color will fill up, click to view the entire news story
C: Date when the news story was posted
D: See previously posted news
E: Administrative options, only news administrators of such section will see this option *(Sections 6.2 to 6.4)*

Viewing a news story:
If you clicked on a news story, you'll be brought to this screen:

NEW FEATURE: Department Direc

In addition to the new news features, decribed in the story below this one, w
any department, directorate, nation or region from the right-hand navigation
link to the Directory. Clicking this link will show staff belonging to that departr
nation or region.

A

We are currently updating directory information. Please be patient if your info
show up in this new feature, or is inaccurate.

Thank you,

C

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No related link

A: The title of the current news story
B: The entire news story in detail
C: Related links, some news will include links that you may click on for more
information

B.6.2 - Adding a News Story

To add a news story, you must be a news administrator or belong to the department
/ region you're trying to add a news item to. You will see this if you have the correct
permissions:

26/01/2004

us News   Admin: Add/Edit News
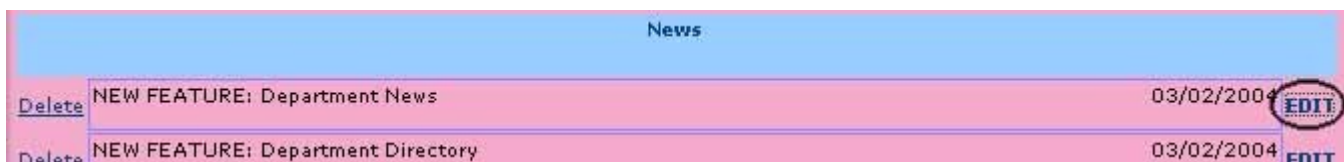
Admin options

A: Enter the news story title here
B: This box will contain the entire news story
C: If you have a link to include, you can include it here, this is optional
D: Urgent news items do not expire and will always remain on the news pages until
removed or edited
E: When all the information are entered, hit the submit button, and the news article will
be added

B.6.3 - Modifying a News Story

If you scroll down from the news admin options, you'll see this:

News admin options

After clicking on the "Edit" link, you'll be brought to a screen very similar to adding a news story

B.6.4 - Removing a News Story

If you scroll down from the news admin options, you'll see this:

News admin options

To delete a news story, click on "Delete" next to the story title and confirm your deletion. Please note that deleted news stories are un-recoverable.

B.7: Document Repository Feature

B.7.1 - Introduction to the Document Repository Feature

The document repository provides all users of the Arthritis Care CID a place to share and transfer files. Users are given permission based on their department and region. In each directory, there are private folders that are only viewable by users with correct permissions. Any user logged in can view the contents of the public directory in any section.

You will be given access to your regional directory's private directory and your department's private directory when an administrator sets up your information on the system. If you are unsure which private directories you have access to, you can look up that information as described in Appendix A.

To get to the document repository, first, select a department / region on the right hand navigation bar:

Selecting a department / region

You'll be brought to the page for the department / region that you've selected. Here, click on the Document Repository link to get to the document repository.

Link to document repository

This is how the document repository looks like:

Contents of: directorate/resources/finance

Action: File and Directory Listing.

↰ Up one level

📁 Branches

📁 private

📁 Signatories

❓ Dec02-ManAcc.pdf

🖼 FinTeamJune02.jpg

❓ salary daily rates inc lwa.pdf

❓ salary rates exc lwa.pdf

Free sp

Delete

Delete

Rename Delete

Rename Delete

Rename Delete

Rename Delete

A

B

C

2

2

2

2

26

26

26

Create a new directory: **Upload a File:**

The Document Repository

A: The current path in the document repository
B: Folders contained within this folder
C: Files contained within this folder
D: Administrative options to rename or delete files

B.7.2 - Files

B.7.2.1 - Viewing / Downloading a file

To view a file, simply click on the file name. If you wish to download it onto your
hard disk, right click on the name, and go to "Save Target As" and specify where you
want it saved:
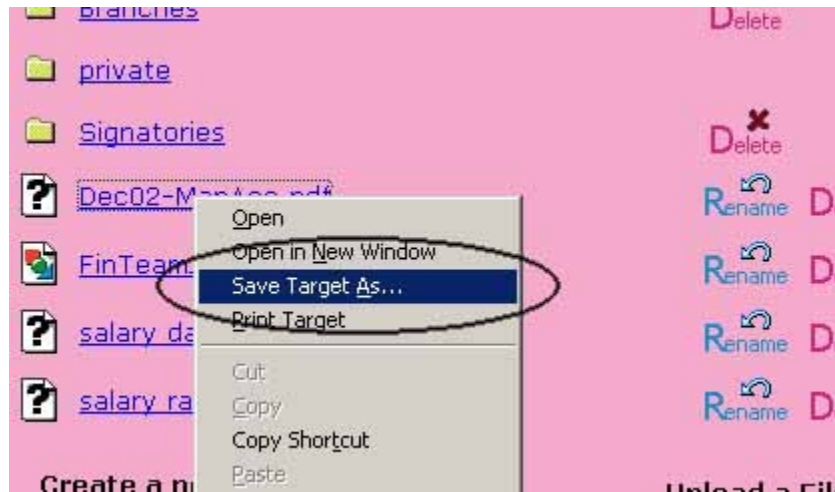
Downloading a file

B.7.2.2 : Uploading a File

To upload a file, first, browse to the directory in which you would like to upload to first, then, locate this section on the lower right hand corner of your screen:

File upload

Click on the "Browse" button and locate the file you wish to upload:
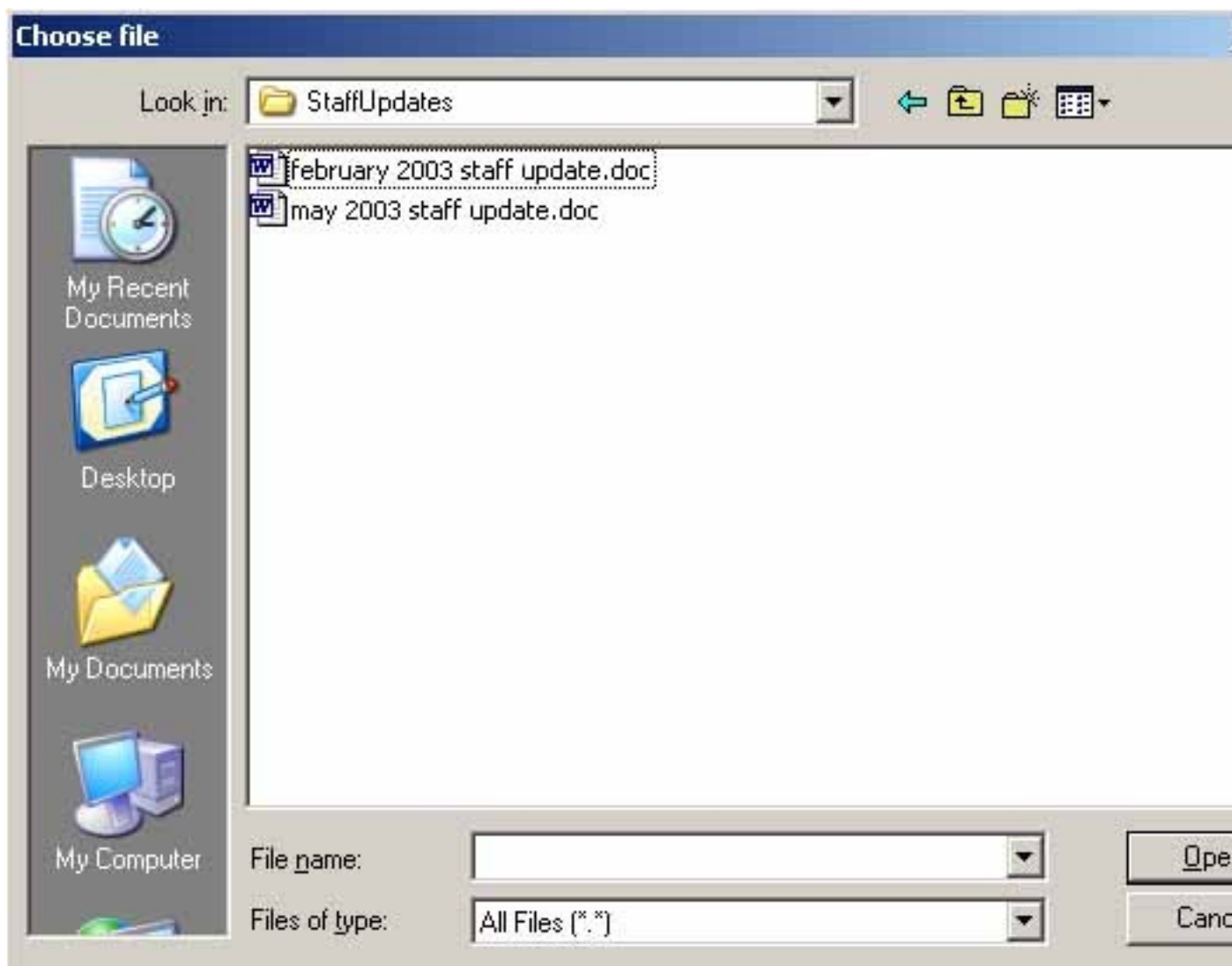
Browse for file to upload

Once the file is selected, press the upload button to upload the file.
Note: due to the limits of the CID, some of the larger files may fail to upload if you are on a slow connection. Each department and regional section has a private folder. What is it for? Anyone with access to the Arthritis Care CID can see the contents of any of the public directories. Only people who are given access to the private directories can see the contents. You are automatically given access to the private directory of the region you work for and the department you work in. If you try to access a private directory you do not have access to, you will be prompted for a password. Pressing "cancel" will take you to an error screen saying that you do not have access to the directory. Press the "back" button on your explorer to return to the CID.

B.7.2.3 - Renaming a File
To rename a file, click on the "Rename" icon on the right of the file name you are trying to rename. You will only see this icon if you have correct access to the current directory.

Rename file icon

A box will pop up prompting on what you want the new file name to be.

B.7.2.4 - Deleting a File

To delete a file, click on the "Delete" icon on the right of the file name you are trying to delete. You will only see this icon if you have correct access to the current directory.

Delete file icon

A confirmation box will pop up prompting on whether you really want to delete the file or not.

