ABSTRACT

There continues to be no lack of perceived innovation in digital health technologies. From virtual care to chronic disease management through the use of common ubiquitous consumer electronics to more advanced wearables, there appears to be great promise for a wide range of applications for patients and providers alike.

Yet the adoption and uptake continue to be poor, with a paucity of evidence that digital health interventions make any difference at all, and may be just a distraction and creating a significant opportunity cost. The blame for this poor adoption and uptake often lies at the feet of the health system itself and not the technology innovators, with care providers, administrators, and policy makers considered luddites that cannot embrace the change that advanced technology brings. This couldn’t be further from the truth though, as the health system adopts the most advanced technologies in the diagnostic and therapeutic realms.

There however remains a design gap that does not consider the complexity of delivery of care as well as its heterogeneity. This design gap is a blind spot for most technology innovators in digital health and otherwise, that limits adoption, but also contributes to a reduced utility of the technology and a poor user experience. Contemporary design methods of framing products as services are one way to address this gap. A case study in the design, development, and implementation of a heart failure program facilitated through digital health will be presented.

Lastly, the appropriateness of evaluation methods in digital health will be challenged, whereby a platform for rapid and novel study designs can be crafted to match the intervention most appropriately.

New dimensions of design for user experience and evaluation in digital health

SPEAKER

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