# User-Centered Mobile Application Prototype for Lower-Limb Fracture Care

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# **Background**



- More than 10 million Americans aged 65 and older have osteoporosis, expected to increase to 17 million by 2030
- Osteoporosis is a leading cause of fragility fractures with increasing cases



- A gap in the continuity of care (Hospital → Skilled Nursing Facility (SNF) → community)
- Variation in the standard of care for patients with LLF in SNF



 Need for evidence-based, coordinated care models to support reduce the risk of future fractures as residents transition from SNFs back to the community.

## OPTIONS Study (OsteoPorotic fracTure preventION System) NE



 Goal: Develop and provide an evidence-based, trimodal intervention for older adults with LLF to improve bone health and prevent future fractures



**Exercise Programs** 



**Healthy Nutrition** 



Bone health medications Management



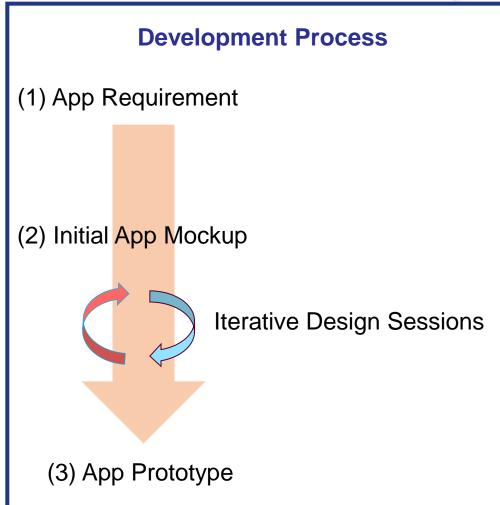
- 1. Clinical decision support
- 2. Clinician/staff education
- 3. Resident and care partner resources (*Mobile Application* & Workbook)



#### **Methods**



- Design Science framework :
  - Three iterative and interrelated cycles:
    - Relevance Cycle: Identify real-world problems and stakeholder needs
    - Rigor Cycle : Incorporate scientific knowledge and domain knowledge
    - Design Cycle: Iteratively create and refine the technological artifacts
  - Integrates scientific knowledge, clinical domain expertise, and end-user needs to develop user-centered app
- Study team: Multi-disciplinary teams
  - Exercise/ Nutrition/ Bone health medication team
  - App developer
  - Human factors expert



## **Development Process**

Physical Activity for Fracture association between Access to Bone Health nutritional interventions and Medications by Older Patients With Prevention in Older Adults **Scoping Reviews** Scientific Knowledge fractures in elderly patients Osteoporosis in the USA with Osteoporosis **Professional Stakeholders** Interviews with SNF clinicians Domain Knowledge **Council Meeting** Patient Stakeholders **End User Needs Council Meeting** (1) Develop App Requirement **Previous Study** eSTEPS App App developer (ZCO) (2) Develop Initial App Mockup Patient/Professional App developer (ZCO) Stakeholders Council Meeting Design Human factors expert Sessions **Patient Operation Meetings** 

Nutrition :

Discover the

**Exercise:** 

**Medication:** Barriers and Facilitators

Exercise

and

(3) OPTIONS App Prototype

#### Results

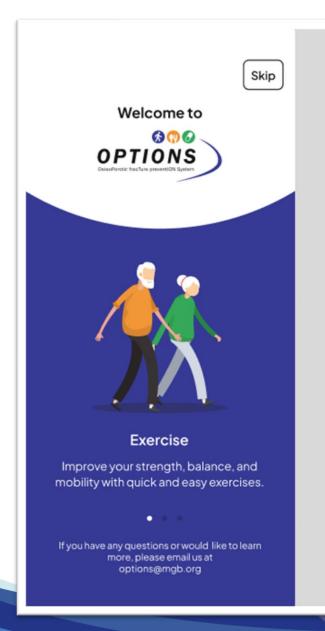


Domain	App Requirements
Exercise	<ol> <li>Assess the user's health status.</li> <li>Provide a tailored exercise program according to the health status (e.g., weight-bearing status, exercise intensity, exercise type).</li> <li>Offer an exercise program with videos and handout materials for easily follow-along at home environment.</li> </ol>
Nutrition	<ol> <li>Track users' weight-loss trends and provide tailored education accordingly.</li> <li>Screen users' nutritional status and provide customized education accordingly.</li> <li>Assess users' eating habits and offer tailored education materials according to their scores.</li> </ol>
Bone Health Medications	<ol> <li>Provide education sessions (e.g., about osteoporosis, different types and side effects of bone medications etc.).</li> <li>Implement a reminder function for bone health medication.</li> <li>Assess the risk of another fracture.</li> </ol>

