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Ahtinen 2013 [26]	"Living Application" - mobile wellness application to support physical activity	Transtheoretical Model (Prochaska Stages of Change); Constructive Design Research; Social Cognitive Theory; Persuasive System Design model (PSD)	urban; sedentary work; interested in wellness management; studies across both Finland and India; age range 24-70;	none defined	No named team, but mention of multicultural group of re- searchers & de- signers	1st field study with 16 HSU from 2 countries - process included explorative study with wellness diary including: pre study semi structured face to face interviews; 2 week use of wellness diary app, phone interviews during trial and post trial interview (HSU n=16); audio recordings; thematic analysis;	2nd field study with 12 HSU in 2 countries - participatory design study with a Magical Gadget (imaginative mock up SPES method) including pre study phone interviews, partic- ipatory design task, think aloud; observation and post study interview;	design principles derived using affinity wall tech- nique; iterative devel- opment in workshops (IT experts & user experi- ence practitioners);	Not reported	Not reported
Antypas 2014 [27]	website & app connected to Skibotn Rehabil- itation Center. Includes per- sonal profile, activity calen- dar, SMS re- minders	Transtheoretical Model (Prochaska Stages of Change); Health Behaviour Theory; Social Cognitive Theory; computer tailoring; decisional balance; Health Action Process Approach (HAPA); Regulatory Focus Theory (RFT)	men & women participating in cardiac rehabilitation program at the Skibotn Rehabilitation Centre in Norway; women mean age 64.3 & men mean age 59.4;	Other than 2 researchers, HSP involved with the project by developing & posting infor- mation on the website are not defined	Researchers: cardiovascular nurse & health psychologist	focus group based on interview guide with open discussion (HSU n=11); audio recording; thematic analysis;	audio recording; thematic analysis;	development of personas & narratives; 2 localized versions of concept sce- nario developed for Finland & India;	Not reported	randomized controlled trial - clinicaltrials.gov NCT01223170
Bengtsson 2014 [28, 29]	mobile phone self report system for self management of hypertension	participatory research design	men and women aged 49-82; currently using hypertension drugs, fluent in Swedish; recruitment for evaluation from 2 geographically separate locations - primary healthcare centre in multicultural city suburb & outpatient clinic of	HSPs recruited from same units as HSUs; included equal numbers of physicians,nurses & pharmacists; experienced in caring for patients with hypertension	unnamed inter- disciplinary group of researchers;	Ethics approval; 3 x patient semi structured focus groups (HSU n=15); 2 x clinician semi structured focus groups (HSP n=12); audio recording; thematic analysis using NVivo;	see focus group in "con- textual inquiry"	brief evaluation sessions of initial concept model on paper (participants not defined); prototype; 4 x semi structured focus groups evaluating Living Aplication concept (HSU in 2 countries n=19); audio & video recording; thematic analysis by multicultural group of researchers & designers"	Not reported	Not reported

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			a provincial hospital in smaller town							
Buccieri 2015 [30]	Supporting and Assisting Youth (SAY) mobile app for home- less youth	Spiral Technology Action Research (STAR) model; critical social theory of youth empowerment; action research; youth centered participatory action study	12 homeless youth; 18-23 years;	2 university facilitators	SAY App Commit- tee: youth (HSU n=12) and uni- versity facilitators (n=2)	literature review; first of series of group discussions for "Listen" stage (HSU n=12, researchers n=2) (Note: 10 group discussions in total across all development stages)	item drafting based on focus group results; literature review;	development of functional prototype over 1 year using combination of theoretical frameworks and focus group results (researchers & developers);	SAY App Committeee worked on promotional campaign including design of poster mailed to 250 youth focused social service agencies across Canada, & promotion via Twitter & Facebook (HSU n=12, researchers n=2); SAY app available for free download from 2013	Not reported
Clayman 2008 [31]	Cancer Care Links (www.cancerca relinks.org) - website for women diag- nosed with breast cancer	Not reported	women diagnosed with breast cancer; recruited at National Cancer Institute designated Comprehensive Cancer Centre; aged 29-80	surgical oncolo- gists, medical oncologists, radiation on- cologists, plastic surgeons, nurs- es & therapists; recruited at National Cancer Institute desig- nated Compre- hensive Cancer Centre	Core research team/research & development team: faculty with expertise in com- munication sci- ence, cancer communicatrion, public health, clinical psycholo- gy, health educa- tion & multimedia production (num- ber not specified) plus 1 breast cancer survivor as research assistant and 1 multimedia specialist	longitudinal series of semi structured interviews re information needs & re- source use including after 1st appointment with on- cologist & follow up tele- phone interviews fortnight- ly for 6 months (HSU n=30); one-time provider interviews (HSP n=22); audio recording; thematic analysis;	further group discussions for "Plan" stage (HSU n=12, researchers n=2) (Note 10 group discus- sions in total across all development stages)	several design meetings (participants not defined); iterative testing for content validity & usability evaluation by 4 x face to face cognitive interviews (HSU n=21, HSP n=4); audio recording; Item Tracking Matrix & Cognitive Interview Summary used for data analysis;	Not reported	Not reported