B.7.3 - Directories

B.7.3.1 - Navigating directories

It is recommended to use the right hand navigation bar to locate a department / region to navigate in the document repository. However there is an alternative way to this. The document repository structure is the same as the structure of the right hand navigation bar. To go up a level in the document repository (for example: from Human Resources to the Directorate of Resources) Click on the "Up one level" link:

To go up a level in the document repository

To go into a folder, simply click on it. In this case, clicking private will access the private folder within Human Resources.

Going into another folder

B.7.3.2 - Creating a New Directory

To create a new directory, first, browse to the directory in which you would like to create it in, then, locate this section on the lower left hand corner of your screen:

Create a new folder

Type in the new directory name, then hit the "Create Directory" button.

B.7.3.3 - Deleting a Directory

To delete a directory, it must first be empty. Clicking on the delete Icon will prompt you to confirm your action.

Deleting a folder

B.7.4 - Searching the Document Repository

There are 2 methods of searching the document repository. A quick search is available on the top navigation bar:
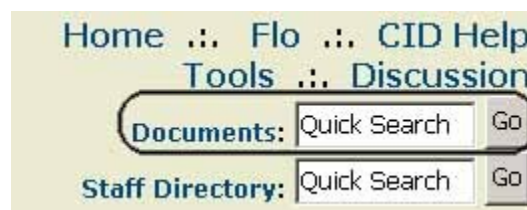
Quick Search Option
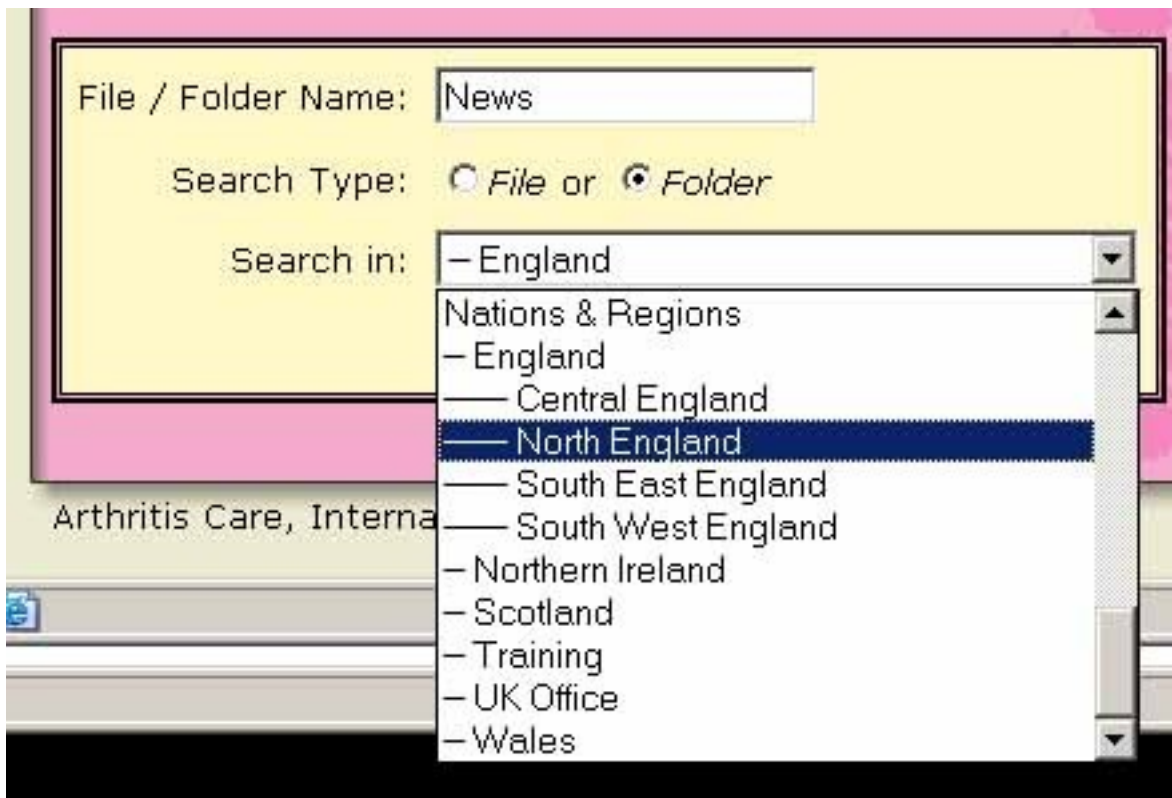
An advanced search is also available at the bottom of the document repository:

Advanced Search Option

The Quick Search does a search for files in all directories. In the advanced search option, you can specify whether to search for a file or directory, as well as where to search within. In this case, a search for any folder names containing "News" within the North England region will be performed.

Advanced Search Option

B.8: Staff Directory Feature

B.8.1 - Introduction to the Staff Directory Feature

The staff directory tool can be used to search through a list of information for every current employee of Arthritis Care. Clicking on this link will bring you to this the Staff Directory:

Link to the Staff Directory

These are the options you will see in the Staff Directory:

Staff Directory Options

B.8.2 - Quick Search

Quick Search is useful if you know the person's name you are looking for. By clicking on the Quick Search link, this will appear in your browser's window:
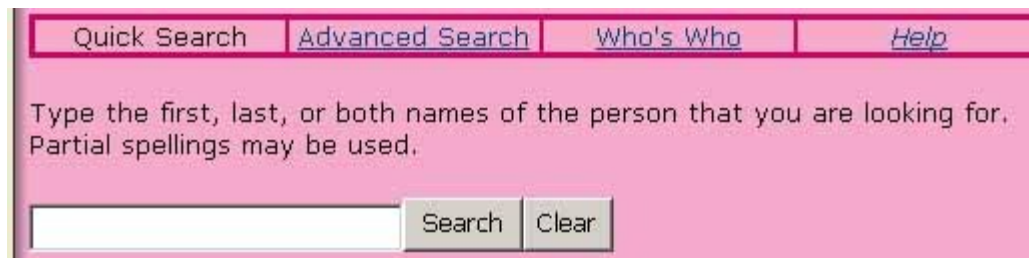
Quick Search

The system will search its files looking for you input in the box. It is not necessary to know their full name, a partial search of your input will be matched with their first or last name. Once a match has been found, the system will display the results. These results were generated by inputting "jo":

Quick Search Results

To view a profile, simply click on the name.

B.8.3 - Advanced Search

If you do not know a name, or you want to search by e-mail address, job title, phone number or location, then an Advanced Search is in order. The Advanced Search tool has more fields than the quick search:

Advanced Search Options

Fill in the boxes which you wish to search by, and hit the Search button, the results will be displayed same as the quick search.

B.8.4 - User Profiles

User profiles will look like this:

User Profile

Administrators control all profiles. Your basic information will be entered when an administrator sets up your name and password. To change a profile, you must contact an administrator.

B.9: Discussion Board Feature

B.9.1 - Introduction to the Discussion Board Feature

The discussion board can be used to enhance communications. It can be reached by clicking on "Discussion" on the top navigation bar as shown:

Top Navigation Bar - Discussion

Or from clicking the Discussion Board link from a department / regional page:

Department / Regional page

This is the Information Technology forum of the discussion board:

Discussion Board for IT

Anyone with a CID account can post in any discussion boards.

B.9.2 - Creating a New Topic

To post a new topic, go to the appropriate forum and click on the "new topic" icon as shown:

New topic icon

Fill out the subject and message body, then hit the Post New Topic button to post the topic.

Post a new topic!

B.9.3 - Replying to a Topic

To view a topic, go to the forum it is in, and click on the name of the topic as shown:

Viewing a topic

B.10 – Passwords & Permissions

To change your password and view your permissions, click on "Tools" on the top navigation bar of the CID:

Top navigation bar: Tools

You'll then your own information in this screen:
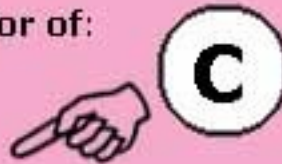
User information screen

A: To change you password, input your current password in the "Old password" box and type in the new password in the remaining 2 boxes, then hit submit
B: This email indicates to where your password will be sent to when you have forgotten it and requests it to be sent
C: The remaining of the page shows which permissions you have in the CID

If in the case that you've forgotten your password, go to the CID login page, and hit the "Forgot your password?" link, and enter your user name. Your password will then be sent to your email address.

Forgot your password?

B.11 – Using the Online Help

The quickest way to get help online is to locate the "Help" link.

They usually can be found in the bottom left hand corner of the screen. If you cannot locate it, press the "Alt" key and "h" at the same time, then press enter. It will automatically bring up the help screen for that page in a new browser window. Because it is a new browser window, you will not lose your place. Closing the help window will not close the CID down.

Appendix C: Senior Management Group May 2003
COMMUNICATING WITH ARTHRITIS CARE STAFF – A DISCUSSION PAPER

INTRODUCTION

The head of HR has undertaken a review of internal communication with staff at Arthritis Care and produced this discussion paper for consideration by SMG.

As a starting point, reference has been made to our strategic priorities, key aims and the various directorate plans. Under strategic priority 5 (Creating an effective and efficient organisation with sufficient income to sustain and develop our essential services that all stakeholders are committed to), there are two key aims of relevance:

- *Ensure the required organisational confidence and shared identity that will enable us to provide an improved and more focused service to more people with arthritis and to promote our future growth and stability*

- *Develop and implement effective and efficient management reporting processes and systems that ensure timely and consistent communication with relevant internal and external stakeholders*

However, having perused the various directorate plans, it is clear that whilst a good deal of attention is being given to external communication and to communication with volunteers, few actions have been identified to enhance communication with staff. Having said this, a number of useful ideas and actions are identified, some of which feature later in this paper.

Who are our internal audiences?

In order to target communication appropriately, it is helpful to consider our target audience(s) and whether they differ in any way. Arthritis Care staff could probably be sub-divided into a number of groups, dependent on their communication wants and needs:

- SMG / department heads / junior staff
- Regional or national staff / UK office staff
- 'Front line' staff / 'support' staff
- Home based staff / office based staff
- Hotels staff
- Improved communications must therefore take account of the differing needs of these groups.

What methods do we use currently for internal communications?

Arthritis Care already uses a variety of methods to communicate with staff:

- Interaction – aimed at both staff and volunteers containing brief articles about what is happening in the wider organisation.

- E-mail – the 'everyone at AC' e-mail group is used to send messages, primarily of a procedural or general information nature.

- Team meetings – many teams within AC hold regular meetings although there is no prescribed format or content across the organisation as a whole.

