Problem

What’s wrong with existing depression care?
Only 50% of patients referred to a mental health professional follow through with the referral. Many do not have more than one visit. Proper depression care requires persistence, but the onus is placed on patients to follow up and maintain care.

Collaborative Integrated Care Model

Limitations to Model:
• Outreach can be ineffective.
• Patients may not seek help or disregard instructions.

Solution

Provide patients with a mobile app to manage their conditions between visits with their providers.

Goal &Visions:
• Proactive collaborative care between patients and care team.
• Facilitated communication.
• Prompted behavioral intervention.
• Dynamic feedback.
• Privacy and minimized imposition.

Features:
• Goal / symptom monitoring via survey.
• Personalized feedback and progress monitoring.
• Reminder of medications and instructions.
• Patient education.
• Customizable notification / goals / medical conditions.
• Troubleshooting.

Related Work

Several mobile apps provide reminders, track progress over time, and/or do rudimentary troubleshooting.

Limitations to Existing Apps
They don’t improve the connection between a patient and a care team and don’t allow care team additional info on the patient.

Future Plans

Week 1-2
Finalize data, conduct additional research, complete prototype, and design and set up database schema.

Week 3-6
User testing (mock-up), redesign prototype, and implement initial version with dummy data.

Week 6-9
User testing (initial version), finalize design, and implement final version with real data.

Data Architecture