Optimizing implementation of eHealth for dementia
Lessons from developing an eHealth Implementation Readiness (EmpRess)checklist

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Background

Situation: eHealth interventions are a possible solution for rising dementia care costs and potential negative effects on carers

Problem: Few evidence-based eHealth interventions are implemented in practice

Solution :
- Adapt existing implementation readiness (ImpRess; Streater et al., 2016) tool
- Was for manualized dementia interventions: now for eHealth

Intended result: To better map the implementation readiness of eHealth interventions, in order to identify common failings and help researchers improve dementia eHealth implementation of their own interventions

Aim

The aim of this study is to adapt the ImpRess checklist to assess the implementation readiness of eHealth interventions for dementia. This will allow researchers to better **map** the implementation readiness of eHealth interventions, in order to **identify** common failings and help researchers **improve** the sustainable implementation of their own dementia eHealth interventions

Framework: NASSS framework

This study applied the NASSS framework (Greenhalgh et al., 2017) to shape the interview guide and used its (sub)domains at deductive codes for the thematic analysis of the qualitative interviews.

Design

Part 1	Part 2
Semi-structured interviews with stakeholders (N=9) with expertise in eHealth and dementia	Adaptation of ImpRess into EmPress with research team

Participants Part 1

Background interview participant	Number
Researchers	3
Industry professionals	3
Clinician	1
Policy makers	2

Results Part 1: Interviews
- Preference for a non-dementia-specific, more general approach
- Importance of searching for shared values with implementers
- Need for more systematic monitoring of implementation
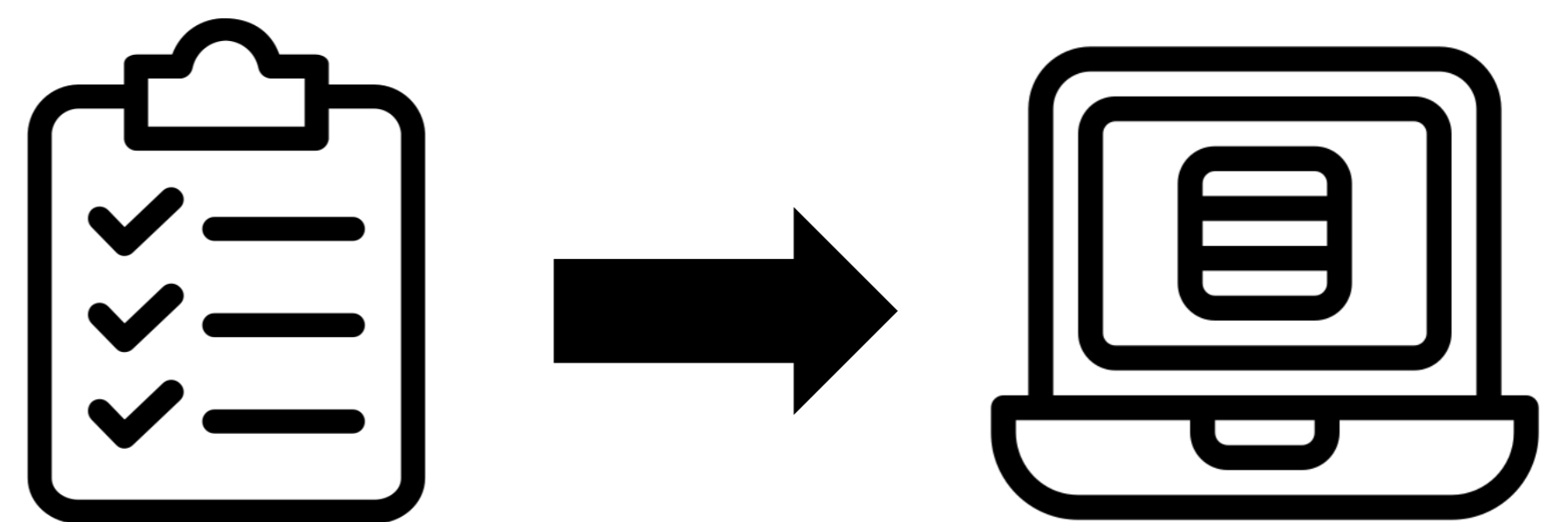
Results Part 2: EmpRess
New EmpRess items largely focus on the NASSS themes technology, scope and embedding over time, and organisations.
- More items
- Need for "blended" aspects is central
- Can be used to monitor what is and is not working in current projects
- May need to be a toolkit rather than a checklist.

Conclusions
- Inclusive design approach
- Takes into account the importance of blended and online and offline support

The further development of the Empress checklist will help evaluate the implementation determinants of eHealth interventions for dementia and provide up-to-date information on what is, and is not, working in eHealth for dementia care.

References:
Streater, A., Spector, A., Aguirre, E., Stansfeld, J., & Orrell, M. (2016). ImpRess: an Implementation Readiness checklist developed using a systematic review of randomised controlled trials assessing cognitive stimulation for dementia. *BMC medical research methodology*, 16, 1-9.
Greenhalgh, T., Wherton, J., Papoutsi, C., Lynch, J., Hughes, G., Hinder, S., ... & Shaw, S. (2017). Beyond adoption: a new framework for theorizing and evaluating nonadoption, abandonment, and challenges to the scale-up, spread, and sustainability of health and care technologies. *Journal of medical Internet research*, 19(11), e8775.

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