- Corporate information database – is used for posting 'shared' documents and also has facility for posting organisation news.

- Current Awareness newsletter – details recent acquisitions by the information department.

- Updates from the Chief Executive – originally introduced to keep people updated about the restructure in 2001/2 but recent edition was more general.

- UK Office Inter-directorate meetings – a new initiative to help department heads at UK office keep up to date on their colleagues work priorities.

- Supervision meetings – between line managers and their staff. There is no standard format for these meetings and content depends largely on the style of the individual line manager and the level of participation of the staff member.

- Grapevine

- Union recognition – this is a route via which changes to terms and conditions of employment are agreed. The level of communication between union representatives and the main body of staff is open to question.

While some of these methodologies are may provide opportunities to interact at an 'involvement' or 'engagement' level, many are more suited to communication at an 'instruction' level. It is also noticeable that routes for upward communication are limited and that no formal routes at all exist for 'grass roots' staff to get messages to senior management.

What do we know about how well we communicate?

There are a number of sources of information about how well we communicate, although there are no formal methods in place to measure this.

From SMG discussions, we know that:

- People tend to operate in 'silos', sharing little information about what they are doing nor exploring how things could be more joined up.

- SMG (and possibly others in the organisation) are overwhelmed by the volume of e-mail they have to deal with.

In addition:

- We don't always factor communication into our plans as a matter of course.

- Exit interview questionnaires contain the question 'How well do you think the organisation as a whole communicates with it's staff'. On a scale of 1 to 6 where 1 is unsatisfactory and 6 is excellent, responses are consistently below 4.

How could we find out more about how effective communication is now?

Options include:

- Questionnaires – for example a general staff opinion survey or one focussed on communication in particular. We could ask what is good about existing communication methods and what is not so good, what changes staff would like to see, what they think has worked well in the past, what their information needs are and how they like to receive their information.

- It would be helpful to know whether there is any feedback or statistical information available about interaction and / or use of cid.

- Better use could be made of union representatives to establish people's views on communication effectiveness.

- Focus groups could be set up to find out what people think and to help come up with solutions.

What communication needs to take place between Arthritis Care and its staff?

Clearly, communication takes place all the time within the organisation. It will be useful to identify what kinds of communication fall within the remit of any strategy. Here are some suggestions:

- Staffs need to know about what the organisation as a whole and their colleagues are doing – not in a great deal of detail, but so that they can spot connections with their own work and feel part of a cohesive whole. This includes support staff understanding the roles and needs of front line staff and vice versa.

- They need to hear about successes and achievements (and how we benchmark against other organisations?) so they can feel good and positive about being part of Arthritis Care.

- From time to time we have to communicate major organisation wide policy and/or procedural changes that affect how people will do things.

- There should be a formal route or routes for the voice of staff to be heard aside from the union (since union membership is low). A way for people to say what they think and to make suggestions and be heard (which is not the same as always acting on feedback and suggestions). Again, this will help people to feel part of the whole.

For every major message, we need to think about what outcome we are looking for and then consider the appropriate route / method to get the message across.

What could be done to improve communication?

A whole range of options are available in terms of enhancing existing arrangements and introducing new methods / media:

- More use could be made of the 'news' feature on cid. It would be worth exploring just how accessible cid really is for non-UK office staff and consider whether it could be made an automatic 'pop up' for everyone when they log on to their machine. If the news page were kept fresh and new then staff would gradually become more accustomed to referring to it for updates.

- For UK office, regular 'morning teas' could be held. Perhaps each directorate could take turns to 'host' and to tell the rest of the staff what they are currently involved in or planning. It would also be an opportunity to pass on any particular points of interest about developments in the wider organisation (successes and achievements), to welcome any new starters and say farewell to those who are leaving and even to publicly acknowledge any anniversaries (e.g. 5, 10 years with AC).

- How about a staff suggestion scheme? Clearly staff want to tell us what they think – at the moment they do it by e-mailing or phoning the person they think is most likely to listen or to be able to do something to help. This is time consuming for those of us that get the feedback and means that only those who are prepared to stick their necks out get a say. Providing a formal route for staff suggestions would mean being able to take a more structured approach, give everyone an outlet for their comments and might very well generate some good ideas! Perhaps this could be done through cid in some way?

- 'On the spot debates' might be a helpful way for people to ask questions they would otherwise feel unable to. Groups of staff have an opportunity to meet with a group of senior managers. At a pre-meet, the staff consider what questions they

would like to ask and, if there are any they don't want to ask in person, a nominated rep (perhaps an Amicus rep?) would ask the question on behalf of the group.

- There is certainly scope to improve communication via Amicus and it is hoped that this might be addressed to some extent through the forthcoming review of the recognition agreement.

- The 'Updates' introduced as a part of the restructure could be adopted and their focus changed to pass on news that is of particular interest to staff (as opposed to information for staff and volunteers that appears in interaction). This could become a regular feature (say every two months).

- For general information / reminders, payslip flyers could be used.

- It might even be useful to have a telephone 'message from the chief executive' or 'message from the Board' from time to time that people could dial in to and listen rather than reading a message.

- Work could be done to give structure to supervision meetings so that they involve communication of key messages. The HR plan already includes a proposed review of the appraisal system and I see these two, with work planning as all going hand in hand.

- Minutes from meetings such as Board or SMG could include a brief 'public summary' to be posted on cid and / or used as a basis for cascade at team meetings.

- There should be opportunity where appropriate for team and inter-directorate meetings to feed into SMG.

Whose responsibility?

Currently the responsibility for internal communication of this nature does not sit within a single role or area. The communications directorate, publications, HR and IT departments all 'have a hand in' but we do not work together in a co-ordinated way to ensure all staff communications gel together. There are a whole range of potential roles involved in making internal communication effective – from the 'advisor' who factors communication issues into the high level organisational planning, through the 'manager' who co-ordinates the communication, the 'expert' on communication channels and the 'reporter' who actually writes (or translates) the message. Arthritis Care has staff skilled in all these areas, but no-one with formal authority to take responsibility for this area of work and pull the skills together.

So what should we do?

The following actions would be an important start:

- Formal responsibility to lead on internal communication should be designated somewhere and the various individuals with the skills and knowledge to contribute should be identified.

- Additional information about the state of communication in the organisation has to be gathered. A combination of anonymous questionnaires and focus groups would be useful. Focus groups should be led by staff with facilitation skills rather than by senior managers.

- Some of the above detailed ideas might be adopted immediately (e.g. the monthly 'morning teas') whilst others should wait until we have a clearer feel for what people think now.

SUMMARY

SMG are asked to note the key findings as follows:

- Formal lead responsibility for internal communication with staff is not currently attached in practice to any role within Arthritis Care.

- Existing communication channels do not provide any formal routes for 'upward' communication.

- There is significant room for improvement in the communication of both inter and intra directorate (and indeed organisation wide) news / success / plans / achievements.

IDEAS FOR CONSIDERATION

- Further attention could be given to the development of internal communications plans, methods and tools that will ensure that staff feel well informed and knowledgeable about the organisation and it's activities; engaged by and involved in the organisation

- Lead responsibility for internal communications could sit with a nominated role within SMG, e.g. the head of human resources.

- Staff with suitable skills and expertise could be involved by the nominated SMG lead in the development of plans, methods and tools for internal communication.

Arthritis Care

Systems Survey

18 Stephenson Way
London, NW1 2HD
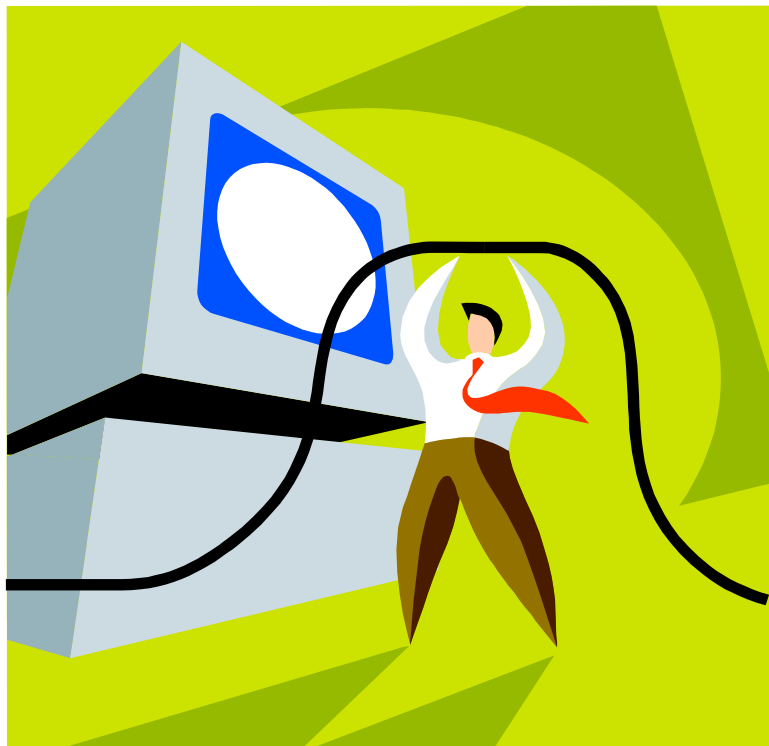
Purpose

Your response to this questionnaire is very important. Our team is studying how employees with Arthritis Care use the Corporate Information Database, Intranet and Flo systems. Information from these surveys will help us understand ways to improve these systems, making tasks easier for you. We would like to hear your candid opinion on this topic.

Confidentiality Statement

The information gained from this survey is being used only to help identify areas where the communication systems at Arthritis Care could be improved. We would ask that you please not attach your name to this survey and that you answer questions in an honest manner, to the best of your knowledge. All responses to this survey will be held to the strictest confidence and not shared outside of this study for any reason.

Thank you again for your time.

1.) How often do you use the Corporate Information Database
    or Flo?   (check one)

    ☐ Constantly

    ☐ Hourly

    ☐ Daily

    ☐ Weekly

    ☐ Rarely or Never

2.) List the three features of the Corporate Information
    Database or Flo that you use most often.

    1. _____

    2. _____

    3. _____

3.) List the three features of the Corporate Information
    Database or Flo that you use least often.

    1. _____

    2. _____

    3. _____

4.) Describe what you consider to be the best features of

the Corporate Information Database and why.

5.) Describe what you consider to be the worst features of

the Corporate Information Database and why.

