Submission Id: 4064

Title

Patient, physician, and clinical pharmacist experiences piloting a remote patient monitoring platform for diabetes management

Priority 1 (Research Category)

Qualitative research

Presenters

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Abstract

Context: Approximately 1 in 10 people in the U.S. have diabetes. Meaningful lifestyle changes and coordinated medical interventions can prevent consequences of inadequately managed chronic disease. Today, many patient-facing smartphone apps assist with chronic disease management; however, few tools engage both patients and primary care team members effectively. Objective: We aimed to learn about patient and provider experiences related to usability and acceptability of a program designed to merge intra-visit and episodic EHR information by collecting remote patient monitoring (RPM) data through a patient-facing app (Allie) and organizing the data into a provider-facing website (Foresight). Study design and analysis: Qualitative study using thematic analysis. Themes identified from surveys and focus groups. Setting or dataset: Academic primary care setting from January to March 2022. Population studied: 1 primary care physician, 1 clinical pharmacist, and 5 patients with uncontrolled diabetes, defined as last hemoglobin A1c ≥ 8% (40% female, 60% male; age range 41-64 years old). Intervention: Patients received a blood glucose meter and downloaded and used Allie to help manage their diabetes for 2 months. Through the app, patients could access their personalized care plan and track their glucose levels. Providers used Foresight to monitor data that their patients recorded through Allie and adjust their care plan accordingly. Outcome measures: Measures include identifiable themes from patient survey responses to assess intra-visit self-management; provider survey responses to assess intra-visit management of patients; patient survey responses to assess feasibility/usability of Allie; provider survey responses to assess feasibility/usability of Foresight; focus groups to gather pilot feedback. Results: 4 of 5 patients reported they would likely use a program like Allie in the future, and 2 of 2 providers reported they would likely use a program like Foresight in the future. Patients expressed a desire for integration with CGMs, greater control over their care plans, and more positive reinforcement. Providers expressed a desire for integration with the EHR, alerts for acute changes, and prioritization of patient lists. Conclusion: We piloted a program that aims to merge RPM data and episodic EHR data to improve the care of patients with diabetes. Insights gathered will contribute to the limited research on the use of RPM platforms in chronic disease management.