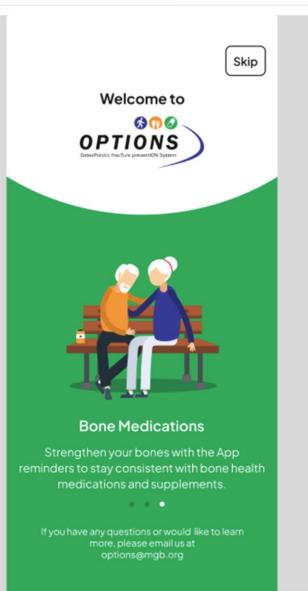
# Summary of feedback from user-perspective

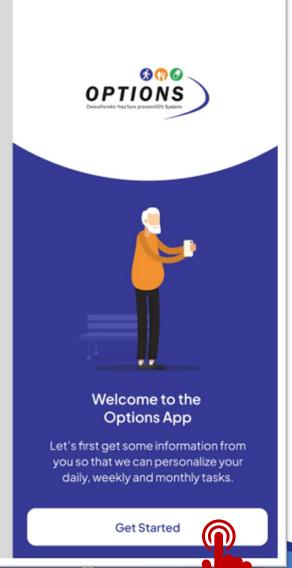
- Ensure the app is simple and user-friendly
- Standardize the order and color coding for three key domains
- Aim for reading level equivalent to third-grade student.
- Use short, clear, and positive language
- Simplify the app design
- Ensure the app is self-manageable
- Separate daily and weekly tasks
- Specify clear timeframes for task completion.
- Enhance user engagement
- Visualize task progress, personal health status, or improvements
- Provide rewards or acknowledgements upon task completion