6.) Do colleagues in your department use the Corporate

Information Database or Flo?   (check one)

☐ Yes

☐ No

7.) Were you trained to use the Corporate Information
    Database or Flo?   (check one)

    ☐ Yes

    ☐ No

8.) If you answered Yes to question 7, what method of
    training did you use?   (check one)

    ☐ Workshop or Lecture

    ☐ Online Manual

    ☐ Printed Manual

    ☐ Personal Assistance

    ☐ Other: _____

9.) Did you think the method used to train you was the best
    available training method?   (check one)

    ☐ Yes

    ☐ No

10.) If you answered No to question 9, what method of
     training would you rather have had available?

11.) Have you encountered glitches, bugs or technical

difficulties while using the Corporate Information

Database or Flo?   (check one)

☐ Yes

☐ No

12.) If you answered Yes to question 11, please describe a

specific issue you have encountered when using one of

these systems.

13.) List three improvements you would like to see made on

the Corporate Information Database or Flo.

1. _____

2. _____

3. _____

14.) General Demographic Information

Gender:

Department:

15.) How would you rate your general ability to use a
   computer?   (check one)

   ☐ Excellent

   ☐ Above Average

   ☐ Average

   ☐ Below Average

   ☐ Poor

16.) How would you rate your skill with the Corporate
   Information Database or Flo?   (check one)

   ☐ Excellent

   ☐ Above Average

   ☐ Average

   ☐ Below Average

   ☐ Poor

17.) Do you have any physical condition that may hinder your work? If so can you describe it?

_____

_____

18.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work?

☐ Paid Employee

☐ Volunteer   Hours: _____

Our team would like to extend our thanks to you for completing this survey. Our intentions are to analyze this data and add the necessary features to the Corporate Information Database and Flo systems as quickly as possible. We hope that you see these improvements and that they improve the quality, efficiency, and ease of your work here at Arthritis Care.

Our group would encourage any person who would like to further discuss topics raised within this survey to contact our group at:

arthritiscare@wpi.edu

We would like to set up a personal meeting with you to discuss how we can make these systems better and easier for you to use.

_____

Tim Chen

_____

Again, thank you.

John Conidi

_____

Ian McBride

_____

George Roscoe

Appendix E: Survey Reponses

E.1 Response Tables

1

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Daily
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Directory + directory admin 2.) HR files - upload policies jobs etc. 3.) other departments files for information	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) do not use flo at all 2.) occasionally look at the news 3.) use help + training occasionally	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
The directory although I think this is easier for me to use as I have the admin access to. Also being about to put policies etc in the HR files has helped as staff can access this directly, cutting down our enquiries.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Again the directory, as many staff do not have daily access to CID they would like to be able to print off a single sheet with names, job title + tel number. Also I have occassional problems uploading on CID as the file name have to be so short + have no spaces in them. I have never used Flo. I think I missed the WPI training on this last year.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Workshop or Lecture
Other from Above: Printed Manual	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather	

have had available?	
Having the printed manual for backup has been useful.	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	No
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) A single printable page on the directory would be useful (as question 5). 2.) longer file names for documents with spaces in 3.)	
15.) Department:	Human Resources, Resources Directorate
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	No
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? Hours:	Paid Employee

2

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Flo - Branch member address 2.) Trustee contact details 3.) Check policy documents - mostly HR	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) staff directory 2.) very rarely check other departmental info mainly because it can be difficult to find 3.) Uploading documents I know are UK wide relevant - just twice needed to do it	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
can quickly locate a document. I don't have to have my own filing system. I know our home based staff can access information e.g. policy + proceedures. I like the news area - although we haven't used it much. I think it could be used more effectively.	
6.) Describe what you consider to be the worst features of the Corporate	

Information Database and why.	
I keep accidently exiting out. It is annoying. I have had trouble uploading files. Its the file name that is problematic.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Workshop or Lecture
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	No
11.) If you answered No to question 10, what method of training would you rather have had available?	
Personal assistance, but I know this isn't possible given resources.	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Just knowing when to look. Sometimes I forget where I have put things. Using Flo branch members - the next page button is our of sight at the top of the page. Forgotten password - look you fixed it.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) search / find facility	
2.) can we make sure instruction buttons are always visible	
3.)	
15.) Department:	Resources Directorate
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	No
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work?	Paid Employee
Hours:	35

3

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you	

use most often.	
1.) To look up information to do with HR policies 2.) To look at senior management's weekly movements 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Most of it, except the above! 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
It saves time when you are working at a PC, you can quickly look up something, say in a policy and then go back to your original document.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
It can be cumbersome if you are not sure in what area the information you require is to be located	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	No
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	No
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) I use it because it is there but equally if it wasn't I wouldn't particularly miss it because I could easily locate the little information I obtain from it quire readily elsewhere 2.) 3.)	
15.) Department:	Resources Directorate
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Below Average
18.) Do you have any physical condition that may hinder your	

work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee

4

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) HR Policy docs 2.) CE Office 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) All the rest 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Do not use enough to comment	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	No
8.) Were you trained to use the Corporate Information Database or Flo?	No
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
Online manual	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
It occasionally crashes	
14.) List three improvements you would like to see made on the Corporate	

Information Database or Flo.	
1.) More updates on notice board 2.) Helplines data captured + stats uploaded 3.)	
15.) Department:	
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? Hours:	Paid Employee

5

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) policy documents 2.) publications informatio 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Less need to hold paper copies of policies & know that I am using the current ones	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
finding documents - i don't know how to do this without trawling through many sections	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	
8.) Were you trained to use the Corporate Information Database or Flo?	No
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best	

available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) training on how to use it effectively 2.) 3.)	
15.) Department: south east region	
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee

6

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Daily
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) HR Staff policy directory + line manager guide 2.) CEO strategy documents 3.) HR salary scales for porject budgets	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) All except the above 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Human resources section - because it appears to be the ost comprehensive and up-to-date section of the CID	

6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Restrictions on the size of files that can be uploaded - because the info that I need to share with RDMs in the nations cannot be shared on CID. Even after deleting all formulas and cell borders etc. a simple file on Excel was 'too big' for CID.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Printed Manual
Other from Above: Personal Assistance	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Please see Q5 re CID. I've never used Flo	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Ability to upload larger files 2.) Standard procedures to update info (esp. project info) 3.) Consolidate info - e.g. if there's a folder for campaigning and a folder for S.E. England where would you find info about campaigning in S.E. England?	
15.) Department:	Trust fundraising
16.) How would you rate your general ability to use a coputer?	Excellent
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	N/A
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? Hours:	Paid Employee

7

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never

3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Regions 2.) Publications 3.) Campagning	

4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Branch Futures 2.) Accounts 3.) Helplines	

5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
The fact that it is constantly updated	

6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
The fact that if there is a problem with the system, it's hard to get information such as peoples' phone numbers any other way	

7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	No
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	No
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Making it easier to navigate in terms of structure 2.) Making it easier to navigate in terms of design 3.) Make it quicker working	
15.) Department:	Publications
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	

19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee

8

1.) Describe your understanding of the Corporate Information Database and Flo.	

2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never

3.) List the three features of the Corporate Information Database or Flo that you use most often.
1.) Directory 2.) HR Department news 3.) Corporate news if any

4.) List the three features of the Corporate Information Database or Flo that you use least often.
1.) News or uploads from any other departments that HR 2.) Discussion/Forum 3.) I do not have access to Flo

5.) Describe what you consider to be the best features of the Corporate Information Database and why.
The idea of it I guess... and the fact that CID could be a great tool for improving communication between departments in the UK office and nationwide if its potential was used. The best feature is a possibility to upload and store documents accessible for everyone, news and other information.

6.) Describe what you consider to be the worst features of the Corporate Information Database and why.
We do not use all features CID has to offer, but also we are not encouraged to do so. The way icons appear in document repository is really messy, names of uploaded documents is far from self-explanatory. The speed of downloading reminds me a turtle.

7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes

8.) Were you trained to use the Corporate Information Database or Flo?	Yes

9.) If you answered Yes to question 8, what method of training did you use?	Printed Manual
Other from Above:	

10.) Did you think the method used to train you was the best available training method?	Yes

11.) If you answered No to question 10, what method of training would you rather have had available?
I think this was the best method because the manual explains all details of this - simple after all - database. However, we have never had a training or Q&A session for those who would like to learn more (or just ask).

12.) Have you encountered glitches, bugs or technical difficulties	Yes

while using the Corporate Information Database or Flo?	
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
First, it was not accessible for few weeks. It is still very slow, and therefore it discourages me from using it. CID it is not user-friendly due to its quite old and not intuitive interface. Downloading documents from it takes ages.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Faster 2.) Modern interface 3.) 'Search' feature could be improved (more options)	
15.) Department:	Communications
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Excellent
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee 17.5

9

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Chief Executive Officer 2.) 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
I only use CID to access movements of the SMG in 'Chief Executive Officer'	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
7.) Do colleagues in your department use the Corporate	

Information Database or Flo?	
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use? Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo. 1.) 2.) 3.)	
15.) Department: Directorate	
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Poor
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? Hours:	

10

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often. 1.) Try to add info department material 2.) check info department content 3.) policy statements	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	

1.) Flo 2.) Flo 3.) Flo - what is FLO ?	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
The concept - of a unified repository for core information, that can be readily updated, and accessible to all - but in practice it doesn't work like this !	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Difficulty of use - unattractive screens, which always need to be scrolled down to reach content. What is Flo ? I can't access it, so it is of no use to me. Impenetrability of content - search function improves this a bit.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Complete inability to upload information to CID - double checked with IT, but the apparent upload was blank. I am still waiting for this to be fixed, so cannot add any content to CID - this has been the case for months.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Much greater clarity and transparency - a 'windows' interface with visible file structures 2.) Better use of screen space 3.) Greater ease of use to upload	
15.) Department:	Information Department
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Below Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically	Paid Employee

work? Hours:	

11

1.) Describe your understanding of the Corporate Information Database and Flo.	
There's a big diff. between using rarely and monthly	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Staff policy directory/ line managers guide 2.) Flo if it owrked this would probly increase frequency to weekly use 3.) SMG movements	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) All Others 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Flo i fit worked would be an excellent resource as it provides branch membership listings in a way that can't be viewed in saturn	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Unappealing visually, It doesnt' have a new news section so wouldn't refer to it unless i'm looking something up	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
personal assistance	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Data flo wfrom saturn to flo incorrect CID has crashed older pcs	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	

