Older adults perspectives on the potential for technology to enhance care in academic medical centers
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Purpose Academic-Medical Centers (AMCs) present a unique interface between academia, clinical care, and research and offer a platform for the provision of technological services that promote holistic, centralized, patient-centered care. These innovations can improve holistic care and health outcomes, but research on engaging older adults is still in its infancy. This study aims to 1) understand older adults’ perspectives on AMCs and their capacity to enhance healthcare through technological means; and 2) identify potential challenges and benefits of current technology in simplifying, streamlining, and enhancing care. Method Eight focus-groups (4 female; 4 male) were conducted with older adults (N=64) between April and May 2021 in The Villages - an active lifestyle retirement community in central Florida home to more than 140,000 older adults. Focus group domains explored included existing AMC knowledge and experience; prior/current technology exposure/use in day-to-day environments, for personal health, and within health systems including AMCs; perceptions of the benefits, challenges of health technology use; and preferences/suggestions for future use across environments. Demographic surveys were collected and analyzed via descriptive statistics. Focus groups were transcribed, and content analysis identified salient themes. Results and Discussion Participants reported a mean age of 72.4 (SD=6.4) and rated their overall health 8.59/10 (SD=1.05). Across genders, themes of technology advancement in care coordination and delivery resonated strongly in AMCs, with preferences for pragmatic/simple-to-use advancements to foster effective engagement. Participants preferred simplified user-facing delivery systems (i.e. patient portals and health outcomes dashboards) and infrastructure (e.g., centralized electronic medical record systems) to “avoid filling out the same form 6 times.” Participants expressed feeling “left behind” especially during technological updates, suggesting options for disabling automatic updates to allow time to learn changes; and highlighted need for design that supports accommodation for age-related changes such as deficits in vision and hearing and onset of arthritis that often occur in late life and can limit efficacy in many existing technologies. AMCs have significant potential for engaging older adults in fostering sustainable, holistic, technology-enhanced care. Older adults value healthcare innovation, desire to assist progress, and expressed preference for cohesive, inclusive, and engaging technologies. AMCs are well-poised to engage these consumers and harness technologies to enhance healthcare-quality. As new AMCs are being designed and built, older adults should be engaged at multiple time-points to facilitate success in achieving the triple health care aim: improving health outcomes and perceived satisfaction with care, while reducing health care costs.

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