

LiveWell: Pilot Study Exit Interview

ID: _____ Date: _____ Follow-Up Month: _____ Interviewer: _____

Prepare for interview:
\$, Check participant completed
PDQ and Exit Questionnaire

Introduction

We would like you to share your thoughts about using the *LiveWell* system.

Although we like hearing positive comments, any information about problems is very helpful.

Please don't hesitate to tell us about things that didn't work so well or that you didn't like.

Overview

1. Tell me about your overall experience using the *LiveWell* application?

2. What, if anything, did you like or find useful about using the application?

3. What did you not like or not find useful about using the application?

4. If you could change anything about the *LiveWell* application, what would you change?

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Outcomes

1. What is your strongest memory from using LiveWell?

2. What do think worked best for you? What, if anything, made you better?

3. What do think worked least well for you? What, if anything, made you worse?

4. What impact, if any, did using LiveWell have on your life?

5. Did you have a clear objective when you started using LiveWell?

What was it? Did you achieve it?

6. How would you describe the idea behind how LiveWell is meant to help you?

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Targets

1. How has your participation in LiveWell affected your medication use?

2. How has your participation affected the duration of sleep you get each day? Your sleep habits?

3. How has your participation affected your daily routine?

4. How has your participation affected your ability to identify, monitor, and manage early warning signs? What about lingering symptoms?

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Foundations

1. What was your overall experience with the Foundations?

2. What, if anything, did you like or find useful about the lessons?

3. What did you find confusing, unclear, or not useful about the lessons?

4. What did you feel was missing or that you would have liked to learn more about?

[For each topic area covered in a lesson, should there be more details about which skills to practice?]

[Should the lessons should be more interactive (e.g. providing tools to practice specific skills)?]

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Toolbox

1. What was your overall experience with the Toolbox section?

2. Tell me about your use of the Toolbox? [When, Why, How]

3. What, if anything, did you like or find useful about the Toolbox?

4. What did you find confusing, unclear, or not useful about the Toolbox?

5. What would help you to select and practice skills regularly? [specific skills for each lesson, more interactive skills tools, more instructions, worksheets, selecting and discussing skills practiced with the coach]

6. If you could change something about the Toolbox, what would that be?

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Wellness Plan

1. What was your overall experience with the Wellness Plan?

2. What, if anything, did you like or find useful about the Wellness Plan?

3. What did you find challenging, unclear, or not useful about the Wellness Plan?

4. If you could change anything about the Wellness Plan, what would you change?

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Wellness Plan: My Resources

1. What did you think about the My Resources section?

[Show on phone: My Medications, My Team, My Skills, My Charts]

2. Can you tell me about your use of this section? [When, Why, How]

[Use of My Meds; Use of My Team; Use of My Skills; Review of charts]

3. What, if anything, did you like or find useful about My Resources?

4. What did you find challenging, unclear, or not useful about My Resources?

5. If you could change anything about My Resources, what would you change?

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Wellness Plan: Reduce Risk

1. What did you think about the Reduce Risk section?

[Show on phone: personalized SMARTS and links to related skills]

2. Can you tell me about your use of this section? [When, Why, How]

[Sleep, Meds, Abstain, Routine, Tranquil, Social]

3. What, if anything, did you like or find useful about Reduce Risk?

4. Was there anything you found challenging, unclear, or not useful about Reduce Risk?

5. If you could change anything about Reduce Risk, what would you change?

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Wellness Plan: Awareness & Action

1. What did you think about the Awareness & Action section?

[Show on phone; personalized anchors and plan, definition of wellness ratings]

2. Can you tell me about your use of this section? [When, Why, How]

3. What, if anything, did you like or find useful about Awareness & Action?

4. Was there anything you found challenging, unclear, or not useful about Awareness & Action?

5. If you could change anything about Awareness & Action, what would you change?

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Daily Check In

1. What was your overall experience with the Daily Check In?

2. Can you walk me through your typical use of the Daily Check In?

3. Did you experience any difficulties completing the Daily Check In?

[anything you did to make completing the Daily Check In easier]

4. What, if anything, did you like or find useful about the Daily Check In?

5. Was there anything you found challenging, missing, or not useful about the Check In?

6. If you could change anything about the Daily Check In, what would you change?

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Daily Review

1. What was your overall experience with the Daily Review?

2. What, if anything, did you like or find useful about the Daily Review?

3. Was there anything you found confusing, unclear, or not useful about the Daily Review?

4. What did you think about the feedback in the Daily Review?

5. How did you use it? Did you follow up on any of the feedback? Did you make any changes?

6. If you could change anything about the Daily Review, what would you change?

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Weekly Surveys

1. Overall, how would you describe your experience completing the Weekly Surveys?

2. What, if anything, did you like or find useful about completing the Weekly Surveys?

3. Was there anything you found challenging, unclear, or not useful regarding the Weekly Surveys or its specific questions?

4. What would you change about the Weekly Surveys? [Explore thoughts on ews checklists]

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Reminders

1. What was your overall experience with the daily reminders? [Reliability – received, on time]

2. Were the daily reminders useful? How so?

3. Was there anything about the daily reminders you didn't like?

4. How do you think the reminders could be improved?

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Clinical Status Summary

1. Did you look at the summary reports? How often? If not, why not?

2. Any questions, thoughts, or feedback about the report?

3. Are there any additional items that would have been useful to have in the report?

4. Are there any items you think should be dropped from the report?

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Coach

1. How would you describe your overall experience working with the coach?

2. What, if anything, did you like or find useful about working with the coach?

3. Was there anything you found difficult or not useful about working with the coach?

4. If you could change anything about the coach's involvement, what would it be?

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Psychiatrist

1. In what ways, if any, has your participation in *LiveWell* affected how you work with your psychiatrist?

2. What changes would you suggest to the *LiveWell* program to make it more useful in terms of terms of working with your psychiatrist?

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Use of Study Equipment

1. Can you walk me through your typical use of the study phone and watch?

[Where did you keep it, how frequently did you check it, etc.?)

2. What difficulties, if any, did you have using the study phone every day?

3. What difficulties, if any, did you have using the watch all day every day?

4. Anything you wish you'd had during the study to make it easier?

[extra phone chargers, portable chargers, car chargers, etc]

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Technical Issues

1. What technical issues, if any, did you experience with the phone or watch? [trouble with reception, battery life, receiving and responding to prompts, completing daily check-ins and/or weekly surveys]

If issues present, did you feel like staff was responsive in helping you address these issues?

If issues present, did these technical issues affect your intended use of the application? How?

Privacy

1. What concerns, if any, did you have about your privacy while using the system?

Thank you for your valuable feedback, is there anything else you'd like to add before we end?

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[Administer PDQ Exit Questionnaire if not submitted prior to interview]

[Collect study materials]

Interviewer Comments