

MONASH INFORMATION TECHNOLOGY

Vision: Improved development of mobile eHealth applications

John Grundy, Monash University Mohamed Abdelrazek, Deakin University Maheswaree Kissoon Curumsing, Deakin University





Outline

- The problem
- The key issues
- The vision
- Work to date
- Next steps...



Examples





Its not a new approach / problem...

- An aside... we've been trying to build these for some time
- E.g. Our OOIS 2001 patient management WAP/WML example:



Figure 7. Examples of (a) staff WML and (b) staff PDA applet user interfaces.



Developing eHealth applications is HARD!!!

- Range of users
- Range of technologies
- Changing technologies
- Supporting app evolution
- Continuous development, deployment in eHealth domain
- Avoid solution looking for a problem scenarios...



Some key Issues

- What Development process to use?
- What are appropriate requirements Engineering approaches to use?
- How do we design and build these Mobile Apps?
- How support (re)configuration different users, health challenges, deployments etc
- How get timely, effective end user feedback?
- How achieve sustainability of health behaviour change (via use of the app)?



The Vision



- Living lab setting up inside aged care provider partner
- Behavioural requirements, change impact extending modelling approaches to incorporate
- Emotional requirements engineering, evaluation method and tools
- Mobile app generators extending earlier work
- Configuration extending earlier work, exploring AI-based adaptation
- Continuous feedback integrating into app including sustainability of solution, interface and task usage, feedback on app/solution, integration into living lab process...



What next...

- Living lab set-up, evaluation for mobile apps
- Behaviour change + Emotion-based development
- App generation with focus on usability of solution as well as functionality
- Defect reporting continuous feedback
- Continuous development including AI-based adaptation, living lab context



Questions???