# **OPTIONS Mobile App Prototype**







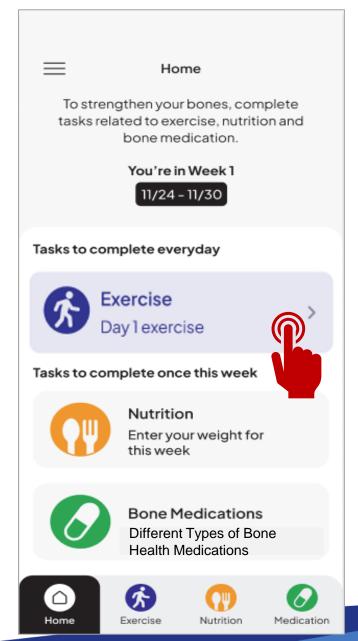


# **OPTIONS App Core Functionality**



- Task Management
- Personalization
- Motivational Content
- Progress Tracking

#### (1) Task Management

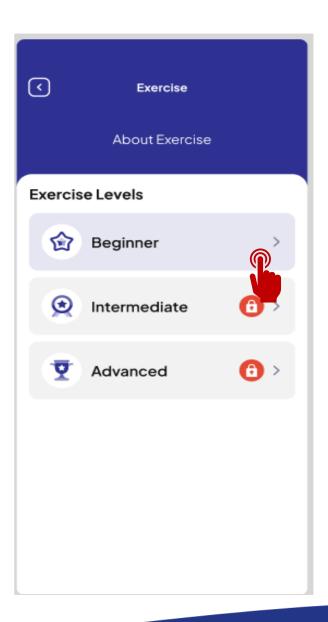




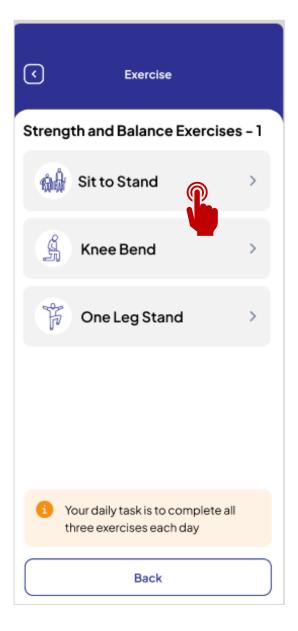
#### (2) Personalization



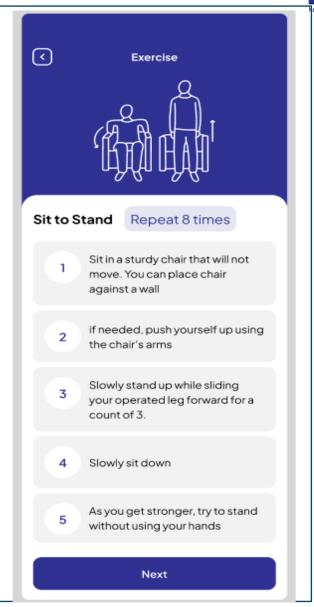
## **Exercise Levels**

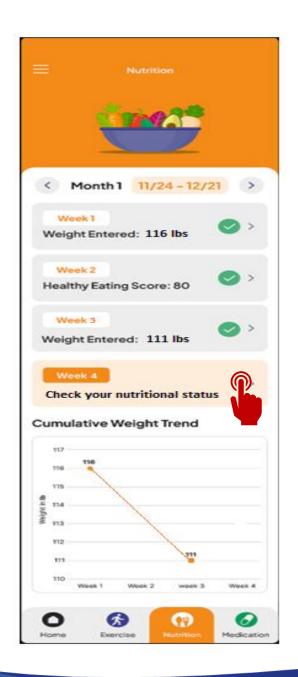


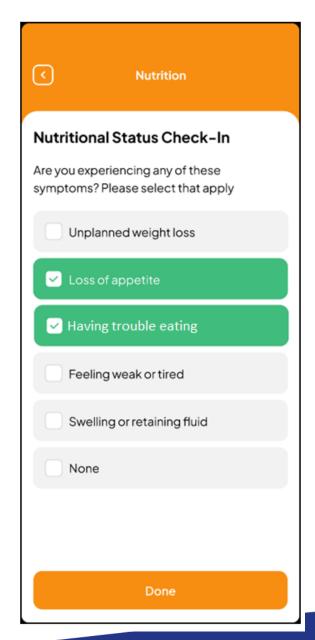
#### (2) Personalization

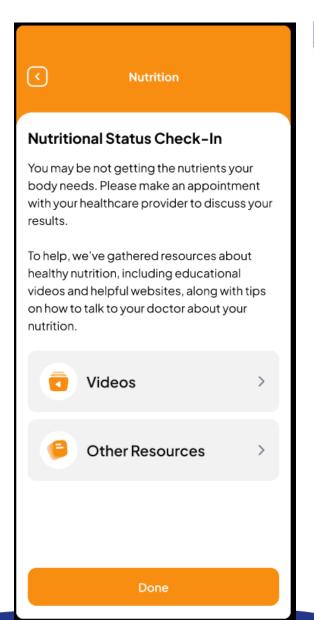








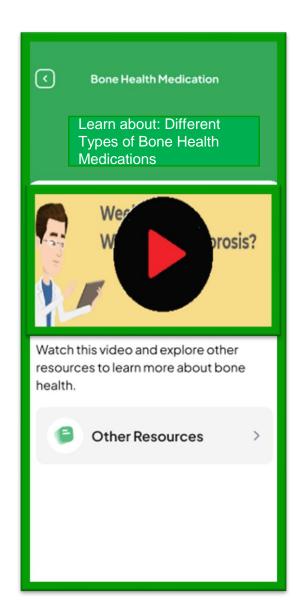


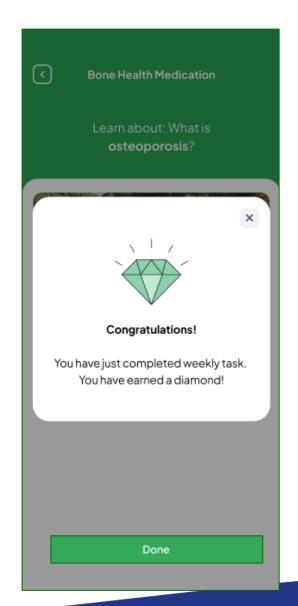




#### (3) Motivational Content



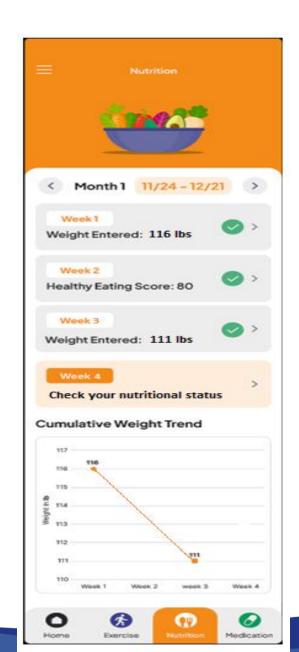






#### (4) Progress Tracking







## **Study Team**

NENIC
New England Nursing Informatics Consortium

- Brigham Women's Hospital/Harvard
  - Patricia Dykes MPI
  - Martie Carney Director of Patient Stakeholder Council
  - Min Kang Informatics Coordinator
  - Nancy Latham PT, Co-I
  - Stuart Lipsitz Sr. Biostatistician
  - Rodrigo Valderrabano Endocrinologist
  - Kumiko Schnock Project Director
  - Michael Sainlaire Data Manager
  - Alice Kim Research Assistant
  - Baris, Veysel Karani Research Fellow
  - Rosa Recio Visiting Researcher
- University of Maryland School of Medicine
  - Denise Orwig MPI
  - Ling Tang Project Coordinator
  - Jay Magaziner Director of Professional Stakeholder Advisory Board
  - Elizabeth Dennis Registered Dietician
  - Jason Falvey Physical Therapist
  - Tina Kramer-Merrikan Outcome Assessor

- Zco
  - Randy Peterson
  - Michael Menon
- Data Coordinating Center (Hebrew Senior Life/Harvard)
  - Thomas Travison Site-PI/Biostatistician
  - Alyssa Dufour Biostatistician
  - Ilean Isaza Program Manager
  - Dana Weisenfeld Statistician
  - Timothy Tsai— Software Engineer
- PointClickCare
  - Britton Wagner
  - Richard White
- University of Arkansas
  - Simon Mears- Orthopedist



# Thank you!

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