1.) A new section / Staff Noticeboard 2.) More visually appealing 3.) Statistics Area	
15.) Department:	Communications
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Above Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee 35

12

1.) Describe your understanding of the Corporate Information Database and Flo.	
It is an internal communication system where important information can be parked for access by appropriate members of staff	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Regional pages for staff diary/movements 2.) HR pages 3.) Fundraising	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Regional pages other than our own 2.) Hotels 3.) AMICUS	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Ability to share information speedily and simply.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
No index - can be difficult to find documents if you're not sure where they are stored. Not always informed when documents are first uploaded or updated.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Printed Manual
Other from Above:	

10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
This question does not make sense to me - there was option to reply Yes to question 9!	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Please see reply to question 11 !! I'm afraid this illustrates graphically the type of problems that occur. Some difficulties have been encountered when trying to log on. The system requires a password/ID at every level - is this really necessary?	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) A comprehensive search system 2.) Site index 3.) Pop ups informing when new documents have been stored	
15.) Department:	Resource development
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? Hours:	Paid Employee

13

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Directory 2.) CEO's Folder for weekly movement chart for her directory 3.) Resource folder for checking staff policies	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Everythine Else 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information	

Database and why.	
Being able to share and access the same info, large docs etc. It doesn't clog up your email	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Requires correct spelling when searching directory. Naviagation could be more direct uploading is a lot more difficutl from MACS	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Workshop or Lecture
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
given a CGI timeout after having it up on the screen for a few minutes	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) to include a deptment contact database 2.) to be able to fully acess member details wihle protecting data 3.)	
15.) Department:	Publications
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work?	Paid Employee
Hours:	35

14

1.) Describe your understanding of the Corporate Information Database and Flo.	
I only use it as a basic reference point for documents that i have been advised to read as part of my indcution program. i do not know how else it can be used	
2.) How often do you use the Corporate Information Database or	Rarely or Never

Flo?	
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Info on policies 2.) Info on planning/strategy 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) n/a 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
I do not know enoguh about it ti iss still a mystery to me. What will be beneficial to me if i use cid/flo as a resource	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Simple printable info doesn't seem to be available An up-to-date telepheon list with extensions The HR into seems generally to be teh only info that's updated or helpful	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) I still do not have a good overview of its potential to know how to incorporate my job role and benefits of CID/Flo 2.) What should I bbe using it for sharing info on what level? 3.)	
15.) Department:	Fundraising
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information	Average

Database or Flo?	
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work?	Paid Employee
Hours:	35

15

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Installing weekly SMG movements sheet on chief executives dept 2.) Access H.R. info ie policies sickness return form procedure etc. 3.) other depts info, directory	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) never used flo 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Quite simple layout even I can get around	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
maybe quite boring to look at	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	

could not download info to it but wpi student remedied this	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) nice to look at 2.) easy to use 3.)	
15.) Department:	CE
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	RSI - carpal tunnel
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee 35

16

1.) Describe your understanding of the Corporate Information Database and Flo.	
CID is a resource for documentation relevant to AC employees rather than wider usage. I couldn't define Flo although I hear it mentioned a lot. Is it where member details are kept?	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Information 2.) I've hardly looked in the other sections. 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) All the rest! 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
It is great that there is such a resource, so that you do not have to keep asking people for information which everyone in AC has the right to know.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Although I am experienced with the internet and databases, I do find it hard/counterintuitive to navigate round CID. Even within the Information section, I often do not know where I am and whether I am missing out on something. This discourages me from exploring the other sections - it may be that it is not that hard to navigate, but it is hard enough to put me off enjoying it enough to persevere into areas where I do not	

know for a fact that there is something interesting to find! I'm also not sure about who maintains the content or how/if us as individuals can upload information - it would help me to appreciate the content better if I knew that.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use? Other from Above:	Personal Assistance
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available? I wasn't aware there was an online manual for CID - this would have helped perhaps. I'm not sure if a full course would really be necessary - but then you don't know what you don't know!	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems. I can remember occasions where the whole system broke down for long periods.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo. 1.) Navigability 2.) 3.)	
15.) **Department:** North England	
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Below Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	No
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee

17

1.) Describe your understanding of the Corporate Information Database and Flo. Provides access to information central to the running of AC.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you	

use most often.	
1.) Finding names of members	
2.) updating secretariat Trustee contact information	
3.) first point of contact for finding generla information	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) All the rest	
2.)	
3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Ability to search quickly for member/branch details First point of contact for information	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
The fact the data is not live i.e parts can be outdated i.e. members information on FLow etc The lack of a user friendly interface, i.e. built for information to be put on it by different departments and not for ease of retrieval and navigation by other users that wish to find and access this information quickly	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Live updates of data held on flow	
2.) Easier navigation for retrival of informaiton	
3.)	
15.) Department: Secretarait	
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Below Average
18.) Do you have any physical condition that may hinder your	

work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee 35

18

1.) Describe your understanding of the Corporate Information Database and Flo.
CID is a 'library' of documents which are accessible by all in the organisation. Flo sits on top of CID and allows all in the org (if access is granted) to have access to info held on Saturn.

2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never

3.) List the three features of the Corporate Information Database or Flo that you use most often.
1.) To put the campaigners newsletter on - but no longer because space is too ltd 2.) To view HR policies 3.)

4.) List the three features of the Corporate Information Database or Flo that you use least often.
1.) All the rest 2.) 3.)

5.) Describe what you consider to be the best features of the Corporate Information Database and why.
Info readily accessible by all in the organisation. The problem is that not enough people actually use it as a source of info, and there doesn't seem to be a clear agreement on the type of info that should be uploaded (its role within the organisation), e.g. news from various departments or what they plan to do. If people new better what kind of info to expect on CID, they may be more likely to use it.

6.) Describe what you consider to be the worst features of the Corporate Information Database and why.
See 5.

7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes

8.) Were you trained to use the Corporate Information Database or Flo?	Yes

9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	

10.) Did you think the method used to train you was the best available training method?	

11.) If you answered No to question 10, what method of training would you rather have had available?
Clear explanation of its role within the organisation and what it can be used for.

12.) Have you encountered glitches, bugs or technical difficulties	Yes

while using the Corporate Information Database or Flo?	
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
I couldn't change my user info, e.g. my password. It asks me to login each time I try to download a document and I have to simply press cancel to get the document anyway.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Be clearer about its role in the organisation - what kind of info do we want to share 2.) 3.)	
15.) Department:	Policy and campaigns
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Above Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? Hours:	

<div align="center">**19**</div>

1.) Describe your understanding of the Corporate Information Database and Flo.	
Limited understanding of cid, none of flo	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) 2.) 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes

8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use? Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems. Unable to gain access to it	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo. 1.) 2.) 3.)	
15.) Department: helplines	
16.) How would you rate your general ability to use a coputer?	Below Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Below Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	osteoarthritis in almost all joints
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? Hours:	Paid Employee

20

1.) Describe your understanding of the Corporate Information Database and Flo. I understand the CID to be a document repository. FLO is I believe a Data base	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often. 1.) Information leaflets and campaigning policy/press releases 2.) Staff contact details 3.) Line Management proceedures	
4.) List the three features of the Corporate Information Database or Flo that you use least often. 1.)	

2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Hopefully when it is working the instant access to documents without having to phone UKO.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
The list of contact details is a slow and laborious process. Many areas are not being kept up to date and we need to have more information on it - then people would use it more	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use? Other from Above:	Printed Manual
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
It has been difficult to download articles and sometimes it shoots out of an area so you cannot download another document in that section.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) 2.) 3.)	
15.) Department:	South West England Region
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Above Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	No
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) HR Info 2.) Directory 3.) To see if a file is on there eg campaigns when it rarely is	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Discussion Board 2.) password retrevial 3.) hotels	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
the sharing of information and easy of department listed	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
lack of space to upload files, very random information on there, oftern out of date, but guess this is up to the departments	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
None, hte online powerpoint training in fine	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) More information on Cid that everyone made aware and use CID for same purpose 2.) Rename the directory Staff Directory 3.) On the directory need an email adress who to contact if entries are wrong eg my telephone # is wrong on there but I don't know who to contact to make amendments	

15.) Department:	Communtications
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Below Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee 35

22

1.) Describe your understanding of the Corporate Information Database and Flo.
A way of ensuring that the whole organisation has access to the same information and standardised documents.

2.) How often do you use the Corporate Information Database or Flo?	Weekly

3.) List the three features of the Corporate Information Database or Flo that you use most often.
1.) Who's who to get contact details 2.) Health & Safety and Human Resources policy documents 3.) Publications forms

4.) List the three features of the Corporate Information Database or Flo that you use least often.
1.) Flo 2.) South West document file 3.)

5.) Describe what you consider to be the best features of the Corporate Information Database and why.
In principle it's a great idea to share information and have access to standard documents - particularly policy docs, forms, briefings etc.

6.) Describe what you consider to be the worst features of the Corporate Information Database and why.
1. As a staff we are pretty hopeless at posting things on CID so there's not much helpful documentation on there - I would say this is a gap in training / understanding on our part. 2. FLO is a nightmare for us in the region - it's inaccurate and incomplete. We use a separate regional database to store branch contacts and there is a big element of duplication and a huge margin for error.

7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Printed Manual

Other from Above: I wouldn't really call this training - I looked at it once to see how to

access CID and there doesn't ever seem to have been time to revisit it...	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
One to one coaching / demonstration would have been ideal, but no one else in the south west region really uses it much either.	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Problems with just getting onto the website. Problems with people labelling documents vaguely so you don't can't find what you want. FLO is very imcomplete.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Increased understanding amongst staff of the use / purpose of CID 2.) FLO to contain up to date downloads from Saturn and perhaps a pro forma that regions can complete to amend branch officer details and submit to support services? 3.) can the front page look a little more logical - e.g. alphabetical order?	
15.) Department:	South West Region
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	N/A
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee 35 per week

23

1.) Describe your understanding of the Corporate Information Database and Flo.	
Mostly for branch and group stuff regarding the regional manual.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Human Resources 2.) Supporter Services 3.) IT	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Chief Executive 2.)	