Study / References	Specific product	Frameworks, models, theo- ries	Health service user (HSU) population	Health Service Provider (HSP) population	Teams or groups	CeHRes roadmap: Contextual inquiry	CeHRes roadmap:Value Specification	CeHRes roadmap: Design	CeHRes roadmap: Operational- ization	CeHRes roadmap: Summative Evaluation
Cordova 2015 [32]	mobile app version of Sto- rytelling for Empowerment (S4E) - HIV/STI and drug abuse preventive intervention for primary care	community- based participa- tory research (CBPR); preven- tion principles of the National Institute on Drug Abuse (NIDA); eco developmental framework; agile software development	29 adolescents recruited at youth centered primary care clinic; mostly African Ameri- can (65%) and female (72%); urban; age range 12-18	not specified	Youth Leadership Council (YLC): diverse youth led group advocating for change & partnering with universities (no detail on partici- pants);	Involvement of YLC in all aspects of study including proposal submission, development of interview guide, participant recruitment, content identification, manuscript preparation; 9 x focus group interviews using iterative interview guide (HSU n=25); individual interviews (HSU n=4); audio recording; thematic analysis;	Combined with contextual inquiry processes - see previous;	remainder of series of 10 x group discussions for "Do" stage; 10 x team meetings (HSU n=12, researchers n=2) including planning sketching ideas, making concrete decisions, formatting the app, developing paper prototype; testing of electronic prototype by group (HSU n=12);	Not reported	Not reported
Dabbs 2009 [33]	Pocket Personal Assistant for Tracking Health (Pocket PATH) - for lung trans- plant patients	user centred design	7 lung trans- plant patients; aged 21-69; recruited from pulmonary transplant center; 12+ months since transplant; English speak- ing	See Development Team;		Data collection re back- ground characteristics of patients impacting on com- puter use from various sources eg previous client survey, symptom review; literature review; field interview (home visit) and observation including con- textual inquiry methods (HSU n=7);	Combined with contextual inquiry processes - see previous;	development team meetings - iterative development in response to results of ongoing interviews; continued semi structured interviews for ongoing feedback, testing of prototypes (HSU n=30); beta test including anonymous questionnaire (HSU n=12)	Not reported	testing of final version (HSU n=6); Post-Study System Usability Questionnaire (PSSUQ); Randomized controlled pilot triafound newly transplanted patients found Pocket PATH superior to conventional methjods for self monitoring after transplantation. full RCT ongoing evaluation involving end users after RCTs to inform continued development;

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Das 2013 [34]	ehealth portal for weight loss patients under- going treatment	human centred design as per ISO 9241-210 (2008); itera- tive design approach (in- cludes dia- gram); partici- patory design;	Norwegian speakers; com- pleted hospital weight reduc- tion program - either lifestyle therapy or bariatric sur- gery; age range 31-55;	8 health professionals with experience in field of obesity from fields of nursing (n=6); medicine (n=1) & clinical nutrition (n=1); aged 26-64;	Research team: lead author + trained research assistants"	Ethics approval; field study including 10 x observations of group & individual patient consultations with staff and semi structured interviews (HSP n=not reported) over 1 month; thematic analysis;	combined with contextu- al inquiry processes - see previous;	iterative app program- ming synergistic with HSU interviews (agile software development); prototypes shared with YLC & HSU; weekly meetings with program- mer;	implementation at the obesity clinic at the hospi- tal for case study.	Not reported
Davies 2015 [35, 36]	"Hep B Story" - a culturally appropriate bilingual mobile app about hep- atitis B for indigenous Australians.	participatory action research (PAR) frame- work; Paasche- Orlow & Wolf's model used as organising model for data analysis - "The causal path- ways linking health literacy to health out- comes";	indigenous patients with Hep B; recruit- ed at health clinic of remote community in Arnhem Land; age range 30- 59;	See Project Team	Development Team: interdisci- plinary - included nurse (principle investigator), computer scien- tists, behavioral scientists, cardio- thoracic trans- plant physician, communication scientist	Ethics approval; Published qualitative study including 32 x semistructured interviews with indigenous patients with hep B (HSU n=11); indigenous community members (n=9), key informants (n=12, 4 of whom were indigenous), in total 24 of the group were indigenous; thematic analysis based on Paasche-Olow & Wolf model;	3 x participatory design workshops: 1st with HSP (n=8); 2nd with HSU who had lifestyle therapy (HSU n=6); 3rd with HSU who had bariatric surgery (HSU n=6); workshops included semi structured group interviews, design activities, sketching ideas, group presentation of ideas, personas, scenarios; workshop evaluation; audio & video recording & transcription; thematic analysis;	3 x User centered design (UCD) sessions in laboratory setting using low fidelity prototypes, observation and screen capture using Camtasia (HSU n=7); usability assessment reports generated for all testing sessions & reviewed by development team; iterative cycles of assessing-designing-testing-analyzing-refining-testing-analyzing-refining; field study testing Pocket PATH at home (HSU n=6);	community launch event including presen- tation of app & invitation for initial evaluation; launched at inau- gural Indigenous People's Confer- ence on Viral Hepatitis;	initial evaluation question- naire including sections pre & post exploring the app (n=16 community end users at community launch event); evaluation question-naire with conference delegates (n-56)
