Connect 2.0: Supporting Self-management and Collaborative Care

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Abstract. Improving self-management and collaborative care are high priority health policy goals. This can be effectively accomplished through support systems that assist patients and clinicians in symptom monitoring, illness management and information sharing. Connect 2.0 is a platform and language-independent support system designed for this purpose. In this demonstration we will show the Connect 2.0 application and present study results.

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1. Introduction

Self-management and the inclusion of patients’ symptoms and illness experiences into collaborative care are high priority health policy goals. This can be effectively accomplished through support systems that assist patients and clinicians in symptom monitoring, illness management and information sharing.

Connect 2.0 is a platform and language-independent support system designed for this purpose. It integrates core concepts from the Chronic Care [1] and Shared Decision Making [2] models to improve collaborative patient provider-partnerships, self-management, patient outcomes, continuity of care, lower utilization of specialist care and costs. Collaboration between primary and specialist care through the Connect 2.0 platform is supported by multi-functionality as well as mobile technology. Connect 2.0 allows patients to monitor and report their symptoms and health problems from home; provides them with individually tailored, just-in-time information and support to manage their symptoms and illness-related problems between treatments and during rehabilitation; offers personal mail-communication with health care providers who...
answer questions and concerns; and an e-group for exchanging experiences with other patients and peer support. Patients can access Connect 2.0 on different devices: from their cell phone at any location, or on a PC. The system is designed to allow personalized teams for each patient, including experts according to the patient’s needs. For example, some patients may need support from a social worker while others may need help from a dietitian, in addition to a doctor.

2. Methods and Results

We conducted a recent randomized clinical trial (RCT) on Connect’s predecessor, called WebChoice, consisting of several of Connect’s current components and followed 326 breast- and prostate cancer patients from all over Norway for one year. The experimental group with access to the application showed significant reductions in symptom distress and depression over time that was not observed in the control group. In a ongoing study funded by the Norwegian Research Council (Verdikt programme), Connect 2.0 is being expanded into a device-independent mobile, multifunctional ICT platform to support individually tailored collaborative care between patients and care providers on the continuum of primary-specialist care. The results will contribute to Norway’s Collaboration Reform.

In this presentation we will demonstrate the Connect 2.0 application and study results [3-5].

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References