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Title

(Maximum of 15 words)

Simultaneous practices in developing eHealth: the patient journey as outcome and innovative instrument

Author(s) details

First name(s) followed by surname(s); organization/affiliation(s); e-mail address; and if possible, Twitter and/or LinkedIn account:

Loes Bulle – Smid, Research Group IT Innovations in Health Care, Windesheim university of applied sciences; lj.bulle@windesheim.nl, LinkedIn; Loes Bulle-Smid; Twitter @loessmid

Annemarie van Hout, Research Group IT Innovations in Health Care, Windesheim university of applied sciences, a.van.hout@windesheim.nl, LinkedIn; Annemarie van Hout

Marloes Bults, Research Group Technology, Health & Care, Saxion university of applied sciences, m.bults@saxion.nl, LinkedIn; Marloes Bults

Marieke Hettinga, Research Group IT Innovations in Health Care, Windesheim university of applied sciences, m.hettinga@windesheim.nl, LinkedIn Marieke Hettinga; Twitter @marikehettinga

Presenting author:

Loes Bulle

Abstract

(Maximum of 500 words)

Background:

Telemonitoring is gaining attention as a way to improve care for patients with chronic heart diseases. A successful project on monitoring heart patients at home has turned into a regular service. In our research project, the objective was to gain insight in patients' and professionals' experiences and knowledge when using telemonitoring. Heart Care at a Distance, including technology, ways of working, protocols, support and logistics, was developed by Hartcentrum Isala and the company HC@home. During development the involved professionals (care, IT, logistics) developed along, but the acquired knowledge and experience has remained implicit. For successful professionalization and upscaling of the service these must be made explicit. Our research aimed at both adding to the quality of the service as to education of professionals.

Methods:

The project had an iterative approach in which different qualitative methods were used. First we observed regular care by joining the professionals and patients during the meetings in the hospital. We

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interviewed patients at home and asked them to use the cultural probe. By inviting them to take pictures, keep a diary, make drawings or 'send' postcards, we gathered rich data on how heartcare at home influenced their lives. Then we discussed the contents of the cultural probe in a second interview. We also interviewed the professionals we further deepened the analysis of the observations and cultural probes. The care professionals were involved in dialogues that were used as a part of our analysis.

Findings:

First, we drew a patient journey of the 'Heartcare at Home' - service. Meanwhile we noticed how their journey was influenced by the new knowledge care professionals gain while monitoring patients at a distance. The dialogues we had with the professionals on the data we gathered, showed us how professionals' knowledge and experience helped them to deal with all the individual differences in patient care. This knowledge became clear while discussing the hindrances and choices they encounter. We called this 'issues' and embedded them in the patient journey. The second result of the project consisted of three profiles for the professionals working with Heart Care at a Distance: nurse specialist, physician and IT support. These profiles represent the tasks and skills required for these (care) professionals which can serve the purpose of validation of portfolios of potential co-workers to assess their required education.

Conclusion:

The patient journey map is an instrument for the professionals to discuss the facilitating and impeding factors of the monitoring service on their daily work processes and other factors that have consequences for the patient. The map is provided with issues that can be used in the discussion and in the development of the service. These arguments are linked to items on the patient journey. Competence profiles were conducted for professionals working with heartcare at a distance. These profiles include specific competences such as motivational interviewing to promote the patients' lifestyle at a distance. With the use of these profiles 'Heart Care at a Distance' can deploy targeted employees who are ready to scale up this care.

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Simultaneous practices in developing eHealth: the patient journey as outcome and innovative instrument with participation of care professionals in the analysis.