Fennell 2016 [39, 44]	Country Cancer Support web- site	participatory action research (PAR) frame- work informed by Hart & Bond's 1995 framework; transtheoretical model; behav- iour change theories includ- ing Prochaska Stages of Change & Health Belief Model;	PAR Partners & also website visitors over 18 with diagnosis of cancer or carer/relative/frien d of someone diagnosed with cancer living in rural area; aged 18-74;	Professional Reviewers: Oncologist, Helpline Nurse Counsellors, Psychologists)	Not reported	Ethics approval; formative research - published qualitative study identified need for resource including semi structured face to face interviews (HSU n=17); demographic questionnaire (HSU n=17); thematic analysis; review of other websites; review of clinical practice guidelines; literature review; funding consultations with government & non government stakeholders;	[Combined with contex- tual inquiry processes - see previous];	development of first prototype; evaluation workshop for 1st prototype (all stakeholder groups inc HSU n=6); workshop included researcher presentations, stakeholder feedback, plenary discussions, break-out groups, CARD-sorting (Collaborative Analysis of Requirements and Design); audio & video recording; development of 2nd prototype; usability tests in	launched with PAR partners as ambassadors (HSU n=11) & rural media; promotional tour;	Google analytics results from first 3 years for quantitative metrics, analysed using Statistical Package for the Social Sciences (SPSS); acceptability testing web survey with adaptive questioning for website visitors (HSU=108);

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								laboratory on 2nd proto- type including question- naire and semi struc- tured post-test interview, audio & video recording, screen capture during test, think aloud & Sys- tem Usability Scale (SUS) (n=20 including HSU n= 6); redesign after usability tests;		qualitative content analysis
Fonda 2010 [40, 41]	My Diabetes Data Tracker gadget - proto- type of Personal health applica- tion for diabe- tes self man- agement;	user centred design (UCD); Project Health Design (PHD)	adults with diabetes from Joslin Diabetes Center (Boston, MA); average age 63;	Not defined	Project Team: publication au- thors including reps from Charles Darwin University, Miwatj Aboriginal Health Corpora- tion, Royal Dar- win Hospital Liver Clinic, Dreamedia (n=6)	developed facilitators guide for focus group with person with diabetes (HSU n=1); 3 x focus groups to ascertain needs (HSU n=21); audio recording; thematic analy- sis;	Combined with contex- tual inquiry processes - see previous;	storyboard developed by Project team; 20+ itera- tive modifications to storyboard with commu- nity review; translation both forwards & back- wards; 4 x functional prototypes developed iteratively with commu- nity review (HSU + HSP);	Not yet operational at date of publication	Funded for a 6 month prospec- tive randomized trial of a mobile version of the PHA but not yet reported
Goldenberg 2015 [42, 43]	mobile HIV prevention app for men who have sex with men	iterative reseach process; iterative qualitative approach	Men who have sex with men from Atlanta, Seattle & rural US regions; aged 18+; owned or had owned a smartphone; never had positive HIV test	HIV testing counsellors in Atlanta and Seattle; aged 18+; owned or had owned a smartphone	PAR Partners: 4 men & 7 women living in "accessible" to "very remote" rural areas of South Australia, including a young person and a rural health care professional who had cared for her rural cancer affected father (represented HSPs and carers);	Ethics approval; 4 x in person focus groups with MSM (HSU n=28); 1 x online focus group with rural MSM (HSU n=10); 2 x in person focus groups with HIV testing counselors (HSP n=13); 14 key informant interviews; audio recording; thematic analysis;	Combined with contex- tual inquiry processes - see previous;	draft website plan based on initial study; demographic questionnaire (HSU n= 11); iterative development of website plan after each of 11 x individual telephone interviews (HSU n=11) - participatory action research cycle with PAR partners (HSU n=11); expert review of content by HSP; incorporated behavioural change strategies; consultation with HSU re online prototype (n=?); iterative development as result of review & consultation;	Not reported	Not reported

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Heckman 2015 [45]	online skin cancer risk reduction inter- vention for young adults - UV4.me	Integrative Model of Be- havior Predic- tion	25 young adults participating in an in-person skin cancer prevention randomized controlled intervention trial from a university campus in Philidelphia; aged 20-25; 64% white, 72% female		Project T eam: not defined	individual interviews including think aloud re baseline survey and pamphlet from prior intervention (HSU n=25); funding secured;	[combined with contex- tual inquiry processes - see previous];	prototype design and evaluation; 2 x focus groups re prototype ideas (HSU n=21); step by step demonstration of prototype to HSU to obtain feedback; group meeting to review prototype (HSP n=10); Planned & funded for next stages but not reported;	Not reported	pilot testing by 18-25 year olds at risk of devel- oping skin can- cer (HSU n=53); website refined; Randomized Controlled Trial in 2014 to com- pare UV4.me to existing Skin Cancer Founda- tion website & assessment only condition