3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
The fact that information which is relevant to all is accessible to all with out having to call someone and wait for it to be posted or emailed. Instant access.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Can be a bit slow and there was a few months in 2003 when it could not be accessed at all. Which was very frustrating and show how much it was relied upon.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Printed Manual
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
Was quite happy with the method of training, maybe questions should have been "If you answered No..."	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Lack of access see answer to question 6	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) More information 2.) Access to more files 3.) Speed	
15.) **Department:**	Scotland
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	No
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work?	Paid Employee
Hours:	35

1.) Describe your understanding of the Corporate Information Database and Flo.

It's a resource for sharing of documents that can easily be kept updated. I think it should be central to all of our work at Arthritis Care in terms of communication and keeping up to date with internal issues. I don't think it has reached that potential yet. There are some features that haven't got into proper use yet. It's my understanding that Flo isn't being used by anyone yet as it's still in development and hasn't been properly tested. News features and Discussion Boards could be used a lot more. I think the fact they haven't been shows the organisation hasn't been using CID that effectively up to now. This is a chance to turn that around.

2.) How often do you use the Corporate Information Database or Flo?	Daily

3.) List the three features of the Corporate Information Database or Flo that you use most often.

1.) Downloading/printing/accessing documents
2.) Browsing documents
3.) Using the staff directory

4.) List the three features of the Corporate Information Database or Flo that you use least often.

1.) Discussion board
2.) Flo - it isn't really in use yet
3.)

5.) Describe what you consider to be the best features of the Corporate Information Database and why.

I can see that you are improving the navigation structure a lot - so I'm enjoying the new developments. When Flo is further developed and it's clear what we want out of it, I think this will be a really good feature because it's the beginning of sharing data between UK office and the regions/nations in a way that hasn't been possible before.

6.) Describe what you consider to be the worst features of the Corporate Information Database and why.

It used to be really hard to see what were active links, eg news items. The lefthand navigation bar was really messy and hard to distinguish between the different items. The worst feature has been that it isn't used as much as it should be. People have to be trained to get into the habit and that means there has to be commitment from all to keep items fresh and up to date.

7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes

8.) Were you trained to use the Corporate Information Database or Flo?	Yes

9.) If you answered Yes to question 8, what method of training did you use?	Online Manual

Other from Above:

10.) Did you think the method used to train you was the best available training method?	Yes

11.) If you answered No to question 10, what method of training would you rather have had available?

I think it was a good training method for me as I feel very familiar on a computer and finding my way around new tools. For those who feel less confident, perhaps someone in each Dept or Region could take on a training role or offer assistance to new members of staff.	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Seem to be getting a lot of CGI timeouts. I haven't encountered it myself but know that some people have had problems uploading documents. Sometimes when downloading documents, it asks for the password to be re-entered - is this necessary when we all have to login initially? It was frustrating when CID wasn't available for several weeks last year.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Encourage greater use of Discussion Boards 2.) A way to submit news 3.) Let's have a real organisational strategy around Flo	
15.) Department:	Central England region
16.) How would you rate your general ability to use a coputer?	Excellent
17.) How would you rate your skill with the Corporate Information Database or Flo?	Above Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee

25

1.) Describe your understanding of the Corporate Information Database and Flo.	
to access info about AC and its working practices	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) HR info 2.) 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information	

Database and why.	
an opportunity to record my info and to access easily other peoples contacts etc	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Printed Manual
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
havent you got your yes and no muddled in questions 8 and 10	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.)	
2.)	
3.)	
15.) Department:	sw
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Below Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work?	Paid Employee
Hours:	21

26

1.) Describe your understanding of the Corporate Information Database and Flo.	
To be able to share information between Nations & Regions	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you	

use most often. 1.) SMG diary update 2.) Directory 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often. 1.) 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why. 	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why. Not 'user friendly' enough	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use? Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available? 	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems. 	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo. 1.) Complete list of departments 2.) Complete list of contacts within department headings 3.) More comprehensive directory	
15.) Department: South West	
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Poor
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically	Paid Employee

work?	
Hours:	17.5

27

1.) Describe your understanding of the Corporate Information Database and Flo.	
Not a lot. Some centrally held information?	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Finding someone internally 2.) Corporate aims/structures 3.) Media	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Database 2.) Everything else - given I don't use it much 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
The ability to find someone	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Not up to date	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) More user friendly 2.) More up to date	

3.)	
15.) **Department:**	Policy and campaigns
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Below Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee 35

28

1.) Describe your understanding of the Corporate Information Database and Flo.	
A communications system and reference library	
2.) How often do you use the Corporate Information Database or Flo?	Weekly
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) HR policies 2.) Health and Safety 3.) Anything new	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Who's who 2.) Regional matters 3.) Campaigning matters	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Whos who is slow to find what I want	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	

12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo. 1.) Make it easier to access Whos who 2.) Make it easier to find your way round generally 3.)	
15.) Department: Hotels	
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	No
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee

29

1.) Describe your understanding of the Corporate Information Database and Flo. Internal connection for information which should be accessible to all AC staff. Format for exchange of information between relevant staff members	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often. 1.) I use it so rarely I can't really answer this or question 4 2.) 3.)	
4.) List the three features of the Corporate Information Database or Flo that you use least often. 1.) 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why. I have used it to download one or two things for example report forms	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why. Not enough experience of the system to judge	

7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Printed Manual
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
Should the wording for 11 not have been 'answered no to question 10'? The training by printed book was perfectly clear	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Again not enough experience to judge 2.) 3.)	
15.) Department:	Training - home based
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	No
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work?	Paid Employee
Hours:	Full time

30

1.) Describe your understanding of the Corporate Information Database and Flo.	
CID is a central repository for documents, allowing all relevant people to access via the web. Don't know about Flo	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Information sheets 2.) Who's who	

3.) HR stuff	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Don't know what they are as I don;t use them. 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Allowing access to documents for all, reducing duplication of effort	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Can't return to the page you were on, so have to start at the beginning again.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
See6 above	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) 2.) 3.)	
15.) Department:	Scotland
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? Hours:	Paid Employee

1.) Describe your understanding of the Corporate Information Database and Flo.	
To me it's an Internal internet of information of the Charity.	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) to find other employee members details e.g location 2.) Sheila's senior management weekly timetable of movements. 3.) I also like to read any info that HR puts on CID.	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Apart from the three above, I dont use the other areas of info on CID. 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
What I believe is the best feature of CID has to be the info on the employees details for example, if like someone faxs over one of my travel forms requesting me to book train tickets but does not put their office location where he/she are based but only their name and telephone number then I can go in to CID and find that out.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Can't think of anything at the moment.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
When I wanted to put my travel and hotel forms on Cid but I did not know how to until Sheila showed me. I had to let her show me twice before I got the hang off it.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) I liked the introduction page of CID which you just clicked on the picture if you wanted staff directory, I believe that was user friendly.	

2.) 3.)	
15.) **Department:**	
16.) How would you rate your general ability to use a coputer?	
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	

32

1.) Describe your understanding of the Corporate Information Database and Flo.	
CID is a centralised document storage area accessible to most AC employees. Flo is an adaptation of the Regions & Nations Database, but I do not think it is fully functional yet.	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Looking up Staff Policies 2.) Occasionally looking at diaries for other staff 3.) Looking at vacancies	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Hotels 2.) Finance 3.) Flo	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Potentially it could be the core access system for the whole organisation's data. However, I believe it should be accessible to everyone, and the benefits of shared data promoted to all users. Lack of training is standing in its way at present. My own usage has been as a result of tentative experimentation rather than demonstration or training.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Lack of integration and awareness of the system	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	

Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Links not working. For example the link to the picture of the WPI team arriving in April doesn't connect.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) Better training 2.) More usage 3.) Flo working fully, as the RANDi system intended	
15.) Department:	Regional office
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee

33

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Rarely or Never
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) HR documents & Who's Who 2.) Amicus site 3.) Information dept. documents	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information	

Database and why.	
ITS theme has potential for	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
Bugs and Acessibility	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Can't upload union information to amicus	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) access at home 2.) 3.)	
15.) Department: Information	
16.) How would you rate your general ability to use a coputer?	Above Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Below Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work?	Paid Employee
Hours:	35

34

1.) Describe your understanding of the Corporate Information Database and Flo.	
CID enables the organisation to make documents accessible to approved users within the organisation. I do not know what Flo is.	
2.) How often do you use the Corporate Information Database or Flo?	Weekly

3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Staff contact details 2.) Human resources - staff handbooks 3.) Secreteriat - e.g. Memorandum and Articles	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) This is an impossible question to answer 2.) 3.)	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
It is relatively simple.	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	
1.) 2.) 3.)	
15.) Department:	Scotland
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	
19.) Do you hold a paid position or do you volunteer at Arthritis	Paid Employee

Care? If you are a volunteer, how many hours do you typically work? **Hours:**	

35

1.) Describe your understanding of the Corporate Information Database and Flo.	
2.) How often do you use the Corporate Information Database or Flo?	Daily
3.) List the three features of the Corporate Information Database or Flo that you use most often.	
1.) Who's Who (directory 2.) Documents in HR Section 3.) Documents in other sections	
4.) List the three features of the Corporate Information Database or Flo that you use least often.	
1.) Training (help) 2.) Saturn database details 3.) RANDi details	
5.) Describe what you consider to be the best features of the Corporate Information Database and why.	
Ability to share documents and information throughout dispersed organisations	
6.) Describe what you consider to be the worst features of the Corporate Information Database and why.	
News section - bout onlly because we have not organised ourselves to use it effectively	
7.) Do colleagues in your department use the Corporate Information Database or Flo?	Yes
8.) Were you trained to use the Corporate Information Database or Flo?	Yes
9.) If you answered Yes to question 8, what method of training did you use?	Printed Manual
Other from Above:	
10.) Did you think the method used to train you was the best available training method?	Yes
11.) If you answered No to question 10, what method of training would you rather have had available?	
12.) Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo?	Yes
13.) If you answered Yes to question 12, please describe a specific issue you have encountered when using one of these systems.	
Some documetns seem to be too large to load as a single item and have to be split in half System seems a bit 'fussy' about what the names it will accept	
14.) List three improvements you would like to see made on the Corporate Information Database or Flo.	

