Research Deliverable

CSC 591 UX - Spring 2019

#digitalfamilyhistories, Optum Health

Team

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Client

Optum Health

Long term goal

Our long term goal is to design a digital family health history application that is:

- User-friendly and easy to use
- Capture all essential health data
- Focusing on younger and typically healthy individuals (14 - 40 years)
- Accessible to the population with low literacy

The solution will benefit the patients, health care providers as well as payers.

List of challenges

1. People are generally not comfortable with sharing their health history. What can be done to make them share more comfortably?
2. Many people have a fear that their family's health history may be used against them by payers. What can be done to make them believe that health history will be beneficial to them in the long term with their health and finances?
3. What can we do to make undereducated people aware of the importance of family history and make it easy for them to use the application?
4. Young and healthy people do not understand the value of family history. What can be done to make them understand the usefulness of family history?
5. Many people think it is just a waste of time. What changes can be done with the application, so it will not take more time to fill all the details?
6. Most applications don't engage people as they are not easy to use (forms are very long). How can we improve our application to make it more easy to use and engaging?

Experience map
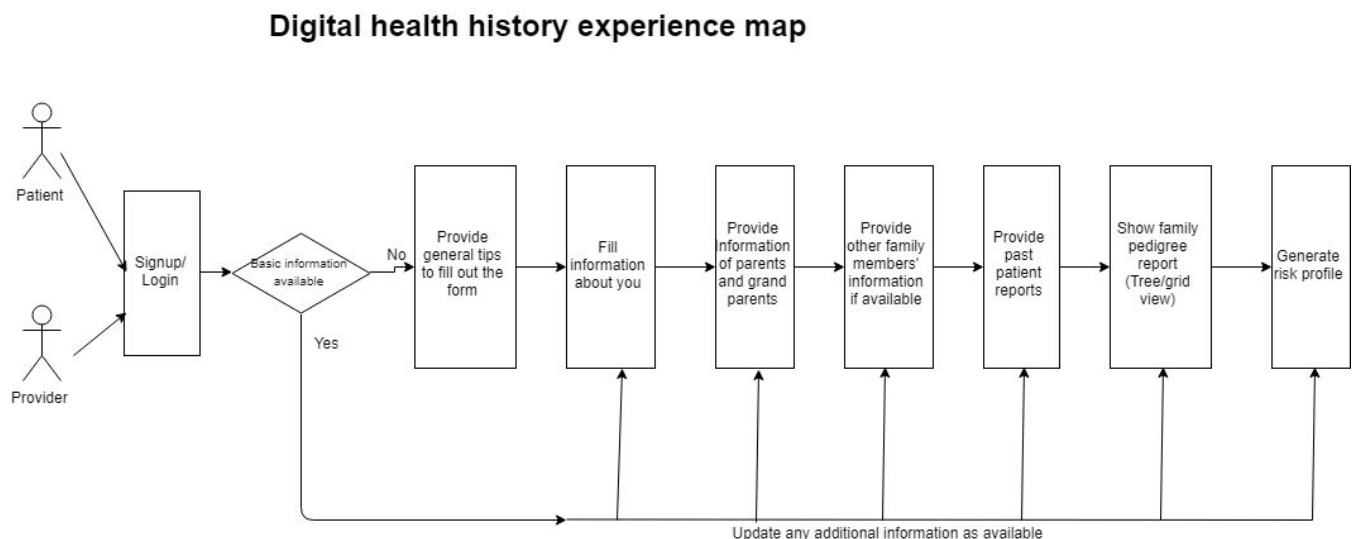
Original experience map can be found in the Appendix.

Expert notes

Our client for this project is Optum Health. We had our first meeting at Optum Health's Raleigh office. The meeting was attended by 8 stakeholders from Optum Health, UX project teams and Prof Watson. The meeting flagged off with representatives from Optum offering a high-level view of the matter and level setting between all people involved. The first few minutes of the session were extremely helpful for us in understanding the business aspect of family history.