Kelders 2013 [46]	web based intervention for prevention of depression, based on self help book "Living to the full"	CeHRes roadmap for eHealth devel- opment (figure included); hu- man centered design; persua- sive technology theory; ; busi- ness modeling	people between 26-62 years interested in participating in previous study of effectiveness of "Living to the full" (initial interviews); participants part of target group for intervention recruited with online advertisements (for usability testing)	ehealth re- search- ers/usability experts from University of Twente includ- ing 1 clinical psychologist	Key Informants: primary care providers + key stakeholders at community based organisations, health depart- ments & govern- ment agencies at local, county, state & federal levels;	literature scan; discussions re goals and needs with project management team);	2x focus groups (HSU n=4) to shape content, review potential images & suggest topics	beta version (prototype) designed; 6 x focus groups to theatre test beta version of app with MSM (HSU n=34); 2 x in person theatre testing focus groups (HSP n=9); audio recording; thematic analysis;	designed as re- search tool - this aspect not dis- cussed	Not reported
Lubberding 2015 [37, 38, 47]	OncoKompas https://www.on cokompas.nl/ online self management application for cancer survivors	participatory design princi- ples (van Ge- mert-Pijnen et al 2011, van der Vaart et al 2012)	mix of head & neck/breast cancer survivors chosen because different needs and gender spread; most female 67%; mean time since treatment 13.5 months; outpatients of	healh care profesionals involved in head and neck cancer care, including sur- geons, radiation oncologist, oncology nurs- es, health scien- tist, psycholo- gist, spiritual	Multidisciplinary Team: Individuals with expertise in skin cancer pre- vention, young adults, internet interventions, psychology, quali- tative & quantita- tive research methods, health literacy, computer	Ethics approval; qualitative needs assessment via semi structured interviews with HSU (n=30); 1st round of interviews with HSP re current follow up care (HSP n=11); audio recording; thematic analysis;	18 x semi structured interviews combined with rapid prototyping using paper prototypes with potential end users (HSU n=18); audio recording; thematic analysis of interviews & rapid prototyping; requirement session with project management team using results from thematic	preliminary content / mock up drafted; 4 x focus groups to review mock ups/prototype & provide suggestions for website (HSU n=10); thematic analysis; design development by Multi- disciplinary Team; avatar development with feed- back from HSU (n=26); health literacy evaluation	Discussions re implementation included in previous interviews with HSPs - see design processes; Feasibility study in clinical practice - pre-test survey before access to OncoKompas (HSU n=56); post	See feasibility study

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			VU University Medical Centre in Amsterdam; Dutch speaking; age range 48- 88;	counsellor, patient advisor	programming, psychometrics and instructional design;		analysis;	by experts including readability evaluation using Precise SMOG ("Simple Measure of Gobbledygook") (experts n=2); pre-test questionnaire using cognitive interviewing with young adults including think aloud (HSU n-20); 2 rounds of acceptability testing using structured interviews (HSU n-26); usability testing including structured interviews (HSU n=12); quality control testing (project manager & programmers);	test survey 2 weeks after ac- cess (HSU n=56); follow up inter- view (HSU n=56); data analysis	
Meyer 2007 [48]	www.studentde pression.org - student focused website for depression self help	action research framework; action research spiral; social constructionist philosophy;	university students; youth (age of students participating not provided)	Author (principal project developer) is Dpsych candidate; expert validation panel of psychologists & a psychiatrist	"Project team (not defined);	project application formulated & submitted to charity; ethical approval; recruitment of research assistant to conduct interviews; recruitment of 'student consultants' advertised nationwide through UK universities; 13 x semi structured interviews with HSU (n=13);	2nd round of interviews re added value for HSP of ehealth tool (HSP n=11); audio recording; themat- ic analysis;	working prototype; user based usability evaluation using scenario based think aloud protocol on a working prototype (HSU n-10); audio & video recording; data analysis using coding; expert based usability inspection using cognitive walkthrough (HSP n=8); requirement session with program development team;	approval by steer- ing group and charity board; launch	usage statistics - 50,000+ visits in first year, 100,000+ in second year; anonymous site feedback form with ratings