1.) I understand soe staff outside UK offic experience problems accessing the CID, I would like to see that improved 2.) 3.)	
15.) Department: Human Resources	
16.) How would you rate your general ability to use a coputer?	Average
17.) How would you rate your skill with the Corporate Information Database or Flo?	Above Average
18.) Do you have any physical condition that may hinder your work? If so can you describe it?	no
19.) Do you hold a paid position or do you volunteer at Arthritis Care? If you are a volunteer, how many hours do you typically work? **Hours:**	Paid Employee 35

E.2 Statistics

Total Survey Returns	35
How often do you use the Corporate Information Database or Flo? (1-5)	Average: 1.68571428571429 Closest Value: Weekly
Do colleagues in your department use the Corporate Information Database or Flo? (Yes / No)	Yes: 30 No: 1
Were you trained to use the Corporate Information Database or Flo?	Yes: 31 No: 4
If you answered Yes to question 7, what method of training did you use?	Workshop or Lecture: 3 Online Manual: 1 Printed Manual: 9 Personal Assistance: 1 Other: 0
Did you think the method used to train you was the best available training method? (Yes / No)	Yes: 15 No: 1
Have you encountered glitches, bugs or technical difficulties while using the Corporate Information Database or Flo? (Yes / No)	Yes: 29 No: 3
How would you rate your general ability to use a computer? (1-5)	Average: 3.4 Closest Value: Average
How would you rate your skill with the Corporate Information Database or Flo? (1-5)	Average: 2.82857142857143 Closest Value: Average

Employment Status:	Paid Employee: 32 Volunteer: 0
Total Hours:	476

F.1 CID Champion

Arthritis Care

Job title:	Corporate Information Database Champion
Location:	Respective Office of Employment
Reports to:	Respective Department Head
Direct Reports	N/A
Grade/Salary	N/A

1. **Purpose of the Job**
   - Ensure that every employee in the office or respective branch has the ability if necessary to use the CID well enough to complete necessary tasks when applicable.

2. **Principal Accountabilities**

Principal Accountabilities	How they are achieved/measured
1. Training of Employees	• Hold CID training sessions for new employees i.e. workshops/lectures • Have personal training times available • Answer questions employees may have about CID
2. Keep employees up-to-date with new features and train them on using them	• If new features are added learn how to use them, then demonstrate how to use the feature to all other employees that need to use it

3. Police Discussion Boards	• Make sure they are being used for intended purpose • Keep them current by deleting old news
4. News Items	• Keep new items current by posting new news when necessary • Delete old news items • Make sure what is posted is an appropriate news items
5. CID Glitches	• Have all employees report glitches or bugs to you • Report them to CID system manager* (*To be appointed)
6. Replacement	• Upon leaving the company, one must train their successor so there is always a CID champion at the office

F.2 CID Administrator

Arthritis Care

Job title:	Corporate Information Database Administrator
Location:	UK Office
Reports to:	Directorate of Resources
Direct Reports	Elizabeth Lendering
Grade/Salary	N/A

3. **Purpose of the Job**
   - Ensure that every employee in the office have a working and up-to-date account for the CID.
   - Responsible for adding department / regions.
   - Ensure that the CID is not misused.
   - Keep the CID consistent and usable.

4. **Principal Accountabilities**

Principal Accountabilities	How they are achieved/measured
1. Keep employee accounts up-to-date.	• Create / delete accounts as employee joins or leaves. • Change permissions for users when applicable.
2. Adding or removing department / regions as suited for Arthritis Care.	• Add / remove the appropriate sections via the administration tools.
3. Ensure that the CID is not misused.	• Make sure the CID and its features are being used for intended purpose • Keep news items up-to-date.
4. Keeping the CID consistent.	• Ensure files in the document repository are named correctly according to the naming conventions. • Remove old and outdate files to clear up space in the CID

6. Replacement	• Upon leaving the company, one must train their successor so there is always a CID administrator.

F.3 CID Programmer

Arthritis Care

Job title:	Corporate Information Database Programmer
Location:	UK Office
Reports to:	Directorate of Resources
Direct Reports	CID Administrator
Grade/Salary	N/A

5. **Purpose of the Job**
   - Fix bugs as they are found in the CID.
   - Add new features to the CID.
   - Ensure that changes to the CID are reflected correctly on all platforms.
   - Documentation of the CID code.

6. **Principal Accountabilities**

Principal Accountabilities	How they are achieved/measured
1. Fixing bugs as they are found.	• Finding the causes of errors and debugging them.
2. Adding new features to the CID.	• Ask for approval from CID administrator for new features. • Once approved, implement the feature after appropriate testing.
3. Ensure that changes reflect correctly on all platforms.	• The designs must meet minimum requirements of screen resolutions, colours and loading times. • The CID must work in the same manners in all web browser clients (i.e. Internet Explorer and Mozilla)
4. Keep correct and up-to-date documentation and training manuals of the CID.	• Update documents inside the CID codes as changes are implemented. • Update the training manual to reflect CID changes.

Appendix G: Flo and RANDi Research Memo

Arthritis Care has created several database systems with the goal of integrated all organisation information systems in a single, central database. The first system to attempt this was the Arthritis Care Information Database (ACID). ACID was the foundation for both the RANDi system, which is a series of databases that the regional offices, particularly the Central England, North England, and South West England offices, have developed to integrate each of their databases in a centralized system. A previous project group also worked with the UK Office of Arthritis Care to develop the Flo database, which was intended to provide regional offices with access to Arthritis Care's large Saturn database of subscriber, financial, and other organisational data.

The RANDi project has expanded beyond the Central England Office, where it began, to two other regional office, mentioned above. Demonstration copies of the RANDi database have been sent to all other regional offices. A copy of the RANDi database from the Central England Office is attached to this report as a digital appendix (Appendix N). Information Service Managers at the regional offices are enthusiastic about the RANDi project and are currently using it as their primary, local information system.

The Flo database, developed by the previous project group, has met with limited approval within the organisation. Many employees do not know what Flo is, or what it is intended to do. Others were never given access to the system. According to John McGregor, the Information Service Manager for the Central England Office, Flo has not received data from the Saturn database since the project group was last working on the system, a year before the submission of this report. Elizabeth Lendering, Arthritis Care's

Director of Resources, is able to use Flo on a limited basis and must delete all previous data manually, before receiving new data from Saturn. It is possible that those in the regional offices, who do not have permission to remove data from Flo, are not able to see new Saturn data for this reason. In any event, Flo is used sporadically, if at all.

Our group recommends that future project teams interested in further developing these systems begin by travelling to the regional offices and promoting use of the RANDi database, while fixing the Flo database at the UK Office. When RANDi has been distributed to all regional offices, Flo can be redesigned to integrate the RANDi and Saturn databases, making sure that information is the same in both systems. In is chiefly important, in this process, that Flo be designed to update a table in either database when that table has been altered in one of the system. User access privileges will need to be set up to manage these updates.

Groups should also be aware that these systems are a political issue within the organisation. Regional offices want to control their local data that informs them of contact information for their volunteer network, or people in the region who have called the office for assistance. The regional offices are in the best position to update this information, since they process changes to it on a daily basis and forcing the UK Office to handle all of these updates would be overwhelming. At the same time, the UK Office uses Saturn for more extensive purposes than the regional offices use the RANDi system. Much of the data on Saturn should remain under the direct purview of the UK Office. Any project team working on these issues will need to find the balance between providing proper control and allowing adequate communication between offices.

Appendix H: Interview Protocol

1. Are you required to share information within your office or to other offices? If so, how do you share this information?

2. Do you know what the CID and Flo are?

3. Do you use the CID? If not, why not?

4. Have you encountered problems with the CID? If so, please explain these problems.

5. Do you have any suggestions for CID improvements?

6. Do you use Flo? If not, why not?

7. If Flo does not work for you, what are the specific problems you have encountered while trying to use it?

8. Are there people in this office that you would consider CID experts?

9. What methods of training would you find most suitable for the CID?

10. We are attempting to implement a training program with at least one person in each office who understands the CID and appoint that person as a guide for new employees or as a person to help employees who are unfamiliar with the CID. Is there anyone interested in volunteering for this position?

Questions specific to John McGregor and Nicki Hastie

1. How did the design for Flo originate? Is it true that Flo is similar to RANDi?

2. How often do you use Flo?

3. Are there some parts of RANDi that you would like to incorporate within Flo?

4. Are there problems with Flo? What are these problems?

Appendix I: Nicki Hastie Interview Information

1. **Are you required to share information within your office or to other offices? If so, how do you share this information?**

Ms. Hastie said she does share information, mostly through GroupWise, but occasionally through the CID.

2. **Do you know what the CID and Flo are?**

Ms. Hastie said she does know what the CID and Flo are.

3. **Do you use the CID? If not, why not?**

Yes, Ms. Hastie said she uses it weekly.

4. **Have you encountered problems with the CID? If so, please explain these problems.**

Some problems Ms. Hastie had were the lack of current information on the CID, dead links, such as the discussion board, as well as incorrect directory information. She also found searching for documents was difficult.

5. **Do you have any suggestions for CID improvements?**

Ms. Hastie told us she would like to see a naming standard implemented so when looking for documents they can be identified. Also a search tool for finding documents would be useful. Another suggestion is integrating communication options like the discussion

board and having new news items posted regularly so she knows what is going on at Arthritis Care.

6. Do you use Flo? If not, why not?

Ms. Hastie said she does not use Flo because there is no current information available there.

7. If Flo does not work for you, what are the specific problems you have encountered while trying to use it?

Ms. Hastie's problem with Flo was the lack of updated information. She also noticed Flo never pulled current data from Saturn and any information it does have is not reliable and cannot be used.

8. Are there people in this office that you would consider CID experts?

Ms. Hastie also told us about Margo Basri and how often she used the CID and how well she uses it.

9. What methods of training would you find most suitable for the CID?

Ms. Hastie said she would like to see more of a formal method of training than the organisation just handing new employees a manual and having them learn on their own. She suggested workshops for groups of new employees.

10. We are attempting to implement a training program with at least one person in each office who understands the CID and appoint that person

as a guide for new employees or as a person to help employees who are

unfamiliar with the CID. Is there anyone interested in volunteering for

this position?

Ms. Hastie, like Mr McGregor, nominated Margo Basri as the CID Champion.

Questions specific to John McGregor and Nicki Hastie

1. **How did the design for Flo originate? Is it true that Flo is similar to**

   RANDi?

Ms. Hastie was apart of the Flo development with the 2003 IQP group and she based the

design and function of Flo on the RANDi design.

2. **How often do you use Flo?**

Ms. Hastie said she used it once or twice but once she realized it stopped working she

stopped using it.

3. **Are there some parts of RANDi that you would like to incorporate within**

   Flo?

