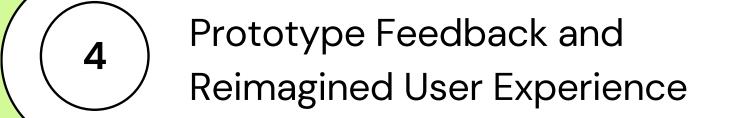




Lesson!







Introducing

Stacy

"I knew they must have called my name, but how was I supposed to know? I just sat there and waited, hoping someone would notice."

"The doctor kept talking like I could hear perfectly.
I had to keep guessing what he was saying."



Current Scenario/Past Experience

Stacy Journey Map	Arrival at ER	Waiting Area	Journey Phase	Journey Phase	Journey Phase
User Actions (Activities)	Arrives with husband, isn't allowed in	Waits without knowing her name was called	Talks to doctor, Red struggles to understand	eives verbal-only discharge instructions	Reflects on her experience, avoids returning
Touchpoints (Interaction Points)	Front desk, intake nurse	Waiting room announcements	Doctor consultation	Discharge nurse	No contact from hospital
Sentiments (Thought Bubbles)	"I assumed my husband would be with me"	"I just sat there and waited"	"I had to keep guessing what he was saying."	"I nodded and walked out"	"I don't want to go back unless I have to."
	ANXIOUS INVISIBLE				
	HELPLESS OVERWHELMED				
Emotions (Mood Meter)					
Possible Solutions (Opportunities to improve the experience)	- Create accessibility screening at check-in - Allow communication support persons	Train staff to monitor non-responses actively - Don't assume silence = absence	- Brief providers on patient accessibility - Offer written instructions	- Provide written discharge instructions automatically - Ask patient preference	- Follow-up via call or SMS - Create anonymous feedback for accessibility

Insights from Research and Interviews



ER environments are chaotic and overwhelming for patients with hearing loss, making communication difficult and leading to unnecessary delays.

Insight 2

Patients with hearing loss may feel marginalized during the triage process, as they often have to advocate for their needs in an environment where their accessibility needs are not immediately apparent. This can result in them being overlooked or not receiving timely attention.

Insight 3

Medical staff are often unaware of the unique challenges hearing-impaired patients face, such as how hearing aids don't work well in noisy environments.

Insight 4

Hearing aids are ineffective in the noisy ER environment, leaving patients with hearing loss unable to understand critical medical information.





STORYBOARD

Pre-Visit



Erin fills out a short digital form from her phone on the hospital website: Symptoms ,Hearing needs ,Preferred communication style: "written instructions + visual cues"
This info is sent to the staff before she arrives.

Triage



At check-in, Erin is quietly given a purple wristband that signals her communication needs to all ER staff.

Waiting Room



Erin doesn't have to guess or worry about missing her name being called.

STORYBOARD

Consultant Room



Erin and the doctor are in a quiet, softly lit consultation room. She is handed a small kit containing: A visual symptom chart, dry-erase board, pre-written questions card, and a tablet.

Discharge



The doctor gives Erin: A printed summary of the visit (written in plain language) Visual aftercare instructions and a follow-up feedback QR code. Erin leaves feeling in control, respected, and not "too much" for the system.