Miller 2015 [49]	PROGRESS: web based education program for prostate cancer survivors transitioning from active treatment; Prostate Cancer Online Guide & Resource for Electronic Survivorship (PRO-	behavioral science theory; Cognitive-Social Health Infor- mation Pro- cessing model (C-SHIP); itera- tive design; evidence based behavioral science theory; health commu- nication best	early stage prostate cancer patients; aged 52-79 [Note that later in the paper these are referred to as "survivors")	clinicians from variety of spe- cialties eg male reproductive medicine, psy- chology		literature review; input from interdisciplinary ex- pert team re needs; review and identification of re- sources for content;	rough draft outline of website content; questionnaire for initial feedback on draft outline (HSU n=10); anonymous email discussion group to debate every aspect of website design (HSU n=10); reflective note taking & written summaries at key points (researcher); interview transcripts edited to form	discussion with Development Team re results of both needs assessments; prototype by Development Team; "demo sessions" re prototype and refinements; contents developed with experts including HSU, HSP and paramedics (no additional details); 11 x cognitive walkthroughs in pairs including expert	not reported	RCT of PRO- GRESS (website vs NCI's Facing Forward mate- rials)

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	GRESS)	practices;					student approved "stu- dent stories" for content (HSU n=10);	usability evaluation and think aloud followed by semi structured inter- views (HSP n=22); record- ing using Morae soft- ware; thematic analysis;		
Morrison 2015 [50]	"Living well with Asthma" - online resource for self man- agement of asthma	iterative user centred design; implementation and behaviour change theo- ries; Medical Research Coun- cil guide to developing and evaluating complex inter- ventions (MRC) https://www.m rc.ac.uk/docum ents/pdf/compl ex- interventions- guidance/	adults with asthma; age range 23-56 (n=10)	practice nurses who undertake asthma reviews (n=4)	Project management team: researchers, designers & programmers (not specifically defined)"	Ethics approval; literature review; identification of features required by expert panel (experts n=7); implementation theory Normalization Process Theory (NPT) to inform topic guide for focus groups; 2 x focus groups re barriers & facilitators of self management interventions (HSU n=9, HSP n=4); audio recording & transcription; thematic analysis (extraction of statements re self management);	development of text content from identified credible resources using plain language writing style guide (expert team); preliminary website interface design; selec- tion of communication channels eg text, video etc based on feedback from expert team & literature (HSP); devel- opment of interview guide; individual semi structured interviews (HSU n=5) & group semi structured interviews (HSU n=12) to help de- termine content & inter- face & provide feedback on preliminary content areas & website de- sign; audio recording; [note that fig.1 shows these processes happen- ing in tandem but it is unclear how early HSUs were involved in the process.]	prototype; final individual questionnaire for feedback on close to final draft website (HSU n=10); final prototype submitted to validation panel; validation panel (experts n- not defined); content finalised;	Not reported	Randomized Controlled Trial (RCT) called RAISIN (Randomized Trial of an Asthma Internet Selfmanagement Intervention); ISRCTN 78556552
O'Brien 2016 [51]	LEAP (Living, Eating, Activity, and Planning in retirement) - web based lifestyle inter- vention in re- tirement	iterative co- design; behav- ior change techniques; Health Action Process Ap- proach;	male & female adults aged 55+ as potential intervention users; different stages of re- tirement transi- tion; diverse socioeconomic backgrounds;	health & social care profes- sionals whose role related to improving health & well- being of people in retirement;	"Project Team: not defined;	Ethics approval; 3 x systematic reviews - literature search; expert evidence summary of literature reviews, qualitative research findings & expert knowledge to create "evidence statements";	iterative review of sug- gested website features; [value specification com- bined with contextual inquiry - see previous]	creation of video seg- ments for websites (HSU and HSP); review of all content by health literacy experts; Health Literacy Advisor software to eval- uate language; proto- type; development of usability testing guide; iterative usability testing	Not reported	Pilot Random- ized Controlled Trial (RCT) to be reported else- where

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								including interviews, observation and think aloud until no further changes were suggested (HSU n=12); audio recording; qualitative & quantitative data analysis; refinements to website in response to usability testing;		
Peute 2015 [52]	website for childhood can- cer survivors	limited subset of Website Development Model for the Healthcare Consumer (WDMHC); user-centred design; iterative development methodology	cancer survivors and parents; youth aged 20- 25; parents aged 50-55	Pediatrician + pediatric oncologist		literature review; structured questionnaire (HSU n= 145); information needs analysis resulted in list of information requirements for website;	Codesign workshop 1 to brainstorm new intervention ideas, including processes of persona building, experience mapping, wild cards, storyboarding (n=42 including research team n=12, HSU n=22, HSP n = 8); detailed notes by facilitators; thematic analysis;	low fidelity protype; iterative review of prototype by expert panel; iterative development of protoypes; iterative think aloud studies/interviews of early prototype - draft pages in Powerpoint (HSU n=8); think aloud studies/interviews of later prototype - prototype web pages (HSU n=3); audio recording; thematic analysis using NVivo software; used LifeGuide open access software;	Not reported	Not reported