Ms. Hastie like Mr McGregor would like to see RANDi at all regional offices and then

integrated into the UK office. From here take all of RANDi and make it apart of Flo.

4. **Are there problems with Flo? What are these problems?**

Ms. Hastie agreed with Mr McGregor in that Flo has never worked as it was intended to

by failing to constantly pull updated data from Saturn.

Appendix J: John McGregor Interview Information

1. **Are you required to share information within your office or to other offices? If so, how do you share this information?**

Mr. McGregor stated that he does share information with the other offices but mainly through GroupWise.

2. **Do you know what the CID and Flo are?**

Mr McGregor said he was aware of what the CID and Flo are.

3. **Do you use the CID? If not, why not?**

Yes, Mr. McGregor said he uses it monthly.

4. **Have you encountered problems with the CID? If so, please explain these problems.**

Some problems Mr. McGregor encountered was the lack of current information on the CID, in the areas of news, financial updates, but did mention he accessed HR policies most because they were posted regularly.

5. **Do you have any suggestions for CID improvements?**

Mr McGregor stated, " One of the problems this organisation has is communication." He would like to see updated news items, discussion boards, and a more versatile CID. With improvements such as these, communication should improve.

6. **Do you use Flo? If not, why not?**

According to Mr McGregor, he is not using Flo nor is anyone in the office.

7. **If Flo does not work for you, what are the specific problems you have encountered while trying to use it?**

Mr McGregor's problem with Flo was the lack of updated information. It never pulled current data from Flo and any information it does have is over a year old.

8. **Are there people in this office that you would consider CID experts?**

Mr McGregor said that there is one employee, Margo Basri. She uses the system often and can get what she wants from the CID.

9. **What methods of training would you find most suitable for the CID?**

Mr McGregor told us that he would like to see an up to date on-line training manual that would not take as much time to access. Also, he would like someone to contact if there are any questions about the CID.

10. **We are attempting to implement a training program with at least one person in each office who understands the CID and appoint that person as a guide for new employees or as a person to help employees who are unfamiliar with the CID. Is there anyone interested in volunteering for this position?**

Mr McGregor nominated Margo as the CID Champion.

Questions specific to John McGregor and Nicki Hastie

1. **How did the design for Flo originate? Is it true that Flo is similar to RANDi?**

From what Mr McGregor stated, before Flo there was Arthritis Care Information Database or ACID and from there, RANDi was developed to have one set of core data for all offices. Flo was developed from RANDi by a previous IQP group with help of Nicki Hastie.

2. **How often do you use Flo?**

Mr McGregor never uses Flo.

3. **Are there some parts of RANDi that you would like to incorporate within Flo?**

Yes, Mr McGregor said he would like to see RANDi at all regional offices and then integrated into the UK office. From here take all of RANDi and make it apart of Flo.

4. **Are there problems with Flo? What are these problems?**

According to Mr McGregor, Flo has never worked as it was intended by failing to pull updated data from Saturn.

Appendix K: Jayne Dunn Interview Information

1. **Are you required to share information within your office or to other offices? If so, how do you share this information?**

Ms. Dunn said she does share information exclusively through GroupWise to all of Arthritis Care.

2. **Do you know what the CID and Flo are?**

Ms. Dunn like Ms. Robson said she does know what the CID and Flo are.

3. **Do you use the CID? If not, why not?**

No, Ms. Dunn said she does not use it.

4. **Have you encountered problems with the CID? If so, please explain these problems.**

Ms. Dunn encountered similar glitches as Ms. Robson, access problems, document searching, and going back to previous pages once in a document search.

5. **Do you have any suggestions for CID improvements?**

Ms. Dunn like Mrs Robson told us she would like to see a naming standard implemented so when looking for documents they can be identified. Also making standard forms available on the CID would be helpful. Another feature mentioned was personal document saving on the CID. If she were working from home and need access to the file while at work or the other way around, how could that option included into the CID? Since it is such a large region, the commute cannot be made

everyday by all and having this ability would help. The last suggestion was having all home workers the ability access to the CID as most of the employees that are affiliated with their office are home based.

6. **Do you use Flo? If not, why not?**

Ms. Dunn said she does not use Flo and never has.

7. **If Flo does not work for you, what are the specific problems you have encountered while trying to use it?**

Ms. Dunn never used Flo so she could not comment.

8. **Are there people in this office that you would consider CID experts?**

Ms. Dunn informed us about Ms. Jane Robson and her expertise on the CID.

9. **What methods of training would you find most suitable for the CID?**

Ms. Dunn said like Ms. Robson stated she would like a formal training method implemented at Arthritis Care because, she and her staff received their training from the manual given to all employees.

10. **We are attempting to implement a training program with at least one person in each office who understands the CID and appoint that person as a guide for new employees or as a person to help employees who are unfamiliar with the CID. Is there anyone interested in volunteering for this position?**

Ms. Dunn nominated Jane Robson as the CID Champion.

Appendix L: Jayne Dunn Interview Information

1. Are you required to share information within your office or to other offices? If so, how do you share this information?

Ms. Robson said she does share information exclusively through GroupWise to all of Arthritis Care.

2. Do you know what the CID and Flo are?

Ms. Robson said she does know what the CID and Flo are.

3. Do you use the CID? If not, why not?

"Yes I do use CID but only for accessing HR and H&S documents which are fairly comprehensively stored on it and for trying to trace phone numbers of people at other AC offices."

4. Have you encountered problems with the CID? If so, please explain these problems.

Ms. Robson encountered glitches in the past such as access problems, document searching, and going back to previous pages once in a document search.

5. Do you have any suggestions for CID improvements?

Ms. Robson told us she would like to see a naming standard implemented so when looking for documents they can be identified. Also making standard forms available on the CID would be helpful.

6. **Do you use Flo? If not, why not?**

"I have explored FLO but not used it because the information contained therein is incomplete and inaccurate, as it does not download from Saturn in a complete way."

7. **If Flo does not work for you, what are the specific problems you have encountered while trying to use it?**

Ms. Robson never used Flo so she could not comment.

8. **Are there people in this office that you would consider CID experts?**

Ms. Robson informed us about Ms. Jayne Dunn and her expertise on the CID.

9. **What methods of training would you find most suitable for the CID?**

Ms. Robson said she would like a formal training method implemented at Arthritis Care because, she and her staff received their training from the manual given to all employees.

10. **We are attempting to implement a training program with at least one person in each office who understands the CID and appoint that person as a guide for new employees or as a person to help employees who are unfamiliar with the CID. Is there anyone interested in volunteering for this position?**

Ms. Robson nominated herself as the CID Champion because she is office based.

Appendix M: Jane Robson Interview Information

1. **Are you required to share information within your office or to other offices? If so, how do you share this information?**

Ms. Robson said she does share information exclusively through GroupWise to all of Arthritis Care.

2. **Do you know what the CID and Flo are?**

Ms. Robson said she does know what the CID and Flo are.

3. **Do you use the CID? If not, why not?**

"Yes I do use CID but only for accessing HR and H&S documents which are fairly comprehensively stored on it and for trying to trace phone numbers of people at other AC offices."

4. **Have you encountered problems with the CID? If so, please explain these problems.**

Ms. Robson encountered glitches in the past such as access problems, document searching, and going back to previous pages once in a document search.

5. **Do you have any suggestions for CID improvements?**

Ms. Robson told us she would like to see a naming standard implemented so when looking for documents they can be identified. Also making standard forms available on the CID would be helpful.

6. **Do you use Flo? If not, why not?**

 "I have explored FLO but not used it because the information contained therein is incomplete and inaccurate, as it does not download from Saturn in a complete way."

7. **If Flo does not work for you, what are the specific problems you have encountered while trying to use it?**

Ms. Robson never used Flo so she could not comment.

8. **Are there people in this office that you would consider CID experts?**

Ms. Robson informed us about Ms. Jayne Dunn and her expertise on the CID.

9. **What methods of training would you find most suitable for the CID?**

Ms. Robson said she would like a formal training method implemented at Arthritis Care because, she and her staff received their training from the manual given to all employees.

10. **We are attempting to implement a training program with at least one person in each office who understands the CID and appoint that person as a guide for new employees or as a person to help employees who are unfamiliar with the CID. Is there anyone interested in volunteering for this position?**

Ms. Robson nominated herself as the CID Champion because she is office based.

Appendix N: Elizabeth Lendering Interview Information

1. **How did the design for Flo originate? Is it true that Flo is similar to RANDi?**

Flo was designed by a number of staff according to Ms. Lendering, especially Jo Brackenbury and Nicki Haste. Ms Brackenbury head of support services step up the fields that Flo would access from Saturn.

2. **How often do you use Flo?**

Ms Lendering told us that she does us Flo on a regular basis.

3. **Are there some parts of RANDi that you would like to incorporate within Flo?**

Ms Lendering informed us that Flo should pull certain from certain fields the RANDi and that is the part she would like to incorporate.

4. **Are there problems with Flo? What are these problems?**

Problems are that only certain regional administrators had access to Flo according to Ms. Lendering. It was for test purposes that only few were granted access. The regional administrators were to test the system, and once the system was proven to work they would grant all employees access. The system was not tested as it should have been by the regional administrators, resulting in Flo never going live. Other problems with Flo as Ms Lendering recalled were, Flo not pulling current information from Saturn and getting new data would require someone to physically dump all old data to make room for the new updated data.

Appendix O: Contents of Attached Digital Appendix

Resource Name	Description	Directory Path
CID code	This is a snapshot of the entire CID as of February 26th, 2004. While the code will not run off the CD, the CID can be accessed by going to http://www.cid.ac/ and logging in as user "demo" with password "demo".	\CID_Codes\
Final Presentation	This was our final presentation to the Arthritis Care UK Office.	\Presentations\ Final_Presentation_Feb26. ppt
Training Presentation	This PowerPoint presentation can be used as a training tool for the CID. It is also located on the CID under the CID Champion document repository.	\Presentations\ Training_Presentation.ppt
RANDi Database	This database is used by several regional offices. Complete documentation is also included in the file: RANDi Manual Central England.doc.	\RANDi\
Changing department structure on the CID	This document outlines the steps required to add a new department / region on the CID.	\How to add a new section on the CID.txt
Project Proposal	The proposal document for this project is included in the attached compact disk.	\AC CID Redesign Proposal Dec 17.doc
Final Report	A copy of this document is also available on the compact disk attached.	\AC CID Redesign Final Report Feb 27.doc