As the meeting progressed, we discussed the following ideas:

Background and business use case
- What is family health history
- Family history is not usable if it doesn't have all information
- Its patient-generated health data
- Challenge: get the users to fill data as accurately as possible
- Beneficial to all: Insurance, care providers, patients

Barriers to collect family history
- Patient
  - User experience
  - Patient engagement
  - Education
  - Accuracy

- Provider
  - Time
  - Awareness
  - Complexity

MeTree - The current family history solution

Workflow
1. Patient encounter
2. Clinician provisions MeTree account
3. Patient accesses and fills out information
4. Patient and clinician collaborate on patient's MeTree report

Tool demo
- About you
- Patient and grandparents

- Other family members
- Patient reports
- Risk profile.
- FINISHED

Adam - Mentor for UX Team 1
- Actual work and application goals
- As the user is giving lots of information by spending time, what does he get back in the result
- Deliverable for the first phase: Process map

Jamaal - Mentor for UX Team 2
- Demo of the process map
- What's persona
- What's sitemap
- What's user flow

The meeting concluded with a Q&A session. Overall, it was a great introductory session for us to get started on the project. By the end of the session, we had a clear goal of the family history project.

Later on, we discussed the project internally in our group to brainstorm on all possible goals and creative ideas to solve the problem. The long term goals are outlined in the section above.

Raw meeting notes from the meeting can be found in the Appendix.

Problems/opportunities

1) Improve information collection system.
   a) Can we make a simpler and engaging application?
   b) Can we make the UI that is more friendly to various age groups and low literacy population?
2) Increase and improve patient data.
   a) How can we make people more aware of the importance of family history?
   b) Can we convince the patients that the information provided by them would not be misused?

Target

Our decider is Adam Nahirnyj(Senior UX Designer at Optum) and per his ideas, following are the key points to focus:

1. The patient must have a clear understanding of what the application is and the value it provides.
2. The application must be usable keeping in mind the user experience and allow the patient to enter their family health care data.
3. The application should focus on engaging younger and typically healthy individuals (14 to 40 years) that would usually ask the question: Why do I need this?
4. After using the application, the user should feel positive about their experience.
5. Patients with low literacy (fifth grade and above) should be able to use the application.

References

MeTree - https://metree.familyhistory.duke.edu/demo/login

Appendix

Raw meeting notes

UX Meeting 1

Location: Optum Health, North Hills, Raleigh
Time: 11.30 AM, 26th Feb 2019
Attendees: Optum Team, UX Team 1, UX Team 2, Prof Ben Watson

Meeting Notes:

Introduction
- Introduction of all team members of Optum and student teams

- Challenge: how to think creatively to collect family history data
- The creative part is important. How to make it really really easy for patients.
- Instead of form fields - what other ways of input can be used

- Why UX class
- How to present the data model for the business
- Understand people to improve/develop the data model
- Fitz law - even small things like changing the size of a button - matters. It can have a very big impact.
- Understand patients - have empathy
- Think about how the data relates globally
- Value of history is enhanced by how complete the history is

Level setting
- What is Family health history
- It is a record of health information about a person and his/her close relatives.
- A complete record is 3 generations of relatives.
- It is not usable if it doesn't have ALL information
- Its patient-generated health data
- Challenge: get the folks to fill data as accurately as possible

- Benefit: Insurance, care providers, patient. Benefits to all.

Barriers to collect family history
- Patient
    - User experience
    - Patient engagement
    - Education
    - Accuracy
- Provider
    - Time
    - Awareness
    - Complexity

Current solution - MeTree
- It's a detailed form. Some form field mandatory, most aren't
- About overview to granular information

Workflow
- Patient encounter - Clinician provisions MeTree account - Patient accesses and fill out information - Patient and clinician collaborate on patient's MeTree report

Tool demo
- MeTree - family history-based risk assessment tool
- Can collect complete data of around 117 diseases
- Assumes that you might not be digitally savvy
- A lot of personal information
- Retain all information in UX design
- Think about other tools [FHIR tool, family general, turbotax] and how easy it is to use them.
- Shows demo
- Info:
    - About you
        - Personal info
        - Latest lab result
        - Diet and exercise
        - Disease
    - Patient and grandparents
    - Other family members
    - Patient reports
        - After DONE - It creates Family Pedigree Report
        - It's a visual. Tree view, grid view.
    - Risk profile

- - - ■ Gives suggestions, screening.
    - ○ FINISHED
- Why not use the tool?
    - ○ 37% of Americans collected
    - ○ But only 3% collected
    - ○ 100% doctors say FH needed
    - ○ 17 tools available
    - ○ Even though FH is needed, not many tools available due to the complexity
    - ○ Even young people don't like to spend time on the tool, the same goes for doctors

Adam
- They explained the business use case [Olusoia]
- Adam will explain the actual work and application goals
- As the user is giving lots of information by spending time, what does he get back in the result
- Deliverable for the first phase: Process map

Jamaal
- Demo of the process map
- What's Persona
- What's sitemap
- What's user flow

Experience map