Revenas 2015 [53- 55]	"'tRAppen" - Swedish app for self manage- ment of physi- cal activity in rheumatoid arthritis	participatory action research; experience based design (EBD); user centred design; participatory design; codesign	individuals diagnosed with rheumatoid arthritis for at least 1 year; Swedish com- munication skills; recruited from hospitals & members of Swedish Rhematism Association; age range 31-73	clinical py- shiotherapist;	Development Team: web designers & programmers"	Ethics approval; development of semi structured interview guide; testing of interview guide (physiotherapy students n=4); refinement of interview guide; 6 x focus group semi structured interviews based on Nominal Group Technique, including questionnaire re characteristics, self report form re readiness to engage in physical activity and group discussion (HSU n=26);	simple mock up website; focus group of stake- holders re expectations and feedback on mock up, with structured agenda & brainstorming (n=8 including HSU (n=4);, HSP (n= 2), IT experts (n=2); minutes of meeting;	Codesign workshop 2 to develop core intervention concepts using a creative facilitator to develop hand drawn prototypes including processes of persona building, mapping typical week, prototyping (n=20 including research team (n=6) and HSU (n=14); facilitator detailed notes; thematic analysis; hand drawn prototypes; design brief and specification document to inform intervention build (research team); Codesign	Not reported	Not reported

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Study / References	Specific product	Frameworks, models, theo- ries	Health service user (HSU) population	Health Service Provider (HSP) population	Teams or groups	CeHRes roadmap: Contex- tual inquiry	CeHRes roadmap:Value Specification	CeHRes roadmap: Design	CeHRes roadmap: Operational- ization	CeHRes roadmap: Summative Evaluation
Sandlund	mobile exercise	Participatory	community	See research	"Project steering	Ethics approval; Individual	prioritization task (HSU	workshop 3 to de-risk the prototype, test & identify modifications using cognitive walkthrough (n=37 including research team (n=8) and HSU (n=29); analysis of feedback and issues identified in workshop to create list of revisions; optimized functioning prototype; iterative testing, user feedback and intervention refinement process of revised intervention prototype (n=30 including research team, HSU and HSP); development of working	Not reported	Not reported
2015 [56]	app to prevent falls	and Appreciative Action and Reflection (PAAR); Form-IT including Soft Systems Thinking; Needfinding; Appreciative Inquiry; Meta-design including Designing Designing Together & Designing the "in between";	living older persons re- cruited by sen- ior citizen asso- ciations; heter- ogenous group with different experiences of technology, falls etc; age range 70-77 (n=18)	group	group heads of university coun- selling services, charity repre- sentative, psychi- atrist;	interviews to identify participants (HSU n=38); 1st workshop including presentation & focus group discussion, intro & personal meaning of joy of movement & balance (HSU n~18)	n=22); audio recording & thematic analysis of results from focus groups & prioritization task - inductive qualitative content analysis; [Process to this point reported in detail in 2014 paper - described as 1st stage]	prototype including established website usability guidelines (web design company); heuristic evaluation (double experts in usability & cancer survivorship care n=3); think aloud analysis including SUS questionnaire (HSU n=8); audio & screen recording; thematic analysis with Morae software	Not reported	Not reported
Schnall 2014 [57]	mobile app for HIV prevention for high risk MSM	Information Systems Re- search Frame- work (ISR) in- cluding 3 cycles - Relevance, Rigor & Design (includes dia- gram); iterative design; user-	Men reporting having unprotected sex with HIV positive or unknown status male partners; self reported HIV negative or HIV status unknown; able to			5 x focus groups identifying desired functions & design of app (HSU n=33); themat- ic analysis; literature re- view (published systematic review re existing technol- ogy in HIV prevention);	2nd workshop including 2 focus group discussions re personal meaning & avoiding falls (HSU n~18); 3rd workshop including lecture & focus group discussion re how new tech can inspire you (HSU n~18); 4th workshop including discussion in	pilot workshop to test data collection process; 1st co-design workshop aims & intro, brainstorm- ing (co-design group n=8 inc 3 HSU); 2nd co-design workshop create 1st prototype, brainstorming & narrowing, creation of 1st framework (co-design	Not reported	Not reported

		_	,			in literature that was not revie				
Study / References	Specific product	Frameworks, models, theo- ries	Health service user (HSU) population	Health Service Provider (HSP) population	Teams or groups	CeHRes roadmap: Contextual inquiry	CeHRes roadmap:Value Specification	CeHRes roadmap: Design	CeHRes roadmap: Operational- ization	CeHRes roadmap: Summative Evaluation
		centred design	read and write in English or Spanish; age range 18-57;				small gender divided groups re activity strategies (HSU n~18); 5th workshop including activity & discussions in small gender divided groups re wishes for app (HSU n~18);	group n=10 inc 5 HSU); focus group interview re co-design process (co- design group n=10 inc 5 HSU); 3rd co-design workshop to create 2nd prototype (co-design group n=8 inc 4 HSU); 4th co-design workshop - feedback on 2nd proto- type (co-design group n=8 inc 4 HSU); 2nd focus group interview re co- design process (co-design group n=8 inc 4 HSU); data collection of work- shops using online notice board (Trello), interactive boards, post it notes, video recordings & ob- servation protocols; video based analysis; thematic analysis; [this 2nd stage reported in detail in 2015 papers]		
Skjoth 2015 [58]	http://gravidite tsportalen.dk/ - interactive website to support preg- nant women in making in- formed choices about Downs Syndrome screening	participatory design; Interna- tional Patient Decision Aid Standards (IPDAS) Collab- oration Guide; Centre for ehealth Research and Disease Man- agement (CeHRes) roadmap	pregnant women (some previously participated in Down syndrome screening); recruited from midwife consultations; Danish; age range 21-39;	3 care providers - consultant, nurse and mid- wife from Ma- ternal Fetal Medicine Clinic at Odense Uni- versity Hospital. 5+ years expe- rience in ma- ternal fetal medicine.	Professional expert validation panel: 3 psychologists, 1 psychiatrist;	stakeholders identified; Research Group recruited; literature review (published systematic review); 1st focus group using semi structured guide (HSP n=3); 2nd focus group using semi structured guide (HSU n= 8);	Design session 1 including focus group methodology to identify features for improving HIV prevention in MSM (HSU n-6); audio recording & notes taken; thematic analysis; agreement on app content & use cases (study team);	6th workshop working with personas (HSU n~18); 7th workshop including feedback, dsicussions, activity (HSU n~18); development of 1st prototype; 8th workshop: test & feedback re 1st prototype & exercises (HSU n~18); 2nd prototype developed; 9th workshop test & feedback of 2nd prototype, visit to research lab re brainstorming app feedback, questionnaire on motivation re falls prevention (HSU n=16); 3rd prototype developed; 10th workshop - testing	website designed to reflect clinical pathway at Oden- se University Hospital;	Not reported

Detail of data	extracted from 30	studies scoring ≥ 90	% on MMAT (addition	onal information ma	y have been reported	in literature that was not revie	wed)			
Study / References	Specific product	Frameworks, models, theo- ries	Health service user (HSU) population	Health Service Provider (HSP) population	Teams or groups	CeHRes roadmap: Contex- tual inquiry	CeHRes roadmap:Value Specification	CeHRes roadmap: Design	CeHRes roadmap: Operational- ization	CeHRes roadmap: Summative Evaluation
								3rd prototype (HSU n~18); observation of participants during all workshops; content analysis; questionnaire re motivating factors in fall prevention to larger sample of potential users (HSU n=42); iterative prototype evaluation through continuing workshops (HSU n=38); use of ACKTUS platform;		
Stinson 2014 [59]	iCanCope with Pain - mobile based self man- agement pro- gram for youth with chronic pain	user centred design; iterative design	adolescents recruited from pediatric chron- ic pain clinic in Ontario; pain lasting over 3 months with poor response to conventional pain manage- ment therapies; age range 14- 18; able to speak & read English	Interdisciplinary health care providers re- cruited from pediatric chron- ic pain clinics in Ontario; em- ployed full time for at least 1 year in pain clinics;		Ethics approval; demographic questionnaire (HSU n=23); sociodemographic questionnaire (HSP n=7); data analysis;	field observations and individual interviews (HSU + HSP - numbers not reported); 3rd focus group using content and interview guide (HSU n=6); audio recording; thematic analysis;	Design session 2 re user interface design, sketching ideas (HSU n=6); audio recording; thematic analysis; low fidelity prototype based on results from design sessions; heuristic evaluations (informaticians/IT experts n=5); usability testing including Post Study System Usability Questionnaire (PSSUQ) (HSU n=10); data analysis using Morae software & SPSS v22; iterative prototype development (5 versions);	Not reported	Not reported in this article, but this app was produced and evaluated in a Randomized Controlled Trial (RCT) https://www.cli nicaltri- als.gov/ct2/sho w/NCT0260175 5
van Bruinessen 2014 [60, 61]	PatientTIME; 3 products: self directed online communication tool, a corresponding evaluation plan and an implementation plan. Designed to empower patients to communicate with health providers.	Intervention Mapping Framework (IM) (includes diagram); patient participatory methods; participatory design; user centred design (UCD); participation ladder; iterative design; context map-	patients over 18 years old diagnosed with malignant lymphoma including Hodgkin's lymphoma; age range 39-81; (patients who usually took a companion to appointments		Student user group (university students / HSU's but described differently throughout eg 'student consult- ants')"	ethics approval checked but not required; recruit- ment of patient research partners involved through- out with an initiating & agenda setting role (HSU n=2); creation of multidis- ciplinary working group (health professionals + 1 patient research partner); questionnaire about diag- nosis (HSU n=28);	development of focus group interview guides; 3 x focus groups (HSU n=23); 1 x focus group (HSP n=7); audio record- ing; thematic analysis;	prototype; prototype evaluation (HSU n=6; HSP n=2); website evaluation using IPDAS checklist for developing patient deci- sion aids; product re- finement focusing on usability	Implementation plan developed in connection with Hematon - conditions built to transfer evaluated intervention to publicly available tool;during design process main criteria for selecting strategies was ability to operationalize in online	Evaluation plan; development of pretest RCT questionnaires using think aloud (HSU n=2); RCT protocol developed & audited with external experts; Randomized Controlled Trial (RCT). Netherlands

Study /	Specific product	Frameworks,	Health service	Health Service	Teams or groups	CeHRes roadmap: Contex-	CeHRes roadmap:Value	CeHRes roadmap: Design	CeHRes roadmap:	CeHRes
References		models, theories	user (HSU) population	Provider (HSP) population		tual inquiry	Specification		Operational- ization	roadmap: Summative Evaluation
		ping frame- work; stepwise protocol; Stan- ford Guidelines for Web Credi- bility; model- ling;	could invite them to their interviews)						environment that could be hosted by Hematon; implementation planning started from first stages of project planning; Patient research partners (HSU n=2) to be involved in transfer of the intervention;	National Trial Register ID NTR3779
Widman 2016 [62]	ProjectHeart- forGirls.com, interactive web based program designed to improve sexual communication skills and re- duce risk of HIV/STDs among adoles- cent girls	Reasoned Action Model; fuzzy-trace theory	ethnically diverse adolescent high school students; female; aged 16-19;		"Interdisciplinary expert team: not defined;	formative qualitative research including semi- structured interviews re current sexual communica- tion issues & recommenda- tions for content (HSU n=25); audio recording; thematic analysis using Dedoose software;	needs assessment including assignments - booklet with questions about communicating with clinicians (HSU n=23); 3 x focus groups & 10 x interviews (HSU n= 28+9 companions); audio recording; thematic analysis using MAXQDA software; [This needs assessment recorded in detail in 2013 article]	program architecture / prototype developed; individual semi struc- tured interviews re archi- tecture (HSU n=7); audio recording; thematic analysis;	Not reported	Randomized Controlled Trial (RCT); Clinical Trials registra- tion NCT02579135 (HSU n=222) - results not yet reported
Winterling 2016 [63- 66]	Fex-Can, Fertili- ty and sexuality following can- cer	participatory design; CeHRes Roadmap (re- ferred to as holistic frame- work for devel- oping eHealth technologies by van Gemert- Pijnen et al)	depending on stage of research included newly diagnosed cancer patients or cancer survivors and significant others; age range 16-41; cancers included Hodgkin lymphoma (n=5), tumours of central nervous system (n-2), breast cancer (n-2), testicular cancer	health professionals with experience in primary care, psychotherapy & counseling in cancer care and sexually transmitted infections; physicians and nurse practitioners in cancer and reproductive care and sexual therapists		ethics approval for formative research, formative research via 39 x written online focus group discussions with cancer survivors aged 16-24 (HSU n=133); inductive qualitative content analysis/ thematic analysis of focus groups using NVivo software; individual semi structured interviews with 21 newly diagnosed cancer patients (HSU n=21); qualitative content analysis / thematic analysis of interviews;	[initial contextual interviews included value specification]; review of other websites to inspire design; literature review;	iterative design process adapting to feedback from HSU & HSP; rough content reviewed (HSU + HSP); reviews by patient research partners (HSU n=2): prototype devel- opment; heuristic evalua- tion (experts n=4); think aloud testing (HSU n=4);	PLANNED feasi- bility study with PRP to participate in interpretation of results (process and results not reported)	"Randomized Controlled Trial (RCT) - Interna- tional Standard Randomized Controlled Trial Number (ISRCTN): 36621459;

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			(n-2), cervical cancer (n-1) & Ewing sarcho- ma (n=1)							
Ennis 2014 [67, 69]	myhealthlocker. Electronic personal health record (ePHR) for people with severe & enduring mental health problems	participatory design	adult users of mental health services including psychosis and other diagnoses; age range 18-65;	clinicians from psychosis ser- vices and pri- mary care ser- vices	Research team: not defined other than as authors of another paper;	Ethics approval; creation of Advisory Board (HSU + HSP); development of interview schedules & survey questions collaboratively with Service User Advisory Group (HSU + HSP?); interviews re needs & priorities (HSU n=?); focus groups re needs & priorities (HSU n=?); audio recording & transcription of focus groups; survey of computer literacy & access (HSU n=121); data analysis of survey responses;	recruitment of paid PRP for feedback throughout (HSU n=13); initial 1 day meeting with PRP & RG to discuss collaboration preferences (HSU n=13);	design of logo & initial mock ups by designers; creation of Teen Advisory Board for ongoing feedback (HSU n=5); iterative drafting & piloting of intervention content by 7x meetings with Teen Advisory Board (HSU n=5); recording of audio clips as examples of good communication by Teen Advisory Board (HSU n=5); iterative technical development by Research Group in collaboration with Communications and Interventions (CHAI) Core over 12 months (experts); usability testing using think aloud protocol (HSU n=6); resulting changes to final product;	creation of service user planning committee re dissemination (HSU n=4); weekly drop in sessions at local community venues with end user cofacilitators (HSU n-3); feasibility questionnaire WEMWBS PROM (HSU n=23);	http://www.isri tn.com/ISRCTN 36621459. Results not yet reported."
Fleisher 2014 [68]	PRE-ACT (Pre- paratory Educa- tion About Clinical Trials)	Cognitive Social Health Infor- mation Pro- cessing Theory; Ottawa Deci- sion Support Framework	cancer patients and patient advocates; age range 40-70;	none defined		survey re barriers to decision making (HSU n=156);	[combined with contex- tual inquiry processes - see previous];	4 x 1-day meetings with PRP & RG during design step including plenary, small group discussions & individual assignments, meeting minutes & research reflections after (HSU n=12); log book of meeting minutes; iterative development between meetings including creation of mock up and prototype;	not reported	