

Supplementary file 2: Patient satisfaction assessment of ID-PROADAPT® eHealth device



Dear Sir or Madam,

You have been part of the PROADAPT-pilot study and we thank you for your involvement. In order to assess and improve this study, we would like to collect your opinion. This opinion is anonymous and does not affect your healthcare.

The following questions are concerning your experience with the PROADAPT programme as proposed in the ID-PROADAPT® device

If you consider the PROADAPT programme provided using ID-PROADAPT® device overall

- | | | | |
|--|-------------------------------------|-----------------------------------|-------------------------------------|
| • Did the font appear easy to read? | Not at all <input type="checkbox"/> | A little <input type="checkbox"/> | Absolutely <input type="checkbox"/> |
| • Did you manage to use the stylus easily? | Not at all <input type="checkbox"/> | A little <input type="checkbox"/> | Absolutely <input type="checkbox"/> |
| • Did you experience any visual fatigue after watching the program? | Not at all <input type="checkbox"/> | A little <input type="checkbox"/> | Absolutely <input type="checkbox"/> |
| • Were you tired at the end of filling out the various questionnaires? | Not at all <input type="checkbox"/> | A little <input type="checkbox"/> | Absolutely <input type="checkbox"/> |
| • Have you encountered connection problems? | Not at all <input type="checkbox"/> | A little <input type="checkbox"/> | Absolutely <input type="checkbox"/> |
| • Were you bothered by certain colors? | Not at all <input type="checkbox"/> | A little <input type="checkbox"/> | Absolutely <input type="checkbox"/> |

If yes: which ones?

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The following questions concern the overall PROADAPT programme (breathing and physical exercises, booklet, calls, and follow-up visits)

Did you have difficulty in understanding the explanations given proposed in the ID-PROADAPT® device?

- | | | | |
|----------------------------|-------------------------------------|-----------------------------------|--------------------------------|
| • for breathing exercises? | Not at all <input type="checkbox"/> | A little <input type="checkbox"/> | A lot <input type="checkbox"/> |
| • for physical exercises? | Not at all <input type="checkbox"/> | A little <input type="checkbox"/> | A lot <input type="checkbox"/> |
| • for nutritional advices? | Not at all <input type="checkbox"/> | A little <input type="checkbox"/> | A lot <input type="checkbox"/> |

Ergonomics evaluation of the ID-PROADAPT® device

We now ask you to focus on your ergonomics (ease of use) of the PROADAPT program that was proposed on the provided tablet. Please indicate on this scale how you rate each statement.

	Not agree at all	Somewhat agree	Neither agree nor disagree	Somewhat agree	Totally agree
I have used the PROADAPT program regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find the PROADAPT program unnecessarily complex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find the PROADAPT program easy to use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I regularly needed help from technical support to be able to use the PROADAPT program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find that the different functions of the PROADAPT program have been well integrated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find there are too many inconsistencies in the PROADAPT program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find the PROADAPT program very restrictive to use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel very confident using the PROADAPT program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I needed to learn a lot before I could use the PROADAPT program effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

User experience evaluation

We now ask you to focus on your overall experience with the PROADAPT interface. We offer two opposite terms and a 7-point scale. Please indicate on this scale where your impression is located.

Annoying	○	○	○	○	○	○	○	Cheering
Incomprehensible	○	○	○	○	○	○	○	Understandable
Creative	○	○	○	○	○	○	○	Monotone
Easy to use	○	○	○	○	○	○	○	Difficult to use
Precious	○	○	○	○	○	○	○	Poor
Boring	○	○	○	○	○	○	○	Captivating
Uninteresting	○	○	○	○	○	○	○	Interesting
Unpredictable	○	○	○	○	○	○	○	Predictable

Fast	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Slow
Original	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Conventional
Handicapping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Helping
Good	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Bad
Complicated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Simple
Repulsive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Attractive
Common	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Unpublished
Unpleasant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pleasant

Would you have liked to have more information? No Yes

If yes, on which aspect?

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What would you propose to make the programme more suitable for patients?

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How would you rate the contents of the tablet?

(not adapted = 0 ; very suitable = 10)

0 1 2 3 4 5 6 7 8 9 10

How would you rate the overall organisation of the program?

(not adapted = 0 ; very suitable = 10)

0 1 2 3 4 5 6 7 8 9 10

How would you rate the intuitive nature of the tablet?

(not adapted = 0 ; very suitable = 10)

0 1 2 3 4 5 6 7 8 9 10

How would you rate the videos on the tablet?

(not adapted = 0 ; very suitable = 10)

0 1 2 3 4 5 6 7 8 9 10

Thank you for your time, we will use your opinions to improve the ID-PROADAPT® device and the PROADAPT programme.

Prof Claire Falandry